# **Public Document Pack**





# ADULTS AND COMMUNITIES SCRUTINY COMMITTEE

## TUESDAY 10 SEPTEMBER 2019 7.00 PM

## Bourges/Viersen Room - Town Hall

## AGENDA

Page No

#### 1. Apologies for Absence

#### 2. Declarations of Interest and Whipping Declarations

At this point Members must declare whether they have a disclosable pecuniary interest, or other interest, in any of the items on the agenda, unless it is already entered in the register of members' interests or is a "pending notification " that has been disclosed to the Solicitor to the Council. Members must also declare if they are subject to their party group whip in relation to any items under consideration.

#### 3. Minutes of the Adults and Communities Scrutiny Committee Meeting 3 - 10 Held on 1 July 2019

#### 4. Call In of any Cabinet, Cabinet Member or Key Officer Decisions

The decision notice for each decision will bear the date on which it is published and will specify that the decision may then be implemented on the expiry of 3 working days after the publication of the decision (not including the date of publication), unless a request for call-in of the decision is received from any two Members of the relevant Scrutiny Committee. If a request for call-in of a decision is received, implementation of the decision remains suspended for consideration by the relevant Scrutiny Committee.

#### 5. Peterborough Mental Health Section 75 Partnership Agreement - 11 - 90 Annual Report 2018-2019



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#### 6. Community Asset Transfer

Appendix 1 is an exempt annex which is NOT FOR PUBLICATION in accordance with paragraph (s) 3 of Schedule 12A of Part 1 of the Local Government Act 1972 in that it contains commercially sensitive information relating to the business affairs of the Council. The public interest test has been applied to the information contained within the exempt annex and it is considered that the need to retain the information as exempt outweighs the public interest in disclosing it.

7.	Youth Justice Plan 2019-22	97 - 118
8.	Monitoring Scrutiny Recommendations	119 - 122
9.	Forward Plan of Executive Decisions	123 - 170
10.	Work Programme 2019/2020	171 - 178
11.	Date of Next Meeting	

12 November 2019

#### **Emergency Evacuation Procedure – Outside Normal Office Hours**

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#### Committee Members:

Councillors: Simons (Chairman), K. Aitken, R. Bisby, S Bond, R. Brown (Vice Chairman), A. Ellis, J R Fox, J Howard, J Howell, M. Jamil and I. Yasin Co-opted Member: Parish Councillor Neil Boyce

Substitutes: Councillors: A. Bond, L. Coles, N. Day, D. Fower and H. Skibsted

Further information about this meeting can be obtained from David Beauchamp on telephone 01733 384628 or by email – <u>david.beauchamp@peterborough.gov.uk</u>.

PETERBOROUGH



## MINUTES OF THE ADULTS AND COMMUNITIES SCRUTINY COMMITTEE MEETING HELD AT 7PM ON MONDAY, 1 JULY 2019 BOURGES / VIERSEN ROOM, TOWN HALL, PETERBOROUGH

**Committee Members Present:** Councillors N Simons (Chairman), R. Bisby, S Bond, R. Brown (Vice-Chairman), L Coles, John Fox, J Howard, J Howell, H Skibsted, I Yasin. Co-opted Member: Parish Councillor Neil Boyce

Officers Present: Adrian Chapman - Service Director, Communities and Safety Sarah Ferguson – Asst. Director, Housing Communities and Youth Cate Harding – Community Capacity Manager Dave Anderson – Interim Development Director Sean Evans – Head of Housing Needs Rob Hill – Assistant Director, Public Protection David Beauchamp – Democratic Services Officer

#### 1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors M Jamil and K. Aitken. Councillors H. Skibsted and L. Coles were in attendance as substitutes.

#### 2. DECLARATIONS OF INTEREST

No declarations of interest were received.

#### 3. MINUTES OF THE ADULTS AND COMMUNITIES SCRUTINY COMMITTEE MEETING HELD ON 12 MARCH 2019

The minutes of the Adults and Communities Scrutiny Committee Meeting held on 12 March 2019 were agreed as a true and accurate record.

#### 4. CALL IN OF ANY CABINET, CABINET MEMBER OR KEY OFFICER DECISIONS

There were no requests for call in to consider.

#### 5. APPOINTMENT OF CO-OPTED MEMBERS

The Democratic Services Officer introduced the report which recommended that the Committee appoint Parish Council Neil Boyce as a non-voting co-opted member to represent the rural areas for the municipal year 2019/20.

The appointment of Parish Councillor Neil Boyce was proposed by Councillor Brown, seconded by Councillor Bisby and agreed **UNANIMOUSLY.** 

#### **ACTIONS AGREED:**

The Adults and Communities Scrutiny Committee **RESOLVED** to appoint Parish Councillor Neil Boyce as a non-voting co-opted member to represent the rural areas for the municipal year 2019/20. Appointment to be reviewed annually at the beginning of the next municipal year.

#### 6. COMMUNITY INVOLVEMENT IN NEIGHBOURHOOD ISSUES

The report was introduced by the Assistant Director – Housing, Communities and Youth, accompanied by the Community Capacity Manager. The report invited members to approve the recommendations of the Task and Finish group which has reviewed Community Involvement in Neighbourhood Issues during 2017 - 2018, in the context of significant programmes of work which have emerged since June 2017.

The report provided an opportunity for the Committee to be updated on progress against these wider programmes of work and agree to specific recommendations arising from them.

The Adults and Communities Scrutiny Committee debated the report and in summary, key points raised and responses to questions included:

- Members referred to item 4.12.2 on page 21 of the reports pack and expressed a view that Young People had been neglected. Members asked if the 'programmes of positive' events would help to help to create Youth Clubs via assistance with buildings, equipment etc. Members felt it was important to help youth groups become established in order to provide young people with an alternative to anti-social behaviour and asked if this was part of the Integrated Communities work and if funding was available.
- Officers responded that the Council's collaboration with the Peterborough Council for Voluntary Services via the Youth Investment fund had helped to provide youth services, including Youth Clubs. The City Council no longer provided direct support to these services. The focus was on helping youth community groups to operate independently and there were examples of this successfully taking place. Officers would pursue these collaborations with the voluntary sector and communities to work with young people whenever possible.
- There had been an overwhelmingly positive response with communities coming forward to seek assistance in setting up voluntary youth clubs and support, recognising the fact that the Council could no longer provide a universal service in this area. Many successful youth clubs were being developed across the City and the Council would continue to support these efforts.
- The focus of the Think Communities Forward Plan was to develop a focused place-based approach to use assets across the city, engage with community leaders and conduct social action.
- Members requested further information about work to 'Sign up Work 60 employers in Peterborough to Disability Confident' on page 39 of the reports pack. Members felt it was important to encourage employers to feel that they could meet the needs of people with disabilities and asked if officers had liaised with the Disability Forum or Westcombe Industries. Officers responded that they believed that they had had liaised with the Disability Forum and would discuss Westcombe Engineering's work with JobCentre Plus who were leading in this area.
- The Committee requested that officers confirme that engagement had taken place with the Peterborough Disability Forum. Officers to also confirm with Jobcentre Plus that they were engaging with Westcombe Engineering.

- Members referred to the '20 community guides' to be trained, mentioned on page 39 of the reports pack, and asked how they would be selected and if they would be based in specific areas. Officers responded that two community development workers had been recruited who would employ an asset/place-based approach to identify community leaders. These workers would undertake initial 'mapping' to identify existing activities and current community leaders. They would be supported by an external service to provide training, support and guidance to identify those who wished to work as guides to address issues in a particular neighbourhood. It was not possible to pre-empt who would be recruited. Mapping and proactive community engagement needed to take place first to encourage people to come forward and identify the strengths, assets and skills available in a particular area.
- Community guides would be recruited imminently and the community development workers had already been recruited.
- Members expressed concern over the criteria for the selection of Community Guides and suggested that Councillors should be considered because of their knowledge of individual wards. Officers responded that this process had just begun and would share additional information with members.
- The Committee requested more information on the Criteria used to select Community Guides
- Members asked how officers saw the role of Councillors. Officers responded that they were engaging with ward councillors as they were most familiar with particular areas of the City. Councillors should be ambassadors for the scheme and understand the contest in which the Council were working and be aware of the limitations. It was important to emphasise the shift from thinking the Council had all the answers to working with Communities for them to generate their own ideas instead.
- The Community Connectors would start work in August.
- It was acknowledged that parking provision was inadequate in Development Corporation areas and beyond, with particular difficulties faced on the Ortons. There were more cars per house than had been designed for.
- Officers stated that it was important to have a conversation about what it would cost to address these problems. Officers expressed support for developing creative solutions to parking issues and members expressed support for this taking place soon.
- Officers emphasised that this community work would only work with the involvement of Councillors due to their local knowledge. The Think Communities Work was inspired by a 2018 meeting of All Party Policy where a member discussed work underway in their ward to tackle drug paraphernalia. This encouraged officers and members to realise that Councillors were a group of 60 people who represented 200,000 and that this asset could be better utilised by officers than had been done in the past. This Committee would have a fundamental role in holding officers to account.
- Members referred to section 4.12.1 on page 20 of the reports pack and asked for further information on how the £300,000 communities fund would be spent. Officers responded that £220,000 had already been allocated with the rest to be distributed in September 2019. Additional information could be found on the Council's website.
- Members requested detailed information how the £300,000 Communities Fund had been spent as a briefing note.
- Members referred to the 'Consultation' section (section 5, page 21 of the reports pack) and asked if venues had been agreed for 'Community Conversations' and asked if these would include rural areas, noting that they had not received any publicity about them.

 Officers responded that they were planning a series of focus group conversations in Peterborough asking people how they felt about integration and living in the areas they do. This work was related to the Integrated Communities Strategy work and would be planned and delivered by University College Peterborough (UCP). Think Communities was a piece of work being delivered across Cambridgeshire and Peterborough and would include activities such as online and street surveys and events across the city. A list of locations would be provided and officers would aim to ensure these were not purely urban in nature. Officers recognised the importance of capturing a diverse range of voices in both urban and rural areas.

#### ACTIONS AGREED

The Adults and Communities Scrutiny Committee considered the report and **RESOLVED** to

- 1. Consider key recommendations from the Adults and Communities Scrutiny Committee Task and Finish Group Community Involvement in Neighbourhood Issues as set out in section 4.6 of this report.
- 2. Note the update on the development of Think Communities across Cambridgeshire and Peterborough and consider progress on key contributory programmes and initiatives in Peterborough, including Peterborough's Interim Integrated Communities Strategy 'Belonging Together'.
- 3. Note and agree to the proposal to explore bringing together a Cambridgeshire and Peterborough VCS infrastructure support contract from August 2020
- 4. Agree the new direction for how the original Task & Finish Group's objectives and recommendations can be fulfilled via Think Communities
- 5. Requested more information on the Criteria used to select Community Guides
- 6. Requested detailed information how the £300,000 Communities Fund had been spent
- 7. Requested that officers confirm that engagement had taken place with the Peterborough Disability Forum. Officers to also confirm with Jobcentre Plus that they were engaging with Westcombe Engineering.
- 8. Request that officers provide a list of locations for 'Community Conversations' to members to ensure there was sufficient representation of rural areas.

#### 7. REVIEW OF HOMELESSNESS REDUCTION STRATEGY 2018-2020 AND SAFER OFF THE STREETS

The Assistant Director of Housing, Communities Youth, the Interim Development Director and the Head of Housing Needs presented the report which provided the committee with an update of progress in delivering the City Council's Homelessness Reduction Strategy 2018 - 2020 and sought comments and agreements from members to the proposed process for 113 review of the review of the strategy and development of a new strategy for 2020 - 2025.

The Adults and Communities Scrutiny Committee debated the report and in summary, key points raised and responses to questions included:

 Members referred to section 6.1 on page 43 of the reports pack, noting that there had been more referrals from the Department of Work and Pensions, Prisons and Probation Services and stating that it was important to break the cycle of reoffending by helping to provide a person with somewhere to live and a job. Members asked officers if they were finding this difficult and for information about work with these other agencies.

- Officers responded that they had indeed seen an increase in referrals from the agencies mentioned, leading to an increased in people's expectations. The Homelessness Reduction Act gave the Council the ability to set realistic expectations and set targets for individuals. In the past a rigid five stage process had to be followed. The process was now much more flexible. The focus was on supporting people's transitions from Place A (e.g. a prison) to Point B (securing accommodation) and ensuring sufficient support was in place to support this. A personalised plan was developed for each person containing actions to be completed by both the individual and relevant agencies. If the action plan was followed, a person would have permanent sustainable accommodation found for them.
- The Council had an officer who visited prisons to enhance collaboration. There was also a homelessness forum which included representatives from the Prison, Police and Probation services, providing an opportunity to identify key issues and discuss different ways of working together. Peterborough City Council was part of a Cambridgeshire and Peterborough 'Homelessness Trailblazer' which looked at new offender pathways. More work needed to be done but the Council were moving in the right direction and improvements had been made.
- The Council should be informed 56 days before a prisoner was be released although this did not occur in reality. People moving between prisons caused difficulties in this area. The Council had a good relationship with prisons and it was rare that the Council were informed of a prisoner's release on the day it happened.
- Members praised the work of the Head of Housing Needs and the Garden House scheme.
- Members noted that there were currently six veterans sleeping rough and that other local authorities had introduced housing for Veterans because of the complex problems they often faced, noting that there was no such provision in Peterborough although this had been attempted in the past. Members felt that Peterborough City Council should take a lead to secure at least four houses as emergency accommodation for homeless veterans. Members emphasised that there was a veteran's liaison officer in the prison who liaised with the Armed Forces Partnership Board.
- Some members felt that it was sometimes difficult for people to understand that housing could not be provided by the Council if there was a lack of supply.
- Officers responded that an underspend by the service in 2018/19 had been used to support homeless veterans. Some of this funding had been given to the Garden House to support veterans in Peterborough. A dedicated part time Project Officer had also been appointed across Cambridgeshire and Peterborough to work on helping homeless veterans with housing. A great deal of work was underway to support veterans and it was hoped that a report on progress made would be provided in 2020/2021.
- Members raised a specific example of a rough sleeper who had been found in a Community Centre who had been moved on without finding out their circumstances. Members therefore asked who such organisations should contact if they experienced this in the future. Officers responded that it was important for information on homelessness and how to report specific instances to be widely published, including case studies. Extra information would be provided on the website and work on communications was a major focus in 2019. Streetlink.org was the nationally recognised route for rough sleeper referrals and the Peterborough City Council website also contained a reporting

form. Officers also felt it was important to liaise with those running community facilities so that targeted interventions could be made at the right time. It was important the Community Centres had all the relevant information and this might not have been done fully in the past.

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#### ACTIONS AGREED

The Adults and Communities Scrutiny Committee **RESOLVED** to:

- 1. Note the progress of Peterborough City Council and partners in the delivery of the Homelessness Reduction Strategy 2018 2020
- 2. Note the progress made in tackling rough sleeping in the City since the last update of Safer Off the Streets
- Consider, comment on and agree to the details of the process and timescales for reviewing the new Homelessness Reduction and Rough Sleepers Strategy 2020 - 2025

#### 8. PREVENT STRATEGY REFRESH – 2019/2021 (CRIME AND DISORDER SCRUTINY COMMITTEE FOR ITEM 8 ONLY)

The report was presented by the Assistant Director – Public Protection which outlined the newly combined Cambridgeshire and Peterborough Prevent Strategy.

The Adults and Communities Scrutiny Committee debated the report and in summary, key points raised and responses to questions included:

- Members referred to section 2.3 on page 73 of the reports pack and queried why the response to 'How this does this report link to the Children in Care' pledge was listed as 'N/A' when it had been demonstrated that people with adverse childhood experiences were more vulnerable. Officers agreed that there was a link to the Children in Care Pledge and that this should not have been listed as 'N/A'.
- Members emphasised the importance of liaison between Cllr Kevin Cuffley from Cambridgeshire County Council and Cllr. Irene Walsh from Peterborough City Council as the issues raised in the report crossed local authority borders. Members expressed confidence that they would do this successfully. Officers added that both Councillors would be invited to be standing members of the County Board and would be able to provide regular input. Members felt that these members should also attend Community Safety Partnerships. This was noted by officers.

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#### **RECOMMENDATION:**

The Adults and Communities Scrutiny Committee **RESOLVED** to endorse the strategy for approval by Cabinet and supported its relaunch via an internal and external engagement plan.

#### ACTIONS AGREED:

The Adults and Communities Scrutiny Committee **RESOLVED** to scrutinise and comment on the proposed refreshed Prevent Strategy for 2019/2021.

#### 9. REVIEW OF 2018/19 AND WORK PROGRAMME FOR 2019/2020

The Democratic Services Officer introduced the report which considered the 2018/19 year in review and looked at the work programme for the new municipal year 2019/20 to determine the Committee's priorities. The report asked the committee to consider if further monitoring of recommendations made during 2018/19 was required.

There were no further comments made.

#### **ACTIONS AGREED:**

The Adults and Communities Scrutiny Committee considered the report and **RESOLVED** to

- 1. Consider items presented to the Adults and Communities Scrutiny Committee during 2018/19 and makes recommendations on the future monitoring of these items where necessary.
- 2. Determine its priorities, and approve the draft work programme for 2019/2020 attached at Appendix 1.
- 3. Note the Recommendations Monitoring Report attached at Appendix 2 and considers if further monitoring of the recommendations made during the 2018/2019 municipal year is required.
- 4. Note the Terms of Reference for this Committee as set out in Part 3, Section 4, Overview and Scrutiny Functions and in particular paragraph 2.1 item 2 Adults and Communities Scrutiny Committee and paragraph 3.4 Crime and Disorder as attached at Appendix 3.

#### 10. FORWARD PLAN OF EXECUTIVE DECISIONS

The Democratic Services officer introduced the report which invited Members to consider the most recent version of the Forward Plan of Executive Decisions and identify any relevant items for inclusion within the Committee's work programme or to request further information.

There were no further comments made.

#### **ACTIONS AGREED:**

The Committee considered the report and **RESOLVED** to consider the current Forward Plan of Executive Decisions.

#### 11. DATE OF NEXT MEETING

10 September 2019.

Chairman 7pm – 8.07pm This page is intentionally left blank

ADULTS AND COMMUNITIES SCRUTINY COMMITTEE	AGENDA ITEM No. 5
10 SEPTEMBER 2019	PUBLIC REPORT

Report of:		Charlotte Black - Service Director, Adults and Safeguarding			
Cabinet Member(s) r	esponsible:	Councillor Wayne Fitzgerald - Deputy Leader and Cabinet Member for Adult Social Care, Health and Public Health			
Contact Officer(s):		, Head of Mental Health and Learning Commissioning, CCC and PCC	Tel. 07720 531347		

# PETERBOROUGH MENTAL HEALTH SECTION 75 PARTNERSHIP AGREEMENT: ANNUAL REPORT 2018-2019

RECOMMENDATIONS					
<b>FROM:</b> Oliver Hayward, Assistant Director, Commissioning, CCC and PCC	Deadline date: N/A				

It is recommended that the Scrutiny Committee:

- 1. Endorses the report as a full account of service and financial performance, activity and outcomes under the Partnership Agreement.
- 2. Endorses the revised Mental Health Section 75 Partnership Agreement including the uplift of £221,000 on the 2014 investment which addresses under-funding in non-pay, learning and development, management costs inc. Approved Mental Health Practitioner service management and the Prison Social Worker.

## 1. ORIGIN OF REPORT

1.1 This report is written and presented by the Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) as an account of the discharge of the responsibilities for mental health delegated to them through the Mental Health Section 75 Partnership Agreement for the year 2018-19.

## 2. PURPOSE AND REASON FOR REPORT

- 2.1 This report updates the Committee on service and financial performance, activity and outcomes under the Mental Health (MH) Section 75 Partnership Agreement 2018-19. As a significant focus for the year was to review and renew the Partnership Agreement, a report on the outturn of this work and the new Agreement is included.
- 2.2 This report is for the Adults and Communities Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 Overview Scrutiny Functions, paragraph number 2.1

Functions determined by Council:

1. Adult Social Care

- 2.3 The mental health services delivered under the duties delegated to CPFT through the Mental Health Section 75 Partnership Agreement support delivery of the Council's corporate objective of improving the quality of life of all its people and communities, helping to ensure that all communities benefit from growth and the opportunities it brings by supporting access to good quality, specialist assessment, treatment and support for adults aged 25 years and over living with mental health problems in Peterborough. In particular it supports achievement of the following strategic objectives:
  - Keep all our communities safe, cohesive and healthy
  - Achieve the best health and wellbeing for the city

It also supports achievement of:

- Driving growth, regeneration and economic development
- Improving educational attainment and skills
- Safeguarding vulnerable children and adults

#### 3. TIMESCALES

Is this a Major Policy	NO	If yes, date for Cabinet	N/A
Item/Statutory Plan?		meeting	

#### 4. BACKGROUND AND KEY ISSUES

4.1 Peterborough City Council (PCC) has delegated the delivery of mental health services and specified duties to the Trust for people with mental health needs aged 18 years and over to the Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) through a Partnership Agreement under Section 75 of the National Health Service Act 2006. This is known as 'The Mental Health Section 75 Partnership Agreement'/'The Agreement'. The intention is to enable delivery of an integrated health and social care mental health service which is so well co-ordinated that it appears to services users and carers it is being delivered by one organisation - seamlessly.

#### 4.2 Main Issues

- 4.2.1 This report covers the following areas:
  - Alignment with Corporate Priorities
  - Service performance, activity and outcomes
  - Financial performance

• Revision of the Mental Health Section 75 Partnership Agreement and agreement of a new eement 2019-20.

#### 4.2.2 Activity 2018/19

Delayed Transfer of Care (DTOC): During 2018-19 no DTOCs were attributable to adult social care for adults or older people with mental health problems.

The proportion of Adults in contact with secondary mental health care services in paid employment on Care Programme Approach (CPA), aged 18-69 at year end was 15.9% against a target of 12.5%.

The proportion of adults in contact with secondary mental health services living independently with or without support on CPA, aged 18-69 was 82.2% in March against a target of 75%.

The proportion of adults on CPA, aged 18-69 who have had annual reviews is 100%.

#### 4.3 Staffing

- 4.3.1 At year end, there were 6.71 vacancies. See Table below.
- 4.3.2

	Total Vacancies December 2018	Total Vacancies March 2019		
Professional Lead	0.29	0.29		
Team Leader	1.0	1.0		
Senior Practitioner	0.0	0.00		
Social Workers	4.62	3.02		
Support Workers	3.4	2.4		
Total	9.31	6.71		

#### 4.4 Care Packages Budgetary Performance

4.4.1 On 1 April 2018, the total financial commitment to care packages for adults and older people with mental health problems was £1,394k. On 31<sup>st</sup> March 2019, commitments had decreased by £192k (14%). How this was divided between adults and older people's mental health is shown in 4.4.2 and 4.4.3 below.

Mental Health Activity	Start	Q1	Q2	Q3	March	Moveme nt
AMH	922	963	884	823	772	-150

ОРМН	471	472	470	453	429	-42
Total	1,394	1,435	1,354	1,276	1,201	-192

#### 4.4.2 Adult Mental Health

The final position is a £150k favourable movement against a budget of £922k broken down as follows:

AMH Activity	Start	Q1	Q2	Q3	March	Moveme nt
Nursing	53	53	53	53	53	0
Residential	594	696	661	582	569	-25
Short Stay / Respite	35	1	1	1	1	-34
Direct payments	234	232	193	183	132	-102
Homecare	384	390	390	385	368	-16
Daycare	2	2	2	2	2	0
	1,303	1,374	1,300	1,208	1,125	-178
Client income	-49	-47	-52	-48	-38	12
Health / Other Income	-331	-364	-365	-336	-316	16
	-381	-411	-417	-384	-353	28
Total	922	963	884	823	772	-150

The number of Adult Mental Health (AMH) Service users was 97 at year end broken down as follows:

AMH service users	Start	Q1	Q2	Q3	March	Moveme nt
Nursing	1	1	1	1	1	0
Residential	16	17	16	15	14	-2

Short Stay / Respite	1	0	0	0	0	-1
Direct payments	35	34	31	29	30	-5
Homecare	42	43	46	45	40	-2
Daycare	1	1	1	1	1	0
	96	96	95	91	86	-10
Client income	86	81	77	74	70	-16
Health / Other income	19	21	21	19	17	-2
	105	102	98	93	87	-18
Unique Service user numbers	101	99	100	98	97	-4

## 4.4.3 Older People's Mental Health

The final position for older people's mental health (OPMH) was a £42k favourable movement against a budget of £471k broken down as follows.

OPMH Activity	Start	Q1	Q2	Q3	March	Moveme nt
Nursing	162	134	134	134	143	-19
Residential	222	225	223	237	235	13
Short Stay / Respite	0	0	0	0	1	1
Direct payments	86	75	81	71	57	-29
Homecare	176	185	181	174	143	-33
Assistive Technology	0	0	0	0	0	0
	646	618	619	616	580	-66
Client income	-87	-66	-65	-66	-58	29
Health / Other Income	-88	-81	-84	-97	-93	-5
	-175	-146	-149	-163	-151	23

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The number of Older Persons Mental Health Service users was 37 at year end broken down as follows:

OPMH service users	Start	Q1	Q2	Q3	March	Moveme nt
Nursing	4	3	3	3	4	0
Residential	8	8	8	8	8	0
Short Stay / Respite	0	0	0	0	1	1
Direct payments	5	5	5	5	4	-1
Homecare	19	20	21	21	17	-2
Assistive Technology	0	0	0	0	0	0
	36	36	37	37	34	-2
Client income	27	29	26	25	21	-6
Health / Other income	10	9	10	11	12	2
	37	38	36	36	33	-4
Unique Service user numbers	41	42	41	41	37	-4

#### 4.5 **Review of The Mental Health Section 75 Partnership Agreement**

4.5.1 The Section 75 Partnership Agreement was under review through 2018/19. The 2019/20 Agreement has been signed by the 2 Councils and has been through the governance processes within CPFT. Final sign off by CPFT will be at their Board meeting on 29<sup>th</sup> September 2019. However, it has been agreed that the new arrangements will be operationalised from August 2019. See Appendix 1.

The updated Agreement provides a robust legal framework that will support effective partnership working and protects the interests of all parties. The Agreement is for 1 year from 1 April 2019 to 31 March 2020 and is renewable year on year by agreement of both parties, a shorter period than for previous agreements, providing greater flexibility for adjustment by both parties. It updates the vision, aims and objectives for mental health services in line with the Council's corporate priorities and strategic direction and provides an improved framework for reporting service performance, activity and outcomes, ensures compliance with the General Data Protection Regulations 2018. It also ensures that the service is appropriately funded with an additional £220k allocated to address

underfunding in non-pay, training and development and staffing costs. Total investment through the Mental Health Section 75 Partnership Agreement 2019-20 is £1,482,328. (Appendix 1)

The Agreement includes an Annual Workplan which will address the areas listed below as priorities to ensure ongoing improvement in outcomes for people with mental health problems and their families/ carers, effective discharge of the delegated responsibilities and effective use of the Council's investment:

- 1. Social Care Delivery Model: Variation in social work practice across Cambridgeshire and Peterborough addressed.
- 2. Management Arrangements: Strong management and leadership for social care staff.
- 3. Carers: A consistent approach to carers assessment with assessments being completed by CPFT MH practitioners for those whose cared for person is supported by CPFT
- 4. Complaints: Complaints are managed effectively and within the timescales and requirements set for Local Authorities and Members/MP Enquiries and Freedom of Information Requests are managed effectively and within the timescales and requirements set for Local Authorities.
- 5. Financial Quality Assurance (Panel): Processes are consistent with standards in Adult Social Care and ensure the best outcomes for clients.
- 6. Information Sharing: An information sharing agreement which ensures compliance with the law and facilitates information sharing to improve outcomes at an individual and service level.
- **7. Safeguarding:** Safeguarding processes are effective and delivered to the standards/requirements set for Local Authorities.
- 8. Care Act Assessments: Care Act assessments are carried out consistently.
- **9.** Allied Mental Health Professional Service (AMHP): Robust, cost effective AMHP service and cost effective arrangements for 2019 Christmas period are effective.
- 4.5.2 Total investment in the Section 75 Partnership Agreement is £1,482,328. This is an increase of £221,000 on investment through the previous Agreement (2014) i.e. there had been no uplift to the initial investment. The uplift rectifies under funding in a number of key areas:
  - Non-pay (£50,000)
  - Learning and Development (£47,000)
  - Management costs inc. AMHP service (£95,000)
  - Prison Social Worker (£29,000)

#### 4.6 Quality

- 4.6.1 Mental Health services are committed to enabling people to have control over their lives and illness, to work in a strength-based approach to enable people, utilising the philosophy and the model of recovery. The integrated social and health care model provides a holistic response for people and carers, to enable people live healthy and independent lives.
- 4.6.2 Examples of feedback regarding the quality of the service we have provided are as follows:

During a recent inspection by the Care Quality Commission, two Social Workers were interviewed by an Inspector in the Peterborough Adult Community Team (PACT). Informal feedback was received by the Inspector that *interviewing the Social Workers had made him feel proud to be a Social Worker'*.

A Social Worker received positive feedback from the Court of Protection Judge, regarding the thoroughness of her report for the Court, which in turn helped the Service User (Older Person's Mental Health).

CPFT have presented a PRIDE award to one of the Older People Social Work Managers.

4.6.3 Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) have commissioned a new Recovery and Community Inclusion Service for Cambridgeshire and Peterborough. The service will wrap around the current local clinical enhanced mental health primary care and secondary mental health services to provide an equitable, community-based, recovery-focussed service to support people to make connections within their community, improve their mental wellbeing and develop the skills to self-manage and gain independence. Commencing on the 2<sup>nd</sup> of September 2019, the new service will be branded as the 'Good Life' service and will be delivered by Cambridgeshire, Peterborough and South Lincolnshire Mind. The Good Life Service takes a fresh approach to community based wellbeing support and has been developed alongside individuals with lived experience of mental health issues.

#### 5. CONSULTATION

- 5.1 None required
- 5.2 None required.

#### 6. ANTICIPATED OUTCOMES OR IMPACT

6.1 Endorsement of the report will validate financial and service activity and performance 2018-2019 and demonstrate the Committee's support for continued delegation of the Council's responsibilities for mental health as established under the Mental Health Section 75 Partnership Agreement in 2014 but with revised activity, performance and financial targets.

## 7. REASON FOR THE RECOMMENDATION

7.1 This report delivers the account of activity, outcomes and performance required under the Mental Health Section 75 Partnership Agreement and seeks endorsement to continue with the delegation of responsibilities to the Cambridgeshire and Peterborough NHS Foundation Trust.

#### 8. ALTERNATIVE OPTIONS CONSIDERED

8.1 The option of bringing the Mental Health Social Work service back into the Council was considered. However, the delegation of responsibilities to the Trust contributes to a more seamless experience and improved outcomes for people who require specialist mental health care and support. In addition, there would be significant implications and therefore disruption for staff and service users in the short term if there were to be a change. It was possible to reach agreement about the key areas of concern relating to delivery of core social care responsibilities and accountabilities, performance and outcomes (see Section 4.5 above). It was therefore not deemed necessary to change the arrangement.

#### 9. IMPLICATIONS

#### **Financial Implications**

- 9.1 Total investment in the Mental Health Section 75 Partnership Agreement is £1,482,328. This is an increase of £221,000 on investment through the previous Agreement (2014) i.e. there had been no uplift to the initial investment. The uplift rectifies under funding in a number of key areas:
  - Non-pay (£50,000)
  - Learning and Development (£47,000)
  - Management costs inc. AMHP service (£95,000)
  - Prison Social Worker (£29,000)

#### Legal Implications

9.2 There are no legal implications arising from the activity and decisions reported other than to recommend continuation of the arrangements established under the 2006 NHS Act of which, Section 75 allows delegation of responsibilities to an NHS body.

#### **Equalities Implications**

9.3 No significant implications arising from the report. However, CPFT always strives to ensure dignity and respect in all its interactions and interventions with service users and the public and to address discrimination and to respect the diversity of individuals whatever their origin or beliefs.

#### **Rural Implications**

9.4 No significant implications arising from the report.

## 10. BACKGROUND DOCUMENTS

10.1 NHS Act 2006 Care Act 2014 Mental Health Act 2007

#### 11. APPENDICES

11.1 The revised Peterborough Mental Health Section 75 Partnership Agreement 2019-20 is attached.

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#### DATED

1 April 2019 to 31 March 2020

## **SECTION 75 AGREEMENT**

between

## PETERBOROUGH CITY COUNCIL (1)

and

## CAMBRIDGESHIRE AND PETERBOROUGH NHS FOUNDATION TRUST (2)

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This Agreement is dated 1<sup>st</sup> April 2019

#### Between

- (1) **PETERBOROUGH CITY COUNCIL** of Town Hall, Bridge Street, Peterborough PE1 ("**Authority**"),
- (2) **CAMBRIDGESHIRE AND PETERBOROUGH NHS FOUNDATION TRUST** of Elizabeth House, Fulbourn Hospital, Cambridge CB21 5EF ("**NHS Body**")

each a "Party" and together the "Parties".

#### BACKGROUND

- (A) Section 75 of the National Health Service Act 2006 contains powers enabling local authorities to exercise various NHS functions and NHS bodies (as defined in section 275 of the NHS Act 2006) to exercise certain local authority functions. The Parties are entering into this Agreement in exercise of those powers under and pursuant to the NHS Bodies and Local Authorities Partnership Arrangements Regulations 2000 (*SI 2000/617*) (the "**Regulations**").
- (B) The Partners are committed to better integration of the Services and the NHS functions, and therefore wish to enter into the arrangements under this Agreement.
- (C) The purpose of this Agreement is to provide a framework under which the Authority shall delegate to the NHS Body the exercise of its functions in relation to the provision of the Services to the Resident Population as specified in Schedule 2.
- (D) This Agreement provides the framework within which the Parties will work together to achieve the Aims and Outcomes.

#### Agreed terms

#### 1. DEFINITION AND INTERPRETATION

1.1 The definitions and rules of interpretation in this clause 1 apply in this Agreement.

Adult: means Service Users for whom the Authority have funding responsibility.

**Agreement**: this Agreement between the Authority and the NHS Body comprising these terms and conditions together with all Schedules attached to it.

**Aims and Outcomes**: the objectives of the Parties, setting out how the Partnership Arrangements are likely to lead to an improvement in the way the Services are exercised via the development of an Integrated Care Service, as described in Schedules 1 and 2.

**AMHP:** means the Approved Mental Health Professional

Annual Development Plan: has the meaning set out in clause 7.

**Authorised Officers:** means the Authority's Authorised Officer and the NHS Body's Authorised Officer.

Authority Health and Social Care Related Functions: means those functions delegated from the Authority to the NHS Body to allow the NHS Body to provide the Services as detailed in Part 1A of Schedule 2.

**Authority's Authorised Officer**: Executive Director People and Communities, Cambridgeshire County Council and Peterborough City Council.

**Authority's Financial Contribution**: the Authority's financial contribution for the relevant Financial Year. The Authority's Financial Contribution for the First Financial Year is set out in Schedule 3.

**Business Day**: means any day other than Saturday, Sunday, a public or bank holiday in England.

Care Act: means the Care Act 2014.

**CAET (Care Act Eligibility Threshold)**: means the threshold for the provision of mental health and social care services determined by the Authority in accordance with the Care Act.

**Change in Law**: a change in Law that impacts on the Partnership Arrangements, which comes into force after the Commencement Date.

**CHC:** means Continuing Health Care.

Commencement Date: 1<sup>st</sup> April 2019.

**Complaints Regulations**: means the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

**Controller**: has the meaning given in the Data Protection Legislation.

**CPA**: means the Care Programme Approach.

**CQC:** means the Care Quality Commission.

CTO: means a Community Treatment Order.

**Data Protection Legislation**: means all applicable data protection and privacy Law (including the GDPR, the LED and the DPA 2018) and any relevant national implementing Laws and regulatory requirements, as amended from time to time, to which the Parties are subject, and any related guidance or codes of practice issued by the relevant supervisory authorities.

**Data Protection Impact Assessment**: means an assessment by the Controller of the impact of the envisaged processing on the protection of Personal Data.

Data Protection Officer: has the meaning given in the Data Protection Legislation.

DPA 2018: the Data Protection Act 2018.

**Data Loss Event**: means any event that results, or may result, in unauthorised access to Personal Data held by the NHS Body under the Agreement, and/or actual or potential loss and/or destruction of Personal Data in breach of the Agreement, including any Personal Data Breach.

Data Subject: has the meaning given in the Data Protection Legislation.

**Data Subject Request**: means a request made by, or on behalf of, a Data Subject to exercise the Data Subject's rights under the Data Protection Legislation.

Dispute Resolution Procedure: the procedure set out in clause 34.

EIR: means the Environmental Information Regulations 2004 (SI2004/3391).

**Exit Strategy:** means the strategy to be provided to the Authority by the NHS Body in accordance with clause 35.5.

Financial Year: 1 April to 31 March.

**First Financial Year**: 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2020.

**FOIA**: the Freedom of Information Act 2000 and any subordinate legislation made under it from time to time, together with any guidance or codes of practice issued by the Information Commissioner or relevant government department concerning this legislation.

**FOI Request:** means any request for information made to either Party under the FOIA (including in relation to any of the matters hereunder).

**GDPR:** the General Data Protection Regulation (Regulation (EU) 2016/679).

**Host Partner**: the host partner for the Services under this Agreement or the host partner for any functions as detailed within any of the Previous Section 75 Agreements, as appropriate.

Information: has the meaning given under section 84 of FOIA.

**Initial Term**: the period commencing on the Commencement Date and ending on the 31<sup>st</sup> March 2021.

**Insurance Protocol:** means the insurance protocol agreed between local authorities and NHS bodies in operating partnership arrangements under section 75 of the NHS Act 2006.

**Integrated Care Service:** means that part of the Services combining Mental Health Social Care Services and Social Care Services that aims to meet the health and social care needs of an individual in a seamless and well co-ordinated way, operating out of single premises, using single patient/Service User records, with single intake/duty systems.

**JCT:** means the Joint Commissioning Tool.

**Law**: any applicable law, statute, bye-law, regulation, order, regulatory policy, guidance or industry code, rule of court, directives or requirements of any Regulatory Body, delegated or subordinate legislation, or notice of any Regulatory Body.

LED: the Law Enforcement Directive (Directive (EU) 2016/680).

MCA 2005: means the Mental Capacity Act 2005;

**Mental Health Social Work Services**: that part of the Services dealing with mental health social care to be delivered by or on behalf of the Parties under this Agreement, as more particularly described in Schedule 2.

**MHA 1983:** means the Mental Health Act 1983 (as amended by the Mental Health Act 2007).

NHS Body's Authorised Officer: [Chief Executive Officer, CPFT.

NHS Health Related Functions: means those Services detailed in Part 2 of Schedule 2.

**Partnership Arrangements**: the arrangements made between the Parties under this Agreement.

Personal Data: has the meaning given in the Data Protection Legislation.

Personal Data Breach: has the meaning given in the Data Protection Legislation.

**Personal Data Instructions:** means the Authority's Personal Data Instructions set out in Section 25 and 25A].

**Pre-Existing Contracts**: means those Authority contracts in place at the Commencement Date which the NHS Body will need to utilise in providing the Services.

**Previous Section 75 Agreements**: previous agreements entered into by the Parties or their predecessor bodies under section 75 NHS Act 2006 or the Health Act 1999.

**Processor:** has the meaning given in the data Protection Legislation.

**Protective Measures:** means appropriate technical and organisational measures, which may include: pseudonymising and encrypting Personal Data, and which shall (i) ensure confidentiality, integrity, availability and resilience of systems and services; (ii) ensure that availability of and access to Personal Data can be restored in a timely manner after an incident; and (iii) include the requirement regularly to test, assess, re-evaluate and update the effectiveness of appropriate technical and organisational measures for the security of processing (Provided That the NHS Body shall notify the Authority of such updates and changes).

Quarter: one of the following periods in each Financial Year:

- a) 1 April to 30 June;
- b) 1 July to 30 September;
- c) 1 October to 31 December; and

d) 1 January to 31 March.

**Regulatory Body**: those government departments and regulatory, statutory and other entities, committees and bodies that, whether under statute, rules, regulations, codes of practice or otherwise, are entitled to regulate, investigate or influence the matters dealt with in this Agreement, or any other affairs of the Parties.

**Representative**: a Party's employee, agent or subcontractor and any employee of the other Party who is seconded to the Party and is acting in accordance with the Party's instructions.

**Request for Information**: a request for Information or an apparent request under the Code of Practice on Access to Government Information, FOIA or EIR.

**Resident Population:** means those Service Users who are resident within the Authority's area of responsibility.

**Section 75 Review Board:** means the board set up by the Parties in accordance with clause 17 and Schedule 4.

**Service Provider**: a third-party provider of any of the Services, as commissioned by the NHS Body or the Authority before the Commencement Date or the NHS Body from the Commencement Date.

**Service Users**: means Adults aged 18 years and over who are eligible to receive the Services, as more particularly described in Schedule 2.

**Services**: the Mental Health Social Work Services, the Social Care Services and the Integrated Care Services to be delivered by or on behalf of the Parties under this Agreement, as more particularly described in Schedule 2.

**Social Care Services**: that part of the Services dealing with social care to be delivered by or on behalf of the Parties under this Agreement, as more particularly described in Schedule 2.

**Sub-processor:** means any third party appointed to process Personal Data on behalf of the NHS Body pursuant to the Agreement.

**Term**: the period of the Initial Term as may be varied by:

- a) any extensions to this Agreement that are agreed under clause 3; or
- b) the earlier termination of this Agreement in accordance with its terms.

**VAT Guidance**: the guidance published by the Department of Health entitled "VAT arrangements for Joint NHS and Local Authority Initiatives including Disability Equipment Stores and Welfare- Section 31 Health Act 1999" as amended or replaced from time to time.

1.2 Clause, Schedule and paragraph headings shall not affect the interpretation of this Agreement.

- 1.3 The Schedules form part of this Agreement and shall have effect as if set out in full in the body of this Agreement. Any reference to this Agreement includes the Schedules.
- 1.4 Words in the singular include the plural and vice versa.
- 1.5 A reference to one gender includes a reference to the other genders.
- 1.6 A reference to a statute or statutory provision is a reference to it as it is in force for the time being, taking account of any amendment, extension or re-enactment and includes any subordinate legislation for the time being in force made under it.
- 1.7 A reference to **writing** or **written** includes faxes and e-mail.
- 1.8 Any obligation in this Agreement on a person not to do something includes an obligation not to agree or allow that thing to be done.
- 1.9 A reference to a document is a reference to that document as varied or novated (in each case, other than in breach of the provisions of this Agreement) at any time.
- 1.10 References to clauses and Schedules are to the clauses and Schedules of this Agreement. References to paragraphs are to paragraphs of the relevant Schedule.

#### 2. COMMENCEMENT AND DURATION

This Agreement shall take effect on the Commencement Date and shall continue for the Term.

#### 3. EXTENDING THE INITIAL TERM

The Parties may extend this Agreement beyond the Initial Term for a further period of one (1) years (and annually thereafter) on varied terms as they agree, subject to approval of the Parties' boards.

#### 4. **PARTNERSHIP ARRANGEMENTS**

- 4.1 The Parties enter into these Partnership Arrangements under section 75 of the NHS Act 2006 to provide integrated health and social care services to better meet the needs of the Service Users of the Resident Population than if the Parties were operating independently.
- 4.2 The purpose of this Agreement is to specify the conditions by which the NHS Body (or its successor body) shall take the lead for providing the Services to the Resident Population and to document the accountability arrangements governing the same.

- 4.3 The specific Aims and Outcomes of the Partnership Arrangements are described in Schedule 1.
- 4.4 From the Commencement Date, any Previous Section 75 Agreements are replaced by the provisions of this Agreement.
- 4.5 The Partnership Arrangements shall comprise:
  - (a) the delegation by the Authority to the NHS Body of the Authority Health and Social Care Related Functions, so that it may exercise the Authority Health and Social Care Related Functions and act as provider of the Services described in Schedule 2; and
  - (b) the establishment of the Authority's Financial Contribution for the Services.
- 4.6 The NHS Body shall host and provide the financial administrative systems for the Authority's Financial Contribution.
- 4.7 The NHS Body shall appoint a manager, who shall be responsible for:
  - (a) managing the Authority's Financial Contribution on behalf of the Parties;
  - (b) managing expenditure from the Authority's Financial Contribution within the budgets set by the Parties and in accordance with the Annual Development Plan; and
  - (c) submitting quarterly reports and an annual return to the Parties, to enable them to monitor the success of the Partnership Arrangements.
- 4.8 In accordance with Regulation 4(2) of the Regulations, the Parties have carried out a joint consultation on the proposed Partnership Arrangements with Service Users, and other individuals and groups who appear to them to be affected by the Partnership Arrangements.
- 4.9 Nothing in this Agreement shall prejudice or affect:
  - (a) the rights and powers, duties and obligations of the Parties in the exercise of their functions as public bodies or in any other capacity;
  - (b) the powers of the Authority to set, administer and collect charges for any Authority Health-Related Function; or
  - (c) the Authority's power to determine and apply eligibility criteria for the purposes of assessment under the Community Care Act 1990.

#### 5. DELEGATION OF FUNCTIONS

- 5.1 For the purposes of the implementation of the Partnership Arrangements, the Authority hereby delegates the exercise of the Authority Health and Social Care Related Functions to the NHS Body to act as lead commissioner of the Services for the provision of safeguarding, assessment (under both the Mental Capacity Act and the Care Act), care and support planning for Adults with (and carers of Adults with):
  - (i) severe and enduring mental health problems within the threshold of the CPA; and/or
  - (ii) mental health problems who meet the CAET but not CPA thresholds; and/or
  - (iii) mental health problems who require signposting and/or information advice but do not meet either the CAET or CPA thresholds;
- 5.2 Additional services may be brought within the scope of this Agreement during the Term by agreement.

#### 6. SERVICES

- 6.1 The NHS Body is the Host Partner for the Partnership Arrangements, and agrees to act as provider of all of the Services listed in clause 5.1 and all of the Services set out in Schedule 2.
- 6.2 The NHS Body shall provide the Services or procure that they are provided (and shall be accountable to the Authority for the same) for the benefit of Service Users:
  - (a) to ensure the proper discharge of the Parties respective duties and obligations;
  - (b) with reasonable skill and care, and in accordance with best practice guidance;
  - in all respects in accordance with the Aims and Outcomes, the performance management framework, the provisions of this Agreement, and the Authorities' applicable policies;
  - (d) in accordance with its rules on contracting; and
  - (e) in accordance with all applicable Law.

## 7. ANNUAL DEVELOPMENT PLAN

- 7.1 The Parties shall prepare an Annual Development Plan for each element of the Services at least four (4) weeks before the start of the Financial Year. The Annual Development Plan shall:
  - (a) set out the agreed Aims and Outcomes for the specific Services;

- (b) describe any changes or development required for the specific Services and how those changes will be delivered;
- (c) provide information on how changes in funding or resources may impact the specific Services; and
- (d) include details of the estimated Authority's Financial Contribution due from the Authority for each Service.
- 7.2 The Annual Development Plan shall commence on 1 April at the beginning of the Financial Year and shall continue for twelve (12) months.
- 7.3 The Annual Development Plan may be varied by written agreement between the Parties. Any variation that increases or reduces the number or level of Services in the scope of the Agreement may require the Parties to make corresponding adjustments to the Authority's Financial Contribution.
- 7.4 If the Parties cannot agree the contents of the Annual Development Plan, the matter shall be dealt with in accordance with clause 34. Pending the outcome of the dispute resolution process or termination of the Agreement under clause 35, the Authority shall make available an amount equivalent to the Authority's Financial Contribution for the previous Financial Year.

#### 8. PERFORMANCE MANAGEMENT

The Parties shall adhere to the performance management framework set out in Schedule 5.

#### 9. FINANCIAL CONTRIBUTIONS

- 9.1 The Authority shall pay the Authority's Financial Contribution to the NHS Body to manage in accordance with this Agreement and the Annual Development Plan.
- 9.2 The Authority's Financial Contribution for the First Financial Year is set out in Schedule 3.
- 9.3 The NHS Body shall invoice the Authority monthly in advance during the Term for that part of the Authority's Financial Contribution required to pay for the Services provided. All invoices received from the NHS Body will be paid by the Authority in accordance with its normal payment terms.
- 9.4 The NHS Body acknowledges that it has no direct control over the Authority's Financial Contribution and that this will be set and agreed outside the terms of this Agreement. The NHS Body will deliver the Services in accordance with the

Authority's Financial Contribution. The Authority shall inform the NHS Body of the Authority's Financial Contribution for the following Financial Year by 31 March.

- 9.5 The Authority's Financial Contribution is deemed to include the sums it may recover from the Service Users, irrespective of whether they are actually recovered. The Parties shall contribute all grants or other allocations that are intended to support the provision of the Services.
- 9.6 The Parties agree to adopt "Partnership Structure (a)" as described in the VAT Guidance through which the Parties agree that goods and services will be purchased in accordance with the Authority's VAT regime and reimbursed from the Parties' financial contributions.

#### 10. OVERSPENDS AND UNDERSPENDS

- 10.1 The NHS Body shall use its best endeavours to arrange for the discharge of the Authority Health and Social Care Related Functions and provision of the Services within the Authority's Financial Contribution available in each Financial Year.
- 10.2 The NHS Body shall make the Authority aware of any potential overspend as soon as it becomes aware of this possibility. The NHS Body will highlight reasons for the overspend, both current and projected, and take immediate action to bring the Authority's Financial Contributions back to balance.
- 10.3 If having taken action to address the cause of the overspend, the NHS Body deems that it is not possible to address it from with the Authority's Financial Contribution without significant risk to service users/carers/outcomes, the Authority will work with the NHS Body to determine whether alternative action can be taken or whether resources can be from other parts of the Section 75 Agreement. If the Head of Service (MH Commissioning) finds that there is significant risk to service users/carers/outcomes/the discharge of the Authority's statutory responsibilities which can only be addressed with additional funding, the Head of Service (MH Commissioning) will agree to additional investment.
- 10.4 The NHS Body shall make the Authority aware of any potential underspend in relation to the Authority's Financial Contribution, prior to the end of the Financial Year. The NHS Body shall highlight reasons for the underspend and identify any part of that underspend which is already contractually committed.
- 10.5 The benefit of any underspend at the end of the Financial Year or on termination or expiry of this Agreement (whichever is appropriate) shall be returned to the Authority.

10.6 The Parties acknowledge and agree that Services provided pursuant to section 117 MHA 1983 are funded jointly by the "Clinical Commissioning Group" and the Authority, and the Parties further acknowledge and agree that, in the event that a Service User, who is eligible to receive Services pursuant to section 117 MHA 1983, has had to pay for those Services themselves, such costs will be refunded to that Service User jointly by the Authority and CPFT on a 50:50 basis

#### 11. NOT USED

#### 12. SET UP COSTS

Each Party shall bear its own costs of the establishment of the Partnership Arrangements under this Agreement.

#### 13. PREMISES

- *13.1* The NHS Body shall provide the Authority with accommodation and facilities in the NHS Body's premises for the Term as the Parties agree are required for the performance of the Services.
- 13.2 The Authority shall provide the NHS Body with accommodation and facilities in the Authority's premises for the Term as the Parties agree are required for the performance of the Services.

#### 14. ASSETS

- 14.1 The Authority shall make available to the Partnership Arrangements any assets that the Parties agree are required for the performance of the Services.
- 14.2 The NHS Body shall make available to the Partnership Arrangements any assets that the Parties agree are required for the performance of the Services.
- 14.3 The provisions of clause 36 shall apply to the Parties assets on termination of this Agreement.

#### 15. STAFFING

15.1 The Authority wishes to delegate the execution of its responsibility under the MHA 1983 for the provision of AMHP services to the NHS Body. The Authority agrees to continue the secondment arrangements of AMHP and other social work staff to the NHS Body which was originally established in the section 31 Partnership Agreement for Integrated Service Provision dated 28 March 2002 (as modified by the Deed of Variation dated 1 January 2005). The Authority remains the employer of those staff that are listed in Schedule 6 (the "Seconded Staff").

- 15.2 The NHS Body agrees to manage the Seconded Staff as set out in clause 15.1.
- 15.3 On termination of this Agreement the Seconded Staff shall return to their employment with the Authority.

#### 16. CONTRACTS (PRE-EXISTING AND FUTURE)

- 16.1 The Authority appoints the NHS Body to act as agent for the Authority from the Commencement Date for any Pre-Existing Contracts.
- 16.2 The NHS Body shall enter into such contracts with third parties as it sees fit for the purpose of facilitating the discharge of the Authority Health and Social Care Related Functions and provision of the Services. The NHS Body shall ensure that all contracts entered into concerning the Authority Health and Social Care Related Functions and/or the Services are capable of assignment or novation to the Authority and any successor body.

#### 17. GOVERNANCE

- 17.1 The Authority shall nominate the Authority's Authorised Officer, who shall be the main point of contact for the NHS Body and shall be responsible for representing the Authority and liaising with the NHS Body's Authorised Officer in connection with the Partnership Arrangements.
- 17.2 The NHS Body shall nominate the NHS Body's Authorised Officer, who shall be the main point of contact for the Authority and shall be responsible for representing the NHS Body and liaising with the Authority's Authorised Officer in connection with the Partnership Arrangements.
- 17.3 The Authorised Officers shall be responsible for taking decisions concerning the Partnership Arrangements, unless they indicate that the decision is one that must be referred to the Section 75 MH Governance Board.
- 17.4 The Parties shall each appoint officers to the Section 75 MH Governance Board in accordance with Schedule 4. The terms of reference of the Section 75 MH Governance Board are set out in Schedule 4.

#### 18. QUARTERLY REVIEW AND REPORTING

- 18.1 The Parties shall carry out a quarterly review of the Partnership Arrangements within thirty (30) days of the end of each Quarter.
- 18.2 The manager of the Authority's Financial Contribution shall submit a quarterly report to the Section 75 Review Board setting out:

- (a) the performance of the Partnership Arrangements against the performance management framework in the preceding Quarter; and
- (b) any forecast overspend or underspend of the Authority's Financial Contribution and the action taken to address this.

### **19. ANNUAL REVIEW**

- 19.1 The Parties agree to carry out a review of the Partnership Arrangements within two (2) months of the end of each Financial Year (**Annual Review**), including:
  - (a) the performance of the Partnership Arrangements against the Aims and Outcomes;
  - (b) the performance of the individual Services against the service levels and other targets contained in the relevant contracts;
  - (c) plans to address any underperformance in the Services;
  - (d) actual expenditure compared with agreed budgets, and reasons for and plans to address any actual or potential underspends or overspends;
  - (e) review of plans and performance levels for the following year; and
  - (f) plans to respond to any changes in policy or legislation applicable to the Services or the Partnership Arrangements.
- 19.2 The NHS Body shall prepare an annual report following the Annual Review for submission to the Parties' respective boards.

#### 20. VARIATIONS

This Agreement may be varied by the Parties at any time by agreement in writing in accordance with each Parties internal decision-making processes.

### 21. STANDARDS

- 21.1 The Parties shall collaborate to ensure that the Partnership Arrangements are discharged in accordance with:
  - (a) the service standards set out in Schedule 2 and Schedule 5;
  - (b) the prevailing standards of clinical governance and good social care practice;
  - (c) the Authority's standing orders; and
  - (d) the requirements specified by the Care Quality Commission and any other relevant external regulator.

- 21.2 The Parties shall develop operational guidance and procedures to reflect compliance with clause 21.
- 21.3 The Parties shall ensure that each employee is appropriately managed and supervised in accordance with all relevant prevailing standards of professional accountability.

### 22. HEALTH AND SAFETY

- 22.1 The NHS Body shall (and shall use reasonable endeavours to ensure its Representatives) comply with the requirements of the Health and Safety at Work etc Act 1974 and any other acts, orders, regulations and codes of practice relating to health and safety, which may apply to the Services and persons working on the Services.
- 22.2 The NHS Body shall ensure that its health and safety policy statement (as required by the Health and Safety at Work etc Act 1974), together with related policies and procedures, are made available to the Authority on request.
- 22.3 The NHS Body shall notify the Authority if any incident occurs in the performance of the Services, where that incident causes any personal injury or damage to property that could give rise to personal injury.

### 23. EQUALITY DUTIES

- 23.1 The Parties acknowledge their respective duties under equality legislation to eliminate unlawful discrimination, harassment and victimisation, and to advance equality of opportunity and foster good relations between different groups.
- 23.2 The NHS Body agrees to adopt and apply policies in its carrying out of the Authority Health and Social Care Related Functions and/or the Services, to ensure compliance with their equality duties.
- 23.3 The NHS Body shall take all reasonable steps to secure the observance of clause 23 by all servants, employees or agents of the NHS Body and all contractors employed in delivering the Services described in this Agreement.

## 24. FREEDOM OF INFORMATION

24.1 The Parties are both public bodies and are subject to the FOIA and EIR. In compliance with the FOIA and EIR the Parties agree that requests for Information under the FOIA and the EIR shall be dealt with in accordance with clause 24.2 below.

- 24.2 Upon receipt of a request for Information by a Party (the "**Receiving Party**"), that Party shall be responsible for replying to the request for Information, but:
  - (a) if the request for Information relates solely to Information the Receiving Party does not have and which is owned by the other Party to the Agreement, the request for Information shall be transferred to the other Party within two (2) Business Days; and
  - (b) if the request for Information relates to Information being held by one Party on behalf of the other Party, the Parties shall consult on the request for Information but the responsibility for responding to the request for Information shall remain with the Receiving Party.

## 25. DATA PROTECTION

- 25.1 The Parties shall observe all of their obligations under the Data Protection Legislation that arise in connection with the Services.
- 25.2 The Parties shall ensure that Personal Data is safeguarded at all times in accordance with the Law, which will include without limitation obligations to:
  - (a) have a "Caldicott Guardian", as defined by the Local Authority Circular LAC 2002/2, in this case the NHS Body's nominated information governance lead, able to communicate with the Authority, who shall take the lead for information governance and from whom the Authority shall receive regular reports on information governance matters, including but not limited to details of all incidents of data loss and breach of confidence;
  - (b) (where transferred electronically) only transfer essential data that is (i) necessary for direct Service User care; and (ii) encrypted to the higher of the international data encryption standards for healthcare (this includes, but is not limited to, data transferred over wireless or wired networks, held on laptops, CDs, memory sticks and tapes);
  - (c) have policies which are rigorously applied that describe individual personal responsibilities for handling Personal Data;
  - (d) have agreed protocols for sharing Personal Data with other NHS and non-NHS organisations; and
  - (e) perform an annual information governance self-assessment.
- 25.3 The Parties acknowledge that for the purpose of the Data Protection Legislation, the Authority is the Controller and the NHS Body is the Processor. The only processing of Personal Data that the NHS Body is authorised to do in connection with the performance of this Agreement is listed in the Personal Data Instructions and may not be determined by the NHS Body.

- 25.4 The NHS Body shall notify the Authority immediately if it considers that any of the Authority's instructions infringe the Data Protection Legislation.
- 25.5 The NHS Body shall provide all reasonable assistance to the Authority in the preparation of any Data Protection Impact Assessment that arises in connection with the Agreement. Such assistance may, at the discretion of the Authority:
  - (a) a systematic description of the envisaged processing operations and the purpose of the processing;
  - (b) an assessment of the necessity and proportionality of the processing operations in relation to the Services;
  - (c) an assessment of the risks to the rights and freedoms of Data Subjects (including the risks that are presented by processing, in particular from accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to Personal Data transmitted, stored or otherwise processed); and
  - (d) the measures (including Protective Measures) envisaged to address the risks, including safeguards, security measures and mechanisms to ensure the protection of Personal Data.
- 25.6 The NHS Body shall, in relation to any Personal Data processed in connection with its obligations under the Agreement:
  - (a) process that Personal Data only in accordance with the Personal Data Instructions and other reasonable written instructions notified to it in advance by the Controller, unless the NHS Body is required to do otherwise by Law. If it is so required the NHS Body shall promptly notify the Authority before processing the Personal Data unless prohibited from doing so by Law.
  - (b) ensure that it has in place Protective Measures, which are appropriate to protect against a Data Loss Event, which the Authority may reasonably reject (but failure to reject shall not amount to approval by the Authority of the adequacy of the Protective Measures) having taken account of:
    - (i) nature of the data to be protected;
    - (ii) harm that might result from a Data Loss event;
    - (iii) state of technological development; and
    - (iv) cost of implementing any measures.
  - (c) ensure that:
    - the NHS Body Representatives do not process Personal Data except in accordance with this Agreement (and in particular the Personal Data Instructions) and are limited to such persons only as are required to

access the Personal Date for the purposes of its processing in accordance with the Agreement;

- (ii) it takes all reasonable steps to ensure the reliability and integrity of any NHS Body Representatives who have access to the Personal Data and ensure that they:
  - (A) are aware of and comply with the NHS Body's duties under this clause 25;
  - (B) are subject to appropriate confidentiality undertakings with the NHS Body or any Sub-processor;
  - (C) are informed of the confidential nature of the Personal Data and do not publish, disclose or divulge any of the Personal Date to any third party unless directed in writing to do so by the Authority or as otherwise permitted hereunder; and
  - (D) have undergone adequate training in the use, care, protection, sharing and handling of Personal Data.
- (d) not transfer Personal Data outside of the EU unless the prior written consent of the Authority has been obtained and the following conditions have been fulfilled:
  - the NHS Body has provided appropriate safeguards in relation to the transfer (whether in accordance with GDPR Articles 46-49 or LED Article 37) as determined by the Authority;
  - the NHS Body complies with its obligations under the Data Protection Legislation by providing an adequate level of protection to any Personal Data that is transferred (or, if it is not so bound, uses its best endeavours to assists the Authority in meeting its obligations); and
  - (iii) the NHS Body complies with any reasonable instructions notified to it in advance by the Authority with respect to any such proposed transfer of the Personal data;
- (e) return all Personal Data to the Authority, and securely destroy or wipe all copies of it held by the NHS Body, within two (2) months of the termination of the Agreement, or earlier if requested to do so in writing by the Authority, unless the NHS Body is required by Law to retain the Personal Data. The NHS Body shall send a written notice to the Authority (marked for the attention of the Data Protection Officer) confirming that Personal Data has been returned (with all copies securely destroyed or wiped) within such two (2) month period or earlier return as the Authority may have required, or that the NHS Body is required by Law to retain the Personal Data, in which case the NHS Body shall provide exact details of the Personal Data which the Processor is required to retain by Law and the legal basis for such retention.

- 25.7 Subject to clause 25.8, the NHS Body shall notify the Authority immediately if it:
  - (a) receives a Data Subject Request (or purported Data Subject Request);
  - (b) receives a FOI Request in relation to either Party's obligations hereunder and/or under the Data Protection Legislation;
  - receives any communication from the Information Commissioner or any other regulatory authority in connection with Personal Data processed under the Agreement;
  - (d) receives a request from any third party for disclosure of Personal Data; or
  - (e) becomes aware of a Data Loss Event.
- 25.8 The NHS Body's obligation to notify under clause 25.7 shall include the provision of further information to the Authority in phases, as soon as details become available.
- 25.9 Taking into account the nature of the processing, the NHS Body shall provide the Authority with prompt and full assistance in relation to either Party's obligations under Data Protection Legislation and the matters referred to under clause 25.7 including any complaint, communication or request or data Loss event (and insofar as possible within the timescales reasonably required by the Authority) including by promptly providing:
  - (a) the Authority with full details and copies of the complaint, communication or request;
  - (b) such assistance as is reasonably requested by the Authority (including in relation to appropriate technical and organisational measures) to enable the Authority to comply with a Data Subject Request, within the relevant timescales set out in the Data Protection Legislation;
  - (c) the Authority, at its request, with any Personal Data it holds in relation to the Data Subject;
  - (d) assistance as requested by the Authority following any Data Loss Event;
  - (e) assistance as requested by the Authority with respect to any request from the Information Commissioner's Office or other supervisory authority, or any consultation by the Authority with the Information Commissioner's Office or other supervisory authority.
- 25.10 The NHS Body shall maintain complete and accurate written or electronic records and information in relation to all the processing it carries out hereunder in accordance with Data Protection Legislation and shall immediately make the same available for inspection upon request by the Controller or a supervisory authority in relation to any of the matters referred to in clause 25.7, and in all other cases, no later than ten (10) Business Days after being requested by the Authority to do so.

- 25.11 The NHS Body shall allow for audits of its processing of Personal Data activities by the Authority or the Authority's designated auditor upon reasonable notice by the Authority and (without prejudice to the provisions for earlier access referred to in clause 25.10 in relation to matters referred to in clause 25.7) in any event no later than ten (10) Business Days after being requested by the Authority to do so.
- 25.12 The NHS Body shall designate a data protection officer if required by the Data Protection Legislation. If no data protection officer is required by the Data Protection Legislation, the NHS Body shall, upon signature hereof by the Parties, provide the name, office, contact address, e-mail address and telephone number of a duly authorised officer, who shall act as the NHS Body's representative and contact in relation to all Data Protection Legislation matters arising in relation to the Agreement.
- 25.13 The NHS Body shall not engage a Sub-processor to process any Personal Data related to the Agreement, without first obtaining the prior written authorisation of the Authority. If the NHS Body wishes to engage such Sub-processor it must first:
  - (a) notify the Authority in writing of the intended Sub-processor and processing; and
  - (b) provide the Authority with such information regarding the Sub-processor as the Authority may reasonably require; and
  - (c) obtain the prior written consent of the Authority.

If and subject to the Authority giving its prior written authorisation to the appointment of such Sub-processor, the NHS Body shall enter into a binding written agreement with the Sub-processor which gives effect to the terms set out in this clause 25 and will not allow the Sub-processor to process any Personal Data related to this Agreement before it has done so.

- 25.14 The NHS Body shall remain fully liable for all acts and omissions of any Subprocessor.
- 25.15 The Council may elect, at any time (on not less than thirty (30) Business Days' notice), to revise the provisions of this clause 25 (and relevant related definitions) by replacing it with any applicable controller to processor standard clauses or similar terms forming part of an applicable certification scheme, referred to in the Data Protection Legislation, and upon receiving such notice, the NHS Body agrees that it shall accept and be bound by the same.
- 25.16 The Parties agree to take account of any guidance issued by the Information Commissioner's Office. The Authority may on not less than thirty (30) Business Days' notice to the NHS Body amend the Agreement to ensure that it complies with any guidance issued by the Information Commissioner's Office or applicable replacement or alternative supervisory authority (as defined in the GDPR).

The Parties shall share information about Service Users to improve the quality of care and enable integrated working. The Parties shall adhere to the provisions of clauses 25 and 25A when sharing information under this Agreement.

### 25A INFORMATION SHARING

- 25A1 The Parties shall only share information between them that is necessary to fulfil their respective obligations under this Agreement to support delivery of the Integrated Care Service.
- 25A2 At the point of referral, the NHS Body shall provide the Service User with an information leaflet explaining the Integrated Care Service and the opt out process. The NHS Body shall ensure that Service Users understand:
  - (a) who their personal information will be shared with;
  - (b) what of their personal information will be shared; and
  - (c) why their personal information is being shared.
- 25A3. The NHS Body shall record a Service Users consent on the NHS Body's individual Service Users electronic health record. The NHS Body shall be responsible for ensuring that each Service Users electronic health record is up to date and accurate at all times.
- 25A4. The NHS Body shall inform Service Users that they have the right to opt out of sharing further information at any point in time, although where such a decision may have an adverse impact on the Services that the Service User will receive, the NHS Body must make the Service User aware of this.
- 25A5. The Parties acknowledge the common law duty of confidentiality and the right of Services Users to give, or refuse to give, consent with regard to the sharing of their information.
- 25A6. The Parties acknowledge that in certain circumstances information can be shared without seeking the Service Users consent. They are:
  - (d) where the information is required to be shared by Law;
  - (e) where there is a need to act promptly to deal with immediate serious risk;
  - (f) where there is a need to protect children and/or Adults from risk;
  - (g) where there is a risk of harm to others; and
  - (h) where there is an emergency and immediate action is required to preserve life.
- 25A8. Subject to the provisions of clause 25A9, if a Service Users information has been shared without consent pursuant to the provisions of clause 25A6, then the NHS Body shall ensure that this is clearly documented on the Service Users health record including the fact that the Service User has been informed of the reasons for doing so and with whom the information has been shared.

25A9. If the act of informing a Service User that their personal information will be shared would itself result in an unacceptable risk then such information can be shared without informing the Service User provided that the Service User is informed as soon as the NHS Body deems it safe to do so.

### 26. HEALTH AND SOCIAL CARE RECORDS

- 26.1 The Authority shall make available to the NHS Body its current and archived Service User files from the Commencement Date. The NHS Body shall hold, and be responsible for maintaining and the safekeeping of the Service User files for the Term, in accordance with Data Protection Legislation.
- 26.2 The NHS Body shall be responsible for facilitating Service Users in accessing their Personal Data under the Data Protection Legislation.

## 27. CONFIDENTIALITY

- 27.1 The Parties agree to keep confidential all documents relating to or received from the other Party under this Agreement that are labelled as confidential.
- 27.2 Where a Party receives a request to disclose Information that the other Party has designated as confidential, the receiving Party shall consult with the other Party before deciding whether the Information is subject to disclosure.

### 28. AUDIT

- 28.1 The NHS Body shall arrange for the audit of the accounts of the Authority's Financial Contributions in accordance with its statutory audit requirements.
- 28.2 The NHS Body shall provide to the Authority any reports required concerning the Services on reasonable notice.
- 28.3 The Parties shall co-operate in the provision of Information, and access to premises and staff, to ensure compliance with any statutory and/or internal inspection requirements, or other monitoring or scrutiny functions. The Parties shall implement recommendations arising from these inspections, where appropriate.

### 29. INSURANCE

- 29.1 The Parties shall effect and maintain a policy or policies of insurance, providing an adequate level of cover for liabilities arising under any indemnity in this Agreement.
- 29.2 The Parties shall co-operate with each other in the defence of any claim arising under this Agreement using the Insurance Protocol as guidance.

29.3 Each Party shall be responsible for insuring the premises and assets it contributes to the Partnership Arrangements.

### 30. INDEMNITIES

Each Party (**Indemnifying Party**) shall indemnify and keep indemnified the other Party (**Indemnified Party**) against all actions, proceedings, costs, claims, demands, liabilities, losses and expenses whatsoever, whether arising in tort (including negligence), default or breach of this Agreement, to the extent that any loss or claim is due to the breach of contract, negligence, wilful default or fraud of itself, the Indemnifying Party's employees, or any of its Representatives or sub-contractors, except to the extent that the loss or claim is directly caused by or directly arises from the negligence, breach of this Agreement, or applicable Law by the Indemnified Party or its Representatives.

### 31. LIABILITIES

- 31.1 Subject to clause 31.2, neither Party shall be liable to the other Party for claims by third parties arising from any acts or omissions of the other Party in connection with the Services before the Commencement Date.
- 31.2 Liabilities arising from Services provided or commissioned under the Previous Section 75 Agreements shall remain with the Host Partner for the Service under the relevant agreement.
- 31.3 Each Party shall, at all times, take all reasonable steps to minimise and mitigate any loss or damage for which the relevant Party is entitled to bring a claim against the other Party under this Agreement.

## 32. COMPLAINTS AND INVESTIGATIONS

- 32.1 The NHS Body shall endeavour to resolve complaints it receives about the Services through its own complaint procedures. It shall publicise the existence of a complaints procedure to those who have a right to complain and ensure the complainants who receive the Services are informed of their right to complain to the Authority under the Complaints Regulations if they are not satisfied with the NHS Body's response.
- 32.2 If Service Users make complaints directly to the Authority, the Authority shall deal with those complaints in accordance with the Complaints Regulations.
- 32.3 Where a complaint is formally investigated by the Authority under the Complaints Regulations, the NHS Body shall provide all necessary assistance with the complaints investigation, including the sharing of all information that the Authority requests to enable it to investigate the complaint. The response to such a complaint shall be agreed between the Parties. If there is a disagreement which cannot be resolved, the

complainant shall be informed of both the Authority's and the NHS Body's response, and (as in all other cases) shall be notified of the right to take the complaint to the complaints review panel arranged by the Authority.

- 32.4 The Parties shall review these arrangements if there are any changes to the Complaints Regulations with the aim of moving as close as is permitted by guidance and regulations to a fully integrated process for handling all complaints about the Services.
- 32.5 The Parties shall each fully comply with any investigation by the Ombudsman, including providing access to Information and making staff available for interview.
- 32.6 Where there is a finding of mal-administration by an Ombudsman in respect of the Services provided by the Parties under this Agreement after the Commencement Date, save where that Ombudsman finds that the Authority's negligence including breach of duty (statutory or otherwise) is the cause, the NHS Body shall be exclusively responsible for meeting any request for payment of compensation.
- 32.7 Quarterly reports regarding comments, complaints and compliments will be provided as part of the performance management framework.

### 33. HEALTHWATCH

- 33.1 The Parties shall promote and facilitate the involvement of Service Users, carers and members of the public in decision-making concerning the Partnership Arrangements.
- 33.2 The NHS Body shall ensure the effective discharge of its obligations in the establishment of local HealthWatch.
- 33.3 The NHS Body shall ensure its contracts with Service Providers require co-operation with Local HealthWatch as appropriate.

### 34. DISPUTE RESOLUTION

- 34.1 The members of the Section 75 Review Board shall use their best endeavours to resolve disputes arising out of this Agreement.
- 34.2 If any dispute referred to the Section 75 Review Board is not resolved within fourteen (14) days, either Party, by notice in writing to the other, may refer the dispute to the chief executives (or equivalent) of the Parties, who shall co-operate in good faith to resolve the dispute as amicably as possible within seven (7) days of service of the notice.

- 34.3 If the chief executives (or equivalent) fail to resolve the dispute in the allotted time, the Parties shall attempt to settle it by mediation in accordance with the Centre for Effective Dispute Resolution ("CEDR"). Unless otherwise agreed between the Parties, the mediator shall be nominated by CEDR. To initiate the mediation a Party must give notice in writing ("Dispute Notice") to the other Party to the dispute requesting a mediation. The mediation shall start not later than twenty-eight (28) days after the date of the Dispute Notice.
- 34.4 Any dispute not resolved within a reasonable time in accordance with clause 34.3 which arises or occurs between the Parties in relation to any thing or matter arising out of or in connection with this Agreement shall be finally settled by arbitration by one (1) arbitrator appointed in default of agreement between the Parties by the President or Vice President, for the time being, of the Chartered Institute of Arbitrators.
- 34.5 Either Party may refer a dispute for arbitration at any time and the commencement of mediation shall not prevent the Parties commencing or continuing any arbitration proceedings.
- 34.6 This clause 34 shall not prevent either Party from seeking injunctive relief at any time during the Term (regardless of whether the Dispute Resolution Procedure set out in this clause 34 has been exhausted or not) in the case of any breach or threatened breach by the other Party of any obligation under this Agreement.

### 35. TERMINATION

- 35.1 Without prejudice to other rights and remedies at law, and unless terminated under clause 35.2 or 35.3, either Party may terminate this Agreement at any time by giving six (6) months' written notice to the other Party.
- 35.2 Subject to clause 35.3, either Party may terminate this Agreement at any time by giving six (6) months' written notice to the other Party, if for budgetary reasons:
  - (a) in the case of the Authority, it is no longer able to make the Authority's Financial Contribution or otherwise contribute sufficient resources to the Partnership Arrangements (or any part of them); or
  - (b) in the case of the NHS Body, it is of the reasonable opinion that in light of the Authority's proposed Authority's Financial Contribution the Partnership Arrangements (or any part of them) are no longer viable.
- 35.3 Either Party (for the purposes of this clause 35.3, the **First Party**) may terminate this Agreement with immediate effect by the service of written notice on the other Party (for the purposes of this clause 35.3, the **Second Party**) in the following circumstances:

- (a) if the Second Party is in breach of any material obligation under this Agreement, provided that, if the breach is capable of remedy, the First Party may only terminate this Agreement under clause 35.3, if the Second Party has failed to remedy the breach within twenty-eight (28) days of receipt of notice from the First Party (**Remediation Notice**) to do so;
- (b) there is a Change in Law that prevents either Party from complying with its obligations under this Agreement;
- (c) its fulfilment of its obligations would be in contravention of any applicable guidance from the UK Government issued after the Commencement Date;
- (d) its fulfilment would be ultra vires; or
- (e) following a failure to resolve a dispute under clauses 34.1 and 34.2.
- 35.4 The provisions of clause 36 shall apply on termination of this Agreement.
- 35.5 The NHS Body shall support and assist the Authority in managing the smooth and timely transition of the Services in respect of the expiry or termination of the Agreement, by providing all necessary resources, records and information relating to the Services and/or handing over Services to the Authority or any replacement provider of the Services. The NHS Body shall also provide a detailed exit plan (the "Exit Strategy") to the Authority at least three (3) months prior to the expiry of the Agreement, for the Authority's approval.

### 36. CONSEQUENCES OF TERMINATION

- 36.1 On the expiry of the Term, or if this Agreement is terminated for any reason:
  - (a) the Parties will comply with the Exit Strategy;
  - (b) premises and assets shall be returned to the contributing Party in accordance with the terms of their leases, licences or agreed schedule of condition;
  - (c) assets purchased from the Authority's Financial Contributions shall be disposed of by the NHS Body and the proceeds of sale allocated according to the Authority;
  - (d) contracts entered into by the NHS Body concerning the Authority Health and Social Care Related Functions and/or the Services shall be novated to the Authority and the Authority shall accept the novation; and
  - (e) the NHS Body shall transfer to the Authority all records in its possession relating to the Authority Health and Social Care Related Functions and the Services.
- 36.2 Overspends on termination of the Agreement shall be dealt with in accordance with clause 10.3.

- 36.3 Subject to clause 36.4, underspends on termination of the Agreement shall be dealt with in accordance with clause 10.5.
- 36.4 The provisions of the following clauses shall survive termination or expiry of this Agreement:
  - (a) clause 24;
  - (b) clause 25;
  - (c) clause 26;
  - (d) clause 28;
  - (e) clause 30;
  - (f) clause 31; and
  - (g) clause 36.

## 37. PUBLICITY

- 37.1 The Parties shall use reasonable endeavours to consult one another before making any press announcements concerning the Services or the discharge of either Party's obligations under this Agreement.
- 37.2 All stationery, publications and liveries used by the NHS Body with regard to this Agreement shall be designed in accordance with standards to be agreed with the Authority.

## 38. NO PARTNERSHIP

- 38.1 Nothing in this Agreement shall be construed as constituting a legal partnership between the Parties or as constituting either Party as the agent of the other for any purpose whatsoever, except as specified by the terms of this Agreement.
- 38.2 The provisions of the Partnership Act 1980 will not apply to this Agreement.

## **39. THIRD PARTY RIGHTS**

No one other than a party to this Agreement (their successors and permitted assignees) shall have any right to enforce any of its terms.

## 40. NOTICES

40.1 Notices shall be in writing and shall be sent to the other Party marked for the attention of the chief executive (or equivalent) or another person duly notified by the Party for

the purposes of serving notices on that Party, at the address set out for the Party in this Agreement.

40.2 Notices may be sent by first class mail or facsimile transmission, provided that facsimile transmissions are confirmed within twenty-four (24) hours by first class mailed confirmation of a copy. Correctly addressed notices sent by first class mail shall be deemed to have been delivered seventy-two (72) hours after posting and correctly directed facsimile transmissions (sent via FAX Safe Haven) shall be deemed to have been received instantaneously on transmission, provided that they are confirmed as set out above. Emails shall be deemed to have been received instantaneously provided there is an email receipt from the receiver.

### 41. ASSIGNMENT AND SUBCONTRACTING

Neither Party shall assign, transfer, mortgage, charge, subcontract, declare a trust over or deal in any other manner with any or all of its rights and obligations under this Agreement without the prior written consent of the other Party.

### 42. SEVERABILITY

If any provision or part-provision of this Agreement is or becomes invalid, illegal or unenforceable, it shall be deemed modified to the minimum extent necessary to make it valid, legal and enforceable. If such modification is not possible, the relevant provision or part-provision shall be deemed deleted. Any modification to or deletion of a provision or part-provision under this clause shall not affect the validity and enforceability of the rest of this Agreement.

### 43. WAIVER

- 43.1 The failure of either Party to enforce any of the provisions of this Agreement at any time or for any period of time shall not be construed to be a waiver of any such provision and shall in no matter affect the right of that Party thereafter to enforce such provision.
- 43.2 No waiver in any one or more instances of a breach of any provision of this Agreement shall be deemed to be a further or continuing waiver of such provision in other instances.

## 44. ENTIRE AGREEMENT

This Agreement, the Schedules and the documents annexed to it or otherwise referred to in it contain the whole agreement between the Parties relating to the subject matter of it and supersede all prior agreements, arrangements and understandings between the Parties relating to that subject matter.

### 45. GOVERNING LAW AND JURISDICTION

Subject to clause 34, this Agreement and any dispute or claim arising out of or in connection with it or its subject matter shall be governed by and construed in accordance with the law of England and Wales, and the Parties irrevocably agree that the courts of England shall have exclusive jurisdiction to settle any dispute or claim that arises out of or in connection with this Agreement.

### 46. FAIR DEALINGS

The Parties recognise that it is impracticable to make provision for every contingency which may arise during the life of this Agreement and they declare it to be their intention that this Agreement shall operate between them with fairness and without detriment to the interests of either of them and that if in the course of the performance of this Agreement, unfairness to either of them does or may result then the other shall use its reasonable endeavours to agree upon such action as may be necessary to remove the cause or causes of such unfairness.

This Agreement has been executed as a deed and is delivered and takes effect on the date stated at the beginning of it.

## Schedule 1: AIMS AND OUTCOMES

The Aims and Outcomes of this Agreement are:

- 1. To provide a framework under which the Authority shall delegate to the NHS Body the exercise of its functions in relation to the provision of the Services to the Resident Population;
- 2. To specify the conditions by which the NHS Body (or its successor body) shall take the lead responsibility for providing the Services to the Resident Population; and
- 3. To describe the accountability arrangements that accompany the Partnership Arrangements.

In addition to the above, the Parties to this Agreement aim to secure better outcomes in respect of the Services for adults of all ages with mental health needs within the Resident Population. This is to be achieved in line with the Authority's responsibilities and vision for adult social care, and within the resources allocated by the Authority for this purpose. The Parties shall work together in the context of the strategic governance arrangements set out in Schedule 4 to ensure that the aims and objectives of the Agreement are met.

With the intention set out in the paragraph above, the Parties aim is to deliver integrated mental health through a combined health and social care service. This service will deliver assessment, treatment, care, and support services (including for carers) for those people experiencing emotional, psychological distress and mental ill health.

### Schedule 2: SERVICES

### Schedule 2 Part 1: DELEGATED FUNCTIONS

### Schedule 2 Part 1A Authority Health and Social Care Related Functions

Means those of the health related functions of the Authority, specified in Regulation 6 of the Regulations that are relevant to the commissioning of the Services and which are further described below and in Part 2 of this Schedule 2:

All adult social care-related functions specified in Schedule 1 to the Local Authority Social Services Act 1970 so far as they relate to mental health services for adults of all ages (including the functions under the Care Act specified in Schedule 1 to the Local Authority Social Services Act 1970) except where prevented by statute, including:

- i) Provision of Social Care Services for people with mental health problems including older people;
- ii) Provision of the Authority's functions under the MHA 1983;
- iii) Provision of the Authority's functions under the MCA 2005 and Deprivation of Liberty Duties for adults and older people;
- iv) Assessment of need and care and support planning, monitoring and review of needs for community care services under the Care Act;
- v) Personal budgets/direct payments, including undertaking assessments leading to the Authority making payments to individuals for purchasing community care services;
- vi) Identifying carers and assessment of their needs in accordance with Authority policies i.e. either directly or via one of the carers' Services commissioned by the Authority;
- vii) Assessment of ability of carers to provide care;
- viii) Identifying the need for, and publishing information about Social Care Services, provision of certain services, and providing certain information to the Secretary of State;
- ix) Working with people with mental health problems, carers and community/voluntary sector organizations to co-produce support and services;
- x) Co-operation in relation to homeless people and people threatened with homelessness and people with drug and alcohol problems with mental health problems;
- xi) Safeguarding Adults, including when not engaging;

xii) Support and advice to other services, including services for adults with learning disabilities and/or autism who have mental health needs;

### Schedule 2 Part 1B NHS Health Related Functions

Means those of the NHS functions listed in Regulation 5 of the Regulations as are exercisable by the NHS Body as being relevant to the commissioning of the Services and which are described in Part 2 of this Schedule 2.

# Schedule 2: PROVISION of MENTAL HEALTH SOCIAL WORK/SOCIAL CARE SERVICES

## 1. Overview

## 1.1 Summary

The Agreement relates to the need for social care assessment and support of adults with mental health problems living in Peterborough.

The NHS Body works within the framework of the Care Act and Care Programme Approach (CPA). However, the models in which Mental Health Social Work Services are provided differs in Peterborough and Cambridgeshire. Peterborough currently operates an *'aligned'* model whereas Cambridgeshire operates an *"integrated"* model of delivery with Social Workers being part of the multi-disciplinary team.

During the term of the Agreement, it is the intention of the Parties that action will be taken to reduce the variation in the models and reducing variation is one of the key principles that underpins this Agreement for both Peterborough and Cambridgeshire. This Schedule takes into account the fact that, at the Commencement Date of the Agreement, this process will only just have started. The work that will be undertaken to reduce variation will be undertaken in the context of the two other key principles that underpin the Agreement, namely:

- 1. Ensure that the responsibilities delegated to the NHS Body by PCC and CCC through their respective Agreements can be and are discharged in full including compliance with the Care Act.
- 2. Delivery of effective and efficient multi-disciplinary care that ensures that individual needs are met in a seamless way.

Therefore, a review of the effectiveness of the current models – in Peterborough and Cambridgeshire - will be undertaken in the first year of the Agreement. If a move towards a new delivery model is indicated a plan to transition to the new approach will be agreed and implemented. This workstream is included in the first year's Annual Development Plan.

The narrative that follows describes the Services as at the Commencement Date. This Schedule 2 will be amended when the work described above is completed.

# 1.2 The Care Act

The Care Act introduced a general duty on local authorities to promote an individual's 'wellbeing'. This means that they should always have a person's wellbeing in mind when making decisions about them or planning services. If the impact on an individual's wellbeing is significant then the eligibility criteria are likely to be met.

Wellbeing can relate to:

- Personal dignity (including treatment of the individual with respect);
- Physical and mental health and emotional wellbeing;
- Protection from abuse and neglect;
- Control by the individual over day-to-day life (including over care and support);
- Participation in work, education, training or recreation;
- Social and economic wellbeing;
- Domestic, family and personal relationships;
- Suitability of living accommodation; and
- The individual's contribution to society.

The core purpose of adult care and support is to help people to achieve the outcomes that matter to them in their life. It must focus on the needs and goals of the person concerned. Local authorities must promote wellbeing when carrying out any of their care and support functions in respect of a person. This may sometimes be referred to as 'the wellbeing principle' because it is a guiding principle that puts wellbeing at the heart of care and support. The wellbeing principle applies in all cases where a local authority is carrying out a care and support function, or making a decision, in relation to a person. It applies equally to adults with care and support needs and their carers.

# 1.3 The Care Programme Approach

The needs of adults with severe and/or complex mental health problems must be met using the multi-disciplinary Care Programme Approach which aims to ensure that care is co-ordinated effectively and therefore seamless<sup>1</sup>.

# 1.4 Ethos

Services will be delivered to accord with the Authority's and the NHS Body's values as set out below:

<sup>&</sup>lt;sup>1</sup> People managed under CPA are also managed within the context of the Care Act and the Human Rights Act.



Services will be responsive, flexible, accessible, inclusive, encompassing the principles of achieving recovery and social inclusion. They will promote independence by supporting people with mental health problems to gain employment and volunteer in their community and through short term interventions including reablement, rehabilitation, recovery or other preventative services.

The vision for Adult Social Care across Cambridgeshire and Peterborough is that "**People are supported to remain as independent as possible in and by their communities**". This means:

- A person centred approach where professionals work collaboratively with people to develop the knowledge, skills and confidence they need to more effectively manage and make informed decisions about their own care. Supporting people in a way that works for them. And treating people with dignity, compassion and respect.
- A more localised approach to supporting citizens, where people feel connected and able to help themselves and each other. Nurturing local interventions wherever possible. And recognising that everyone has something of value to contribute to the neighbourhood.
- Strength based conversations which focus on what the person can do for themselves using their own skills and experience; as well as the support that friends, family and the local community can offer.
- Focusing on early intervention and prevention, and maximising people's independence at every interaction. Working with people to plan for their future, to stay resilient and well connected.
- Delivering services for the future in an efficient and affordable way

People have better outcomes when they are supported to remain as independent as possible in and by their communities. Better outcomes influences the level of demand placed on our councils in a way that does not rely on cutting services or restricting access, and ultimately costs less. In addition, practice will aim to prevent the escalation of mental and physical health problems.

The NHS Body is expected to take into account the strategic objectives, priorities and outcomes defined by the Authority in delivery of assessment and support. These are updated from time to time and are published on the Authority's website.

The NHS Body shall work with the Authority to deliver the outcomes agreed by the Authority and NHS commissioners. Key indicators from existing adult social care and NHS data sets have

been selected based on an understanding of the things that are of the greatest importance to people with mental health problems which have informed the Adult Social Care Outcome Framework (ASCOF), The Five Year Forward View for Mental Health (2016), No Health without Mental Health (2016), the NHS Long Term Plan (2019) and other national strategy and policy documents which can be summarised as follows:

- I feel safe and secure;
- I have a safe home;
- I have meaningful occupation;
- I have friends and relationships; and
- My mental health has improved.

Services will be 'personalised', promote choice and control, dignity and respect and safeguard adults. This will require providing independent advice and information on the range of services provided by the statutory sector, independent sector and voluntary sector organisations and promoting the use of direct payments.

## 2. Specification of Services

## 2.1 Overview

The overall purpose of the Services is to provide a comprehensive, responsive, integrated, community focused mental health service. Mental Health Locality Teams (Adults) and Neighbourhood Teams (Older People) are the main vehicle for this. They are multi-disciplinary teams offering specialist assessment, treatment, care and support in their own homes in the community wherever possible. They provide a range of community-based health services in addition to social care. Access to the Services is through primary care, direct referral to the team or following admission to hospital. Involvement ranges from short-term treatment and care management to continuing care support over an extended period. Arrangements must be made to ensure that the approach to mental health assessment, treatment, care planning and support takes into account both health and social care needs and is compliant with the Care Act and CPA guidance.

In order to meet mental health needs effectively, both their health and social care needs must be assessed and co-ordinated by professionals from both areas and across disciplines within health services. Governance of the integrated service will be shared across health and social care. The Services delivered will include:

- Statutory assessment under the Care Act and determination of eligibility for Service Users with mental health problems and their carers;
- Assessment under the MHA 1983 and the MCA 2005 including Deprivation of Liberty Safeguards;
- Treatment, care, and support services for those Service Users experiencing emotional, psychological distress and mental ill health including those experiencing mental health crisis;
- Provision of support and care planning for Service Users and their carers eligible under the Care Act;
- Reablement;
- Signposting and information and advice as appropriate;
- AMHP functions on behalf of the Authorities as delegated by the Director of Adult Social Care;

# 2.2 Services Description

## Carrying Out All Aspects Re MHA 1983 Assessments/Related Work

AMHPs will undertake assessment under the MH Act 1983 of anyone who is identified as requiring that assessment.

## **Undertaking Assessment and Care and Support Planning**

Assessment and care and support planning will be undertaken through the jointly agreed operational framework of the Care Act and CPA using the appropriate assessment tools. Wherever possible, the individual should be engaged in supported self-assessment of needs. A support plan should be developed in partnership with the individual and his/her family or carers where relevant. Support planning should focus on outcomes using the support and assistance available from a range of sources including friends, carers and/or family and advocates. Impartial advice about the benefits of using Direct Payments for all or part of the Personal Budget should be given along with information and advice about the range of available support to be provided.

## Discharge Planning From Hospital

Staff will engage with, and where necessary, will lead discharge planning from psychiatric hospital for people with identified social care needs. In keeping with best practice, engagement should begin early in an admission so that the action required to achieve discharge when the individual is ready for that discharge can be completed and not create a delay. Staff will support and provide advice to colleagues when needed.

## Identifying Service Users Who May Be Eligible For CHC Assessments

Staff are responsible for preparing and participating in multi-disciplinary assessments using the national Continuing Health Care (CHC) framework.

## Identifying Service Users Who Have Section 117 MHA 1983 After Care Status

Staff are responsible for using the Joint Commissioning Tool (JCT) to determine how the care package should be funded between the NHS Body and the Authority.

## **Referring Service Users for Prompt Financial Assessment**

Staff are responsible for ensuring prompt financial assessment of those who have social care needs and are assessed as needing longer term support, except where the Service User is exempt from charges under section 117 MHA 1983. Staff must ensure that there is timely communication in relation to this.

# **Recording Case Information**

Staff should record case information In a timely and accurate way on the shared MH data base<sup>2</sup> and in accordance with the NHS Body's policies and procedures. All case recording should show a clear chronology of events and core information, including risk assessment and risk management plans, having compliance with the relevant policies. All AMHP MHA 1983 assessment activity must be recorded on the NHS Body's information system, Rio. The funding arrangements between the Authority and the NHS Body must be communicated effectively and in a timely way with the individual and there must be timely communication with them regarding their financial contribution where appropriate.

# **Reviewing Care Support**

The care and support commissioned must be reviewed after provision within the initial 6-8 weeks and then in accordance with CPA (usually every 6 months, but at least annually) so that assess progress in managing risks and achieving outcomes can be monitored and adjustment made to the level of resources if necessary.

<sup>&</sup>lt;sup>2</sup> 2019/20: RIO

## Changes To Care Packages/Unscheduled Reviews

Where the need is indicated, unplanned reviews to accommodate changing needs of the individual and their carers will be undertaken with short term changes to care and support packages made where necessary e.g. because the individual or carer is ill, where needs have changed significantly.

## Carers

The views of carers (formal or informal i.e. relatives, friends or neighbours) should be identified. In addition, their own needs and rights should be identified and respected, and their views in relation to this taken into consideration. The carer's record on Rio must be completed in all cases. Carers are entitled to an assessment of their own needs. This assessment should be carried out in accordance with the current policy of the Authority. it can be carried out simultaneously with, or separately from, the assessment of the needs of the individual. However, it is essential that the needs of the carer are assessed effectively.

## Safeguarding

Safeguarding is led by the Authorities and both Cambridgeshire and Peterborough will be moving towards one MASH as part of the Annual Development Plan. The MASH will initiate ythe investigation of all enquiries. It will hold and close all enquiries that can be resolved with minimal investigation e.g. through a conversation/s with the care co-ordinator, Service User or referrer. At the Commencement Date of the Agreement, work is underway to determine whether Social Work staff will lead all enquiries, or whether this role will be distributed across the multi-disciplinary team. This matter will be resolved under the Safeguarding workstream in the 2019/20 Annual Development Plan. Within this period to reflect the agreed structure, the staffing and financial schedules will be adjusted.

## **Involvement of Advocates**

Staff with comply with legal requirements with respect for advocacy under the MCA 2005, the MHA 1983 and the Care Act and will involve advocates in supporting the individual to make decisions the care and support they will receive where this support is required.

# Complaints

The NHS Body will be the first point of contact for most complaints and compliments. These will be investigated in accordance with NHS and Local Authority guidelines, with reports of numbers received, progress with and outcomes of investigations provided on a quarterly basis as defined in Schedule 5. Where a complaint about social care services is received by the Authority, they will lead the investigation. Work is underway to amend the operational policy relating to complaints.

### Annual Development Plan

An Annual Development Plan detailing the developments and changes required to improve outcomes will be agreed for implementation each year. The Plan will identify who is responsible for delivery and the timescales for achievement. Actions will be attributed to the NHS Body or the Authority as appropriate. Progress with implementation will be reported monthly.

### **Quality Assurance Processes**

The Quality Assurance Panel will review the quality of, and sign off, support plans that are recommending commissioned care packages and sign off such plans. This includes oversight and ensuring the appropriate use of CHC and the JCT.

## 2.3 Whole System Relationships

## Key Relationships

Mental Health Social Work Services staff, as well as Social Care Services staff, will work closely with health colleagues across the whole system, not just within mental health services. The key relationships of the individual and his/her carer will include primary as well as secondary care. Therefore GPs, as well as the NHS Body health staff may be involved in assessing and reviewing the needs of the individual.

A wider range of provider services including other parts of Adult Social Care, children's services, housing, and the third sector also have key roles. Mental Health staff therefore need to play a co-ordinating role and arrange multi-disciplinary case management meetings to ensure there is good communication between service providers and that effective and safe transfer of care and support between agencies takes place.

### **Other Interdependencies**

The Mental Health Social Work Service provides an essential element in delivering the wider community resilience objectives agreed locally. In particular the NHS Body shall ensure that there are close links with a range of other bodies which will change over time including:

- i) Community Safety Partnerships; and
- ii) Domestic Violence Forums inc.the Mulit-Agency Risk Assessment Conferences; and
- iii) Multi-Agency Public Protection Arrangements; and
- iv) The Mental Health Delivery Board (Crisis Care Concordat); and
- v) The Community Mental Health Services Delivery Board.

MENTAL HEALTH SECTION 75 2	019/2020	<u>)</u>	
			£
SECTION 75 2017/2018 BASIC	<u> </u>	 	1,261,370
ADDITIONAL S75 CONTRIBUTION	EST	S75	
КА	108,800	31,552	
КВ	75,700	21,953	
LD	75,700	21,953	
AMHP Manager		20,000	
PRISON WORKER		28,500	
LEARNING AND DEVELOPMENT		47,000	
NON PAY		50,000	
ADDITIONAL S75 CONTRIBUTION		220,958	220,958
REVISED PCC CONTRIBUTION TO MH S75			1,482,328
MENTAL HEALTH GROSS SPEND ON CARE PACKAGES			
Direct Payments Total		379,905	
Home Care Total		501,746	
Nursing Care Total		296,436	
Residential Care Total		922,503	
TOTAL: MENTAL HEALTH GROSS SPEND ON CARE PACKAGES		2,100,590	2,100,590

# Schedule 3 THE AUTHORITY'S FINANCIAL CONTRIBUTION

**Schedule 4: GOVERNANCE** 

### Cambridgeshire and Peterborough Mental Health Section 75 Partnership Agreement

#### MENTAL HEALTH SECTION 75 GOVERNANCE BOARD

#### **Terms of Reference**

- Aim/Purpose: The Mental Health Section 75 Governance Board is established to ensure the effective and effective delivery of the Mental Health Section 75 Partnership Agreements between the NHS Body and each of Peterborough City Council (PCC) and Cambridgeshire County Council (CCC).
- Authority: The Mental Health Section 75 Governance Board is established by the Director of Social Care. It is authorised to investigate any activity within the Terms of Reference.
- Accountability: Members of the MH Section 75 Governance Board are individually accountable to their respective organizations for the delivery of each Partnership Agreement and the Schedules contained within it. For PCC and CCC accountability is to the Executive Officer People and Communities PCC/CCC via the Commissioning Board and for the NHS Body to the NHS Body Board via the Chief Executive.
- **Reporting** MH Section 75 Governance Board meetings will be formally recorded and copied to:
  - i) The CCC/PCC Executive Officer and Service Director;
  - ii) The Chief Executive Officer, NHS Body.

The PCC and CCC Commissioning Board will be appraised of the updated Schedules and Annual Development Plan for the next financial year in March of each year. Updates on progress will be provided at least 6 monthly or when requested

The Board of the NHS Body will be appraised of the updated Schedules and Annual Development Plan for the next financial year in March of each year. Updates on progress will be provided at least 6 monthly or when requested.

#### **Objectives/Duties** The objectives of the Section 75 Review Board are to:

- i) Ensure that the governance arrangements of the mental health service are in keeping with the organisations' performance and quality structures.
- ii) Agree and sign off any changes to the mental health service that will impact on delegated functions and seconded staff.
- iii) Ensure contractual compliance by both parties.
- iv) Monitor activity and performance information against the agreed Key Performance Indicators and contractually specified measures as specified in the Schedules to the Agreement and to agree the action to be taken by the NHS Body and/or PCC/CCC to address exceptions where necessary.
- v) Monitor delivery of the Annual Development Plan and to agree the action to be taken to address exceptions where necessary.
- vi) Monitor financial performance, ensuring that the Services are delivered within budget and efficiency targets are achieved and to agree the action to be taken to address exceptions where necessary.
- vii) Ensure that the interface between Adult Mental Health and Older People's Mental Health with other client groups such as Children, Older People, Learning Disability and people on the Autistic Spectrum is managed effectively and in line with all parties' statutory functions and authorisation where they relate to the services encompassed within the Agreement.
- viii) Enable early issue resolution of concerns by enabling close partnership working.

#### Membership: PCC and CCC

Assistant Director of Commissioning, CCC and PCC (Chair).

Service Director, Adults and Safeguarding, CCC and PCC.

Head of Commissioning (Mental Health and Learning Disabilities), CCC and PCC.

	Finance, CCC.
	Finance, PCC.
	Quality and Performance, CCC.
	Quality and Performance, PCC.
	CCC Member representative.
	PCC Member representative
	NHS Body
	Chief Operating Officer.
	Associate Director (Commissioning, Contracting and Business Development).
	Director of Nursing.
	Professional Lead/Head of Social Care.
	Head of Performance/Information.
	Finance
Frequency of Meetings	Meetings will be held within thirty (30) days of the end of each quarter.
Quorum	The quorum is 2 people: 1 of a NHS Body Director or Associate/Deputy Director from the NHS Body and one of an Assistant Director/Service Director/Head of Service, PCC/CCC.
Decision Making	Decisions will be made jointly wherever possible based on a simple majority vote with each member having 1 vote. In the event of an even vote, a decision will be made by the Chair and the NHS Body Chief Operating Officer. In the event that no decision can be arrived at the chair will have the casting vote.
Approval and Review	The Terms of Reference will be approved by the Section 75 MH Governance Board members and reviewed as and when required and at least annually.
Servicing the Board	The Section 75 MH Governance Board will be serviced by PCC and CCC and co-ordinated by the Head of Commissioning (Mental Health and Learning Disabilities), CCC and PCC.

## Schedule 5 PERFORMANCE MANAGEMENT FRAMEWORK

This schedule sets out Authority's management information and performance requirements from the NHS Body for older people and adult mental health social care for the 2017/18 financial year, in line with the governance arrangements set out in Schedule 4 (Governance).

This section is about performance activity as required by ASCOF, SALT, and SAC (Safeguarding Adults Collection) national frameworks and any other locally agreed indicators. Reporting on other areas such as Adult Safeguarding, Learning & Development, and Complaints are covered in the relevant sections of the Agreement.

# 1. Management Information Requirements

- 1.1 All local authorities with a social service responsibility are required to compile, verify and submit a set of Adult Social Care statutory data returns to the Department of Health. Where the local authority operates a partnership arrangement under section 75 of the NHS Act 2006 (formerly section 31 of the Health Act 1999) all social care related assessment and service activity carried out by the partner organisation should be included in the statutory data returns, whether made by a social services member of staff or not.
- 1.2 The Authority retains the responsibility for validating and submitting the Adult Social Care statutory data returns. The source data used to populate the returns will be the Authority's adult social care database. The NHS Body will ensure the timely and accurate recording of all statutory data on the Authority's systems.
- 1.3 The NHS Body retains responsibility for the compilation, verification, and submission of the Mental Health Services Data Set (MHSDS), Mental Care Act activity and Delayed Transfers of Care (DTOC) where required, from the NHS Body recording and reporting systems. The NHS Body recording and reporting systems will also be the primary source for Mental Health Payment by Results data.

# 2. Data Quality

- 2.1 Both Parties recognise that good quality statutory, performance and management information is essential to driving service improvements and ensuring that service user needs are met.
- 2.2 To this end the NHS Body will:
  - Comply with all care management and IT recording processes
  - Monitor data quality
  - Ensure relevant staff seek regular system training
  - Take appropriate action where staff fail to reach an adequate level of system competency

- Comply with existing Data Quality protocols when using adult social care IT systems
- The NHS Body will report Mental Health Act data and analysis to the Section 75 Review Board.
- The NHS Body will report delayed transfers of care (DTOCs) monthly to the Authorityl's Head of Mental Health and to the Business Intelligence service, and monthly to the Joint Sec 75 monitoring meeting.
- 2.3 The Authority will:
  - Ensure the NHS Body adult social care IT system users have access to Authority systems for the recording of
    - Funded care packages
    - Financial assessments data
    - Recording of section 117 status
    - Joint funding with the CCG.
  - Ensure that the NHS Body adult social staff who use Authority systems have equal access to training, and training is of the same standard as offered to Authority employees
  - Produce and circulate monthly Data Quality reports via the business intelligence services on funded care packages, and work towards a single approach to data quality as the new systems roll out in the two Authorities.. All other data reports will be generated either from the NHS Body systems or an amalgamation of several sources.
- 2.4 The Parties recognise that specific system developments (such as the adoption of the Adult's Finance Module (AFM), migration from AIS to Mosaic and/or any changes to CPFT systems such as RIO) may have an adverse impact on the volume of data quality errors in the short term. This will be taken into account during the monitoring of data quality.
- 2.5 Where it has been agreed that a transition and/or implementation of an agreed work programme will take place in year, performance data that monitors and demonstrates the progress and completion of the work will be agreed and reported. This includes demand management targets and changes to meet agreed savings targets.
- 2.6 Where it has been identified that there are deficits in data quality impacting on performance monitoring a remedial plan will be put in place with immediate effect and monitored through the Section 75 Review Board, see Schedule 5.

# 3. Reporting Arrangements

3.1 Appendix 1 details an agreed monthly report template based on the set of performance indicators detailed in section 4. Measures calculated using data recorded on Authority IT

systems will be populated by staff in the Authority's Business Intelligence service. Measures calculated using data recorded on the NHS Body IT systems will be populated by the NHS Body Information & Performance service. Performance commentary will be added by the NHS Body Director of Integration and will cover remedial actions undertaken or planned, with an appropriate resolution timescale.

- 3.2 Points of clarification:
- 3.2.1 The NHS Body's Information and Performance Team will provide the Authority's Business Intelligence service with an updated report each month using data held in the NHS Body's information systems. This will be provided by the end of the second week of the month for the previous month; e.g. April's data will be sent the second week of March.
- 3.2.2 The Authority's Business Intelligence service will add the required data from its information systems and return the completed report to the NHS Body's Information and Performance Team. This will be provided by the end of third week of the month.
- 3.2.3 The NHS Body's Social Care Profession Lead will finalise the report by adding the required commentary to explain performance including, explanation of underperformance, remedial actions, and progress against targets and timescales in areas of particular concern, e.g. delayed transfer of care and reviews.
- 3.2.4 The NHS Body's Social Care Professional Lead will send the Authority's Mental Health Commissioner the completed monthly report by the fourth week of the month for the previous months performance. April's report will be sent the fourth week of March. Where there is particular concern regarding underperformance, the NHS Body will supply the Authority with additional information and evidence that remedial action has been completed. If the Authority is not assured by the NHS Bodys actions then this will be escalated through the governance process outlined in the Agreement and Schedule 4 (Governance).
- 3.2.5 The monthly report will be presented by the NHS Body's Social Care Professional Lead at the monthly Joint Savings & Performance Board meeting.
- 3.2.6 This report will be used by the NHS Body to inform other internal reports to team managers.
- 3.2.7 Where operational practice is deemed to impacting on performance, the monthly report will be reviewed at the Operational Forum.
- 3.2.8 In addition the NHS Body's Social Care Professional Lead will send the Authority's Mental Health Commissioner a monthly report on all social carer delayed transfers of care (DTOC). This report will contain only validated DTOC and will include explanation of the cause, actions taken to resolve the delay and estimated date of resolution.
- 3.2.9 The Authority's Business Intelligence service will take information from the completed form and incorporate it into internal management information reports which will be discussed at the Cambridgeshire and Peterborough Joint Commissioning Board.
- 3.2.10 The NHS Body's Social Care Professional Lead will prepare and present an annual performance report to the Mental Health Governance Board by the end of June of the

following year, for the purpose of this agreement a year relates to the period April 1st to March 31st.

3.2.11 CPFT and the Authority's will work together over the first year to produce separate performance schedules for Adult Mental Health and Older People Mental Health but with regards to national indicators (for example residential care admissions).

# 4. Performance Indicators & Management Information Requirements

4.1 Listed below are the adult social care performance measures and targets directly attributable to activity conducted by the NHS Body.

Ref.	AS-	Р	Domai	n Asse	ssments	System	RiO
Measure		Number of core 2 assessments relating to social care starting or contributing to existing assessments within the period					
Frequency		Monthly	Target	N/A			

Ref.	RV-	Ρ	Domai	in Revi	ews	System	RiO
Measure Number of care p		e plans rela	ting to soc	ial care updated within	the period		
Frequency Monthly T		Target	N/A				

Ref. AS	COF 1	C (1a)	Domai	n Self-	Directed Support	System	Authority systems
Measure		ts aged ove an upper ag		ving self-di	rected support (the	e national indica	tor does not
Numerator	care / suppo				ng-term Authority o setting via self-dire ackages may be fu	ected support ar	ranged by
Denominato	care / sup	port in a c	ommunity	ng-term Authority of setting arranged b d by the Authority of	y Mental Health	teams	
Frequency Monthly Ta			Target	93%			

Ref. A	ASCOF 1C (2a)		Domain	Self-D	virected Support	System	Authority systems
Measure	Adu	Its aged over	18 receivin	g direct p	payments		
NumeratorNumber of clients receiving long-term Authority commis /support in a community setting via direct payments arr teams						•	J
Denominat	or		n a commun	•	g-term Authority co g via self directed s	•	J
Frequency Monthly			Target 2	24%			

Ref.	Ref. ASCOF 2A (1)		Domain	Residential Admissions	System	Authority systems	
MeasureClients with long-term support needs met by permanent admission to residential/nursing placements per 100,000 (Adults aged 18-64). [Permanent is while intention is that placement is longer term and not respite].							
change of setting to r					64) whose long-term support nee sidential and nursing care during t dential and nursing care) arranged	he year (exclu	iding
Denominator Size of young estimates)				iger adult p	opulation (aged 18-64) in area (O	NS mid-year p	opulation
Frequency Monthly T		1	County-level target exists and stan .00,000 people. As this target invo population a MH-specific target ca	olves a county-	-level		

Ref.	AS	ASCOF 2A (2)		Domain	Residential Admission	ns	System	Authority systems	
Measure	9	resid	ents with long-term support needs met by permanent admission to idential/nursing placements per 100,000 (Adults aged 65+). [Permanent is where ention is that placement is longer term and not respite].						
of setting to				residential a	whose long-term supp nd nursing care during nursing care) arrangec	g the yea	r (excluding	transfers	
Denominator Size of youn			Size of youn	ger adult pop	oulation (aged 65+) in a	area (ON	IS mid-year p	opulation	

estimates)						
Frequency	Monthly	Target	County-level target exists and stands at 128 admissions per 100,000 people. As this target involves a county-level population a MH-specific target cannot be derived.			

Ref.	ASC	COF 1	OF 1F <b>(national)</b>		n Emp	loyment	System	RiO			
Measure	2	•	roportion of adults in contact with secondary mental health services in paid mployment								
NumeratorNumber of working age adults (18-69 years) who are receiving secondary mental health services and who are on the Care Programme Approach recorded as being in paid employment								•			
DenominatorAdults 'in contact with secondary mental health services' is defined as thos aged 18 to 69 who are receiving secondary mental health services and who on the Care Programme Approach (CPA)											
Frequency Monthly T				Target	12.5%						

Ref.	ASCOF 1F and MH Five Year Forward View <b>(Local)</b>		Domai	n Emp	loyment		System	RiO	
Measure	MeasureProportion of adults in contact with secondary mental health services (not limited to those on CPA) in paid employment (not limited to those on CPA)								
Numerat					•	(18-69 years) w ing in paid empl		eiving secon	idary mental
Denomir	DenominatorAdults 'in contact with secondary mental health services' is defined as those aged 18 to 69 who are receiving secondary mental health services						as those		
Frequen	Frequency Monthly 1			Target	Not set				

Ref.	ASCOF	1H (National)	Domain	Accommodation	System	RiO			
MeasureProportion of adults in contact with secondary mental health services living independently, with or without support									
Numerat	or	independent	tly at the tim	ed 18-69 receiving secondary r he of their most recent assessm anning meeting		-			

Denominator	to	69 who		ving second	ary mental health services' is defined as those aged 18 dary mental health services and who are on the Care
Frequency Monthly			Target	75%	

Ref.	ASC	OF 1H	l (Local)	Domai	n Accor	mmodation	System	RiO	
Measure Proportion of adults in contact with secondary mental health services (not limited to those on CPA) living independently, with or without support									
NumeratorThe number of adults aged 18-69 receiving secondary mental health services living independently at the time of their most recent assessment, formal review or other multi-disciplinary care planning meeting								-	
DenominatorAdults 'in contact wi 18 to 69 who are rec								as those aged	
Frequency Monthly Ta				Target	No target				

Ref.	SG2	2	Domai	n Safe	eguarding	System	CPFT
Measure		Median time from con within the quarter.	tact to con	clusion o	f safeguarding inves	tigation, for	cases concluded
Frequen	cy	Quarterly	Target	N/A			

Ref.	SG	3	Domai	n S	afeguarding	System	CPFT
Measure		Number of Sect	ion 42 enq	uiries c	open in excess of 3 months		
Frequenc	:y	Quarterly	Target	N/A			

Ref.	SG4	a (1)	Domai	<b>n</b> Safe	guarding	System	CPFT	
Measure		Proportion of enquiries where the individual or individual's representative was asked what their desired outcomes were.						
Numerator		Sum of "Yes" ro	ows in table	e SG4a in S	Safeguarding Adults C	ollection (SAC).		
Denominato	r	Sum of all concluded S42 enquiries.						
Frequency		Quarterly	Target	ТВС				

Ref.	SG4	la (2)	Domai	n Safe	guarding	System	CPFT	
Measure Of those enquiries where the individual or their representative was asked about their desired outcomes (numerator of SG4a (1)), what proportion were either free achieved or partially achieved?								
Numerator		Sum of the row Safeguarding A	•		nd "Partially Achieved C).	" in table SC	64a in the	
Denominato	r	Sum of "Yes" rows in table SG4a in SAC.						
Frequency	Quarterly	Target	TBC					

SG2	Domai	n Safe	guarding	System	CPFT				
Measure	•	Proportion of s42 enquiries with an identified risk where the risk was reduced or removed at the time the case was concluded.							
Numerator		Sum of "Risk Reduced" and "Risk Removed" rows from Table SG2e in the Safeguarding Adults Collection (SAC).							
Denominator	Sum of "Risk id (SAC).	Sum of "Risk identified" rows in Table SG2c in the Safeguarding Adults Collection (SAC).							
Frequency	Quarterly	Target	ТВС						

Ref. DT	OC (national)	Domai	n Delay	ed Transfers of Care	System	RiO				
Measure	The number of	The number of validated DToC bed-day delays								
Frequency	Monthly	Target	No separate target as national target is composite health and social care together							

Ref.	Carers : Triangle of Care		Triangle of	Domain	Carers (SDS)	System	RiO
Measure Carers		rs aged over :	18 receiving s	self-directed support of servio	ce users on C	CPA	
Numerator			Number of o	carers receivi	ng support via self-directed s	upport arrar	nged by Mental

		Health te	ams		
Denominator		Number o Health te		service us	ers on CPA receiving support arranged by Mental
Frequency	Mo	onthly	Target	TBC%	

Ref.	ASCOF 1C (1b) (national composited across all care groups)			Domai	n Care	ers (SDS)	System	RiO
Measure	;	Care	rs aged ove	er 18 receiv	ving self-d	irected support		
Numerat	arranged because of				ntal Healt rvice user	sers on CPA receiving for teams (note this is not s not on CPA are suppo ioned organisations by	ot the comple orted by Mak	ete number ing Space or the
Denomir	natoi	r	Number o	f carers re	ceiving su	pport arranged by Mer	ntal Health te	ams
Frequency Monthly Ta			Target	TBC%				

Ref.	ASCOF 1C (2b) (national composited across all care groups)		Domai	n Car	ers (Direct Payments)	System	RiO	
Measure	;	Care	rs of service	users on	CPA aged	over 18 receiving dir	ect payments	
Numerat	the Mental service use			Health te rs not on	eams (not CPA are s	sers on CPA receiving e this is not the comp upported by Making ons by the Authority.	olete number be	ecause carers of
Denomir	nato	r	Number of by Mental			sers on CPA receiving	self-directed s	upport arranged
Frequence	Frequency Monthly T			Target	TBC%			

Ref.	CPF	т хх		Domain	Carer Assessments	System	RiO
Measure	Measure Carer assessments		r assessments	s undertaken	1	_	
Numerator Numbe		Number of c	arers assess	ed			

Denominator		Number	Number of carers assessments completed for carers of CCC patients on CPA							
Frequency	Mo	onthly	Target	TBC: %						

Ref.	ASCOF 1C (2b) (national composited across all care groups)		Domai	n Cai	rers (Direct Paymer	nts)	System	RiO	
Measure	!	Care	rs of servic	e users on	CPA age	d over 18 receiving	direct	payments	
Numerat	or:		the Menta service us	al Health te ers not on	eams (no CPA are	users on CPA receiv te this is not the co supported by Maki ons by the Authori	mplete ng Spa	e number be	ecause carers of
Denomir	nato	r		of carers of I Health tea		users on CPA receiv	ring self	f-directed s	upport arranged
Frequen	Frequency Monthly T				No.				

Ref.	РСС	2		Domain		nal complaints re: al care: No.	System	Mosaic
Measure	9	% со	mplaints rela	ting to so	cial care	resolved within agreed	timescales.	
Numerat	tor		N/A					
Denomir	nator	•	N/A					
Frequen	су	Mo	onthly T	arget	N/A			

Ref.	РСС	2		Domai		nal complaints re: al care: resolution	System	Mosaic
Measure	:	% со	mplaints rela	ating to so	ocial care	resolved within agreed t	imescales.	
Numerat	tor		No. social c	are comp	olaints reso	blved		
Denomir	nator		No. social c	are comp	olaints reso	olved within agreed time	escales.	
Frequen	су	Mo	onthly	Farget	100%			

Ref.	РСС	2		Domai		ormal complaints nplaints received by the No.	System	Mosaic
Measure		Perc	entage con	nplaints rel	ating to so	ocial care resolved within	statutory t	imescales.
Numerat	or		N/A					
Denominator		N/A						
Frequency		Qu	arterly	Target	No.			

Ref.	PCC			Domai	(con	ormal complaints nplaints received by the Resolution	System	Mosaic
Measure	:	Perce	entage con	nplaints rel	ating to so	ocial care resolved within	n statutory t	imescales.
Numerat	tor		No. LA ree	ceived soci	al care cor	mplaints resolved within	agreed time	escales.
Denominator No. LA recei			ceived soci	al care cor	nplaints received.			
Frequen	cy	Qu	arterly	Target	100%			

Ref.	CPF	Тхх		Domai	n Com	pliments	System	RiO
Measure No.		No. d	complimen	ts relating	to social c	are received during the r	nonth.	
Numerat	or		N/A					
Denominator			N/A					
Frequency Mo		onthly	Target	N/A				

#### 4.2 Performance Monitoring

- 4.2.1 In the event of a target being breached, an exception report will be produced and a remedial action plan presented to the 6 weekly Finance and Performance meeting. If improvements are not made, the issue will be escalated to the Section 75 Review Board for resolution.
- 4.2.2 Where targets do not exist, a trend report with a supporting commentary will be presented to the Finance & Performance Meeting. If issues arise these may be escalated to the Section 75 Review Board for resolution.
- 4.3 Mental Health Act section activity will be reported separately from the indicators detailed above. Section activity will be monitored through the Service Integration Committee,

Mental Health Act Law Committee & Section 75 Governance Board. A new dataset that focuses on AMHP activity will be developed in line with national work in this area.

4.4 Performance indicators relating to complaints will be defined in the Complaints Schedule and reported alongside the indicators detailed above.

# 5. Mechanism for Amending, Suspending and Introducing New Measures and Targets

- 5.1 Either Party can propose an amendment, suspension or new Adult Social Care Performance Measure or target at any time throughout the year. The case should be presented to the monthly Joint Sec 75 monitoring meeting and to the Mental Health Governance Board for sign-off by both Parties.
- 5.2 Both Parties also recognise that a number of other local and national issues and / or developments may impact on the agreed list of performance measures. The mechanism detailed above could therefore be applied by either party at any time through-out the year.

# 6. Statutory Data Returns

- 6.1 All nationally mandated data relating to mental health clients supported by CPFT will be recorded on the Council's information systems except where this information is returned directly by CPFT as part of the Mental Health Services Data Set.
- 6.2 Details of statutory social care data returns for the year 2017-2018 can be found at <u>http://content.digital.nhs.uk/socialcarecollections2018</u>. These include:
  - Short Term and Long Term SALT national return: By end of 18-19 CPFT will be expected to provide the data to enable the councils to include Mental Health in their SALT returns (see Appendix 1).
  - SAC Return
  - Guardianship Return (LA responsibility for returns)
  - Carers and Service Users Surveys
  - Returns for HMP Peterborough

# 7. Summary Reports

A monthly highlight report summarising the above and including additional information relating to staffing and workforce issues and identifying key risks and mitigations will be provided by the provider (see Appendix 2 to this Schedule).

# 8. Ad Hoc Report Requests

7.1 Both Parties recognise that there may be a requirement for specific one-off analysis and ad hoc reports drawn from data from both Authority and NHS Body systems. Requests of this nature can be made at any time, but should be formally agreed by both Parties at either the Joint finance and performance operational monitoring group or the Joint section 75 monitoring meeting.

Appendix 1.

# SALT RETURN

See attachment in accompanying email

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# HIGHLIGHT REPORT TEMPLATES: ADULT MENTLA HEALTH AND OLDER PEOPLE'S MENTAL HEALTH

#### (no more than two pages)

SERVICE AREA:	Adult Mental Health
RESPONSIBLE MANAGER:	
REPORTING PERIOD:	

PROGRESS COVERED WITHIN THIS PERIOD	PROGRESS COVERED WITHIN THIS PERIOD		
SERVICE PERFORMANCE			
<ul> <li>Progress on priorities within service</li> <li>Highlight areas of difficulty in achieving milestor plans to address these</li> <li>Performance against indicators (national and loce)</li> </ul>	nes towards targets and risks associated with these - cal)		
Cambridgeshire	Peterborough		
RISKS			
<ul> <li>Highlight the top 3 operational risks this month?</li> <li>What steps are or can be taken to mitigate thes</li> </ul>			
FINANCIAL PERFORMANCE (Narrative)			
<ul> <li>Overview of performance against budget</li> <li>Key variances</li> <li>Difficulties and risks</li> </ul>			
Cambridgeshire	Peterborough		

STAFFING ISSUES ( <u>Redact names</u> )				
Number of Vacancies	- New starters for the month			
Attendance Management issues	- Disciplinary			
Grievances	- Health and Safety issues			
Cambridgeshire	Peterborough			
SERVICE USER ISSUES				
High risk or problematic cases				
Outstanding complaints				
Compliments				
Cambridgeshire	Peterborough			
COMMUNICATIONS (mainly used for Member Brid	efings (including Adults Committee): <i>a paragraph or 2 for</i>			
each item				
Good news				
<ul> <li>Good news</li> <li>Highlighting Good Practice (i.e. case studies)</li> </ul>				
<ul> <li>New developments on the horizons</li> </ul>				
Notified inspections				
<ul> <li>Details of any visits to Cambridgeshire by Sen</li> </ul>	ior Government Officials or Politicians			
<ul> <li>Details of public events being held by service</li> </ul>				

Signed	
Date	

SERVICE AREA:	Older Persons Mental Health (CCC/PCC)
RESPONSIBLE MANAGER:	
REPORTING PERIOD:	

# PROGRESS COVERED WITHIN THIS PERIOD

# SERVICE PERFORMANCE

- Progress on priorities within service
- Highlight areas of difficulty in achieving milestones towards targets and risks associated with these plans to address these
- Performance against indicators (national and local)

Cambridgeshire	Peterborough
DIGUG	
RISKS	
Highlight the top 3 operational risks this mo	nth?
<ul> <li>What steps are or can be taken to mitigate t</li> </ul>	
FINANCIAL PERFORMANCE (Narrative)	
Overview of performance against budget	
Key variances	
<ul> <li>Difficulties and risks</li> </ul>	
Cambridgeshire	Peterborough
	5

STAFFING ISSUES ( <u>Redact names</u> )	
Number of Vacancies	- New starters for the month
Attendance Management issues	- Disciplinary
Grievances	- Health and Safety issues
Cambridgeshire	Peterborough
SERVICE USER ISSUES	
<ul> <li>High risk or problematic cases</li> </ul>	
<ul> <li>Outstanding complaints</li> </ul>	
Compliments	L
Cambridgeshire	Peterborough
· ·	fings (including Adults Committee): a paragraph or
2 for each item	
Cardinaura	
Good news	
• Highlighting Good Practice (i.e. case studies)	
New developments on the horizons	
Notified inspections	
Details of any visits to Cambridgeshire by Senie	
Details of public events being held by service a	ireas

Signed	
Date	

Surname	Forename	Post Title	Emp Fte	Weeks worked
KILBY	EMILY	APPROVED MENTAL HEALTH	1.00	
		PRACTITIONER/SENIOR PRACTITIONER		52.00
IRESON	MANDY	SOCIAL WORKER	1.00	52.00
BLUFF	MARY	APPROVED MENTAL HEALTH	0.40	
		PRACTITIONER		52.00
COOPER	MATTHEW	SOCIAL WORKER	1.00	52.00
NOON	VICTORIA	SOCIAL WORKER/AMHP	1.00	52.00
POOLEY	LOUISE	SOCIAL WORKER	1.00	52.00
HINDHAUGH	MICHAELA	SOCIAL WORKER/AMHP	1.00	52.00
NELSON	KYLEY	SOCIAL WORKER	0.60	52.00
SEELIG	STEPHEN	SENIOR PRACTITIONER	1.00	52.00
GIDDINGS	JANET	APPROVED MENTAL HEALTH	1.00	
		PRACTITIONER		52.00
GILL	DONNA	SOCIAL WORKER AMHP	1.00	52.00

# Schedule 6 SECONDMENT ARRANGEMENTS: SECONDED STAFF

Schedule 7 NOT USED

Schedule 8 NOT USED

Schedule 9 NOT USED

**EXECUTED** as a **DEED** by the affixing of the **COMMON SEAL** of **CAMBRIDGESHIRE COUNTY COUNCIL** in the presence of



[SIGNATURE OF PARTY]

Wendi Ogle-Welbourn Executive Director: People & Communities

.....

[AUTHORISED SIGNATORY]

# **SIGNED** as a **DEED** by **CAMBRIDGESHIRE AND PETERBOROUGH NHS FOUNDATION TRUST** in the presence of:

[SIGNATURE OF PARTY]

-----

[SIGNATURE OF WITNESS] [NAME OF WITNESS] [ADDRESS OF WITNESS] [OCCUPATION OF WITNESS]

# ADULTS AND COMMUNITIES SCRUTINY COMMITTEE

AGENDA ITEM No. 6

# 10 SEPTEMBER 2019

# PUBLIC REPORT

Report of: Adrian Chapman, Service D Partnerships		Adrian Chapman, Service Director for Communit Partnerships	ties and
Cabinet Member(s) r	) responsible: Cllr Irene Walsh, Cabinet Member for Communities		ies
Contact Officer(s):	Communitie Cate Hardin	Sarah Ferguson - Assistant Director of Housing Communities and Youth Cate Harding - Community Capacity Manager Bill Tilah - Estates Surveyor - NPS Peterborough Ltd	

# COMMUNITY ASSET TRANSFER

RECOMMENDATIONS			
FROM: Adrian Chapman, Service Director, Communities Deadline date: N/A			
and Partnerships			

It is recommended that the Adults and Communities Scrutiny Committee:

- 1. Scrutinise the progress made to date regarding the properties in scope for community asset transfers
- 2. Note and comment on the assurances in place to support community groups
- 3. Comment on the final steps required to conclude the programme

# 1. ORIGIN OF REPORT

1.1 This report is presented to the Committee at the request of Cllr Irene Walsh, Cabinet Member for Communities.

## 2. PURPOSE AND REASON FOR REPORT

- 2.1 The report is presented in order for the Committee to be informed about the progress made to date regarding the properties in scope for community asset transfers, ensure that there are sufficient arrangements in place to support community groups, and comment on the final next steps required to enable the programme to be successfully concluded.
- 2.2 This report is for the Adults and Communities Scrutiny Committee to consider under its Terms of Reference No. 3, Section 4 Overview and Scrutiny Functions, Paragraph 2.1. Functions determined by Statute:

4. Neighbourhood and Community Support (including cohesion, community safety and youth offending)

2.3 Appendix 1 is an exempt annex which is NOT FOR PUBLICATION in accordance with paragraph (s) 3 of Schedule 12A of Part 1 of the Local Government Act 1972 in that it contains commercially sensitive information relating to the business affairs of the Council. The public interest test has been applied to the information contained within the exempt annex and it is considered that the need to retain the information as exempt outweighs the public interest in disclosing it.

2.4 This report links to the following corporate priority:

# Keep all our communities safe, cohesive and healthy

Community centres play a vital role within our communities, providing space for local communities to come together for social interaction and inclusion, helping to build strong, resilient and cohesive neighbourhoods.

# 3. TIMESCALES

Is this a Major Policy	NO	If yes, date for	N/A
Item/Statutory Plan?		Cabinet meeting	

# 4. BACKGROUND AND KEY ISSUES

- 4.1 Peterborough City Council owns many community facilities across the city which include community centres, village halls, youth centres, former play centres, and sports pavilions and other leisure facilities. 48 of these facilities have been subject to a due diligence exercise as part of the Community Asset Transfer process, an increase from the previously reported 32 due to additional properties being considered, mainly the youth, sports and leisure facilities.
- 4.2 All of these assets play a vital role in the delivery of community-led services and activities and play an essential role in bringing together residents and small groups for a wide range of social, cultural and physical benefits. These facilities are often at the heart of the community, helping the public to find out basic information, deliver public services and foster a real sense of belonging and cohesion in a local area.
- 4.3 Whilst most of the community buildings are owned by the council, they are already managed by various community organisations on a voluntary basis, and have been for many years. The management arrangements vary, having developed over a number of years, but broadly speaking, the council is responsible for the repair and maintenance of the buildings and in some cases, due to long standing agreements, cover the utility and rental costs (where a third party owns the property for example), whilst the day to day management and running of the centre is delivered by the voluntary management committee.
- 4.4 In 2013, the council published its Community Asset Transfer Strategy which sets out the vision for securing the long term future of community facilities through community ownership or long leasehold arrangements. The council is committed to the principle that local communities should have the opportunity to own or long-lease public buildings that are of local value and provide services for that community.
- 4.5 The model where community organisations own the freehold or have long term leases of community facilities generates a number of significant advantages when compared to ongoing local authority ownership, including:
  - the ability to attract commercial and external funding opportunities where communities can attract money that councils are unable to apply for
  - the ability to achieve greater community empowerment in local communities
  - the ability to respond much more effectively and quickly to the needs of local people and provide tailored community services
  - the opportunity to build the capacity and skills of individuals and organisations
  - the power to increase volunteering
- 4.6 As set out within the Community Asset Transfer Strategy, the council is committed to supporting existing community organisations to take over the ownership or long term lease of their facility, where they wish to do so. Over the last two years, due diligence work, including extensive consultation and engagement, has taken place with each organisation to explore the options open

to them.

- 4.7 There have been a number of similar challenges that have been identified during this process. First, a number of buildings have not been considered to be in a fit state of repair for transfer and could potentially become a significant liability to the new community owners or leaseholders. The council's approach is to ensure that no community organisation inherits a liability that they cannot afford or that might cause them financial hardship in the short to medium term. Negotiations have therefore taken longer than anticipated in some cases, to enable agreement to be reached on works that need to be carried out, assuring the groups that the goal of sustainable community centres can be achieved going forward. A further challenge has been the need to carry out extensive checks, with community groups, on their management, governance and financial arrangements. These challenges, coupled with the increase of buildings going through the transfer process, has extended the original programme timescale. However, by working diligently in this way we can be more certain that no community organisation becomes responsible for a building they cannot manage sustainably going forward.
- 4.8 At the November 2018 meeting, the Scrutiny Committee endorsed an extension of a further year to finalise the future plan for each individual facility. This has enabled significant progress to be made, resulting in more formal agreements being reached that will lead to completion of both freehold transfers and long term leases. The agreement for the council's capital expenditure programme to invest up to £100k per annum for the financial years 2018/19, 2019/20 and 2020/21, has assisted the Community Asset Transfer negotiation process, allowing our property team to agree schedules of work with the groups assisting progress towards the completion of the transfers.
- Additionally, full support has been offered to each community group via a commissioned 'support
   package' provided by Peterborough Council for Voluntary Services (PCVS). This package includes a minimum of an organisational health check of policies and procedures, fundraising training, and business and financial planning.
- Due to several centres recently being re-classified as community assets (not community centres) and being progressed by property on commercial terms, see case study 1, and a small number being deemed to be unviable, the total number active on the programme has now reduced to 40. Of the original 48, 25% of the programme has either completed or with legal and expected to be completed by end Sept 2019, 21% are with Legal to progress to Completion as soon as practical but by March 2020, 29% are at a stage of advanced CAT Negotiation for confidence in completion within 2020, leaving 25% of the programme considered to be a risk of not completing in 2020 and mitigating proposals are being offered for consideration, such as final offers leading to bid process if not accepted, repurposing for operational uses, declassification of community centre status and offer for alternative local services.

**Case study 1:** The Charteris Centre is a former Play Centre, which ceased to operate as a play centre in 2014. Following a high level of public interest to retain this centre in Welland, a community group agreed to take on the management of the facility with a view to entering into a CAT lease. Due diligence checks identified that the community group were unable to operate the facility as a financially viable community centre due to limited hireable space. The facility benefits from a valuable pre-school and open access play offer for the local community. It was therefore agreed that in order to protect these valuable community services, the centre would be better managed on a commercial lease with these providers which is soon to be in place following a provider bidding process.

**Case study 2:** the Orton Goldhay Centre is a community facility formally managed and run by a local church group. The building is a former 3 storey house and whilst benefiting from a good sized hall and catering kitchen, it is not designed to support hireable mixed community use. Family Voice, a Peterborough based charity, are therefore taking on the management of the facility which will permit their own occupancy for the running of a valuable citywide service whilst also managing the public access of the community hall for the whole of the wider community.

Based on the current status of negotiations with the facilities going through the programme, it is

4.11 predicted that by the end of September 2019, 75% of the programme will be either completed or close to completion. The remaining 25% are likely to need to be advertised as opportunities for new groups and organisations to take over the management arrangements.

A summary of the status of each centre can be found at appendix 1.

# Next Steps

- 4.12
- 1. The capital programme allocation, as described above, is committed until the end of March 2021, by which time all repair works will need to be complete and the remaining transfers fully achieved
- 2. The CAT Team will continue to proactively work with the c.25% (c.14 facilities) that have not yet agreed terms to bring these to a successful conclusion
- 3. As the landlord (where a freehold transfer has not taken place), the council will retain responsibility for monitoring compliance with the lease terms. Any reports of misuse will be looked into by the relevant council service area
- 4. Management bodies will continue to be able to access ongoing support and advice in relation to governance matters, fundraising and training via PCVS
- 5. The council's Community Capacity Team will monitor the accompanying Occupancy Agreements for the leases to ensure the groups are remaining financially viable and compliant with their governance responsibilities. In line with the Think Communities principles, community groups will be actively supported to ensure that the facilities are viewed as a community hub and that the centre is offering a wide range of community activities and services to meet the needs of the local residents

# 5. CONSULTATION

5.1 Extensive engagement and support has taken place, and will continue to do so, with each community organisation on the options available and the council's intentions.

Ward councillors are updated on progress with the centres in their area and active involvement and support requested where complex issues may occur.

A monthly working group, including representatives from Community Action Peterborough, receives regular updates from officers and partners. This meeting is chaired by the Cabinet Member for Communities

## 6. ANTICIPATED OUTCOMES OR IMPACT

6.1 The programme is anticipated to secure the sustained asset transfer of community buildings currently in council ownership.

## 7. REASON FOR THE RECOMMENDATION

7.1 To ensure the effective and sustainable completion of the asset transfer programme for community buildings.

## 8. ALTERNATIVE OPTIONS CONSIDERED

- 8.1 Two options were considered at the start of the programme:
  - A Trust Model: It was agreed that this was not viable due to the majority of community groups entering into individual negotiations with the council.
  - Disposal of <u>all</u> community buildings: Whilst this option would remove the financial liability from the council and provide a capital receipt, it has been rejected. Such an option would lose vital services in the community, increase social isolation and reduce community resilience.

# 9. IMPLICATIONS

#### 9.1 **Financial Implications**

Based on the current status of negotiations with the centres going through the programme, it is predicted that by the end of September 2019, 75% of the programme will be either completed or close to completion. The remaining 25% would need to enter the CAT bidding process to enable, where possible, a new management group to be found. This will realise a saving on the council's revenue budgets that support property maintenance. For example, while the centres vary greatly in size and state of repair (related to age, construction type and lease obligations), the average annual cost to the council, per centre, are estimated to be:

- Statutory Testing £3,300
- Repairs and Maintenance £6,000
- Buildings Insurance £346

The council will retain corporate asset management responsibilities as property owner/landlord where a leasehold transfer has taken place. This means that in the event that a community group is unable to continue running a transferred asset, and the centre returns to the council, the council would need to cover repairs, maintenance and utility costs until a new group is established, or the property is deemed as unsustainable. Should this occur, each facility would be considered on a case by case basis. Where properties are deemed unsustainable they may be considered for alternative uses or for disposal.

#### 9.2 Legal Implications

The council is obliged to obtain best value for any land transfer pursuant to s123 Local Government Act 1972. Ordinarily this is achieved by way of a transfer by the Council to provide a capital receipt. In the case of the community facilities, the transfer is unlikely to generate a capital receipt. However, market valuation calculations are undertaken to support any transfer which take into account the ongoing cost of maintenance and management to the council and the value to the community in keeping the building in community use to ensure that the obligations under s123 are met.

#### 9.3 Equalities Implications

An Equality Impact Assessment has been completed in relation to the identified savings in the October 2018 budget proposals.

#### 9.4 **Rural Implications**

N/A

#### 10. BACKGROUND DOCUMENTS

10.1 Peterborough City Council Community Asset Transfer Policy

#### 11. APPENDICES

11.1 Appendix 1 - Summary of the status of each centre (Exempt)

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# ADULT AND COMMUNITIES SCRUTINY COMMITTEE

AGENDA	ITEM No.	7
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# 10 SEPTEMBER 2019

PUBLIC REPORT

Report of:		Adrian Chapman, Service Director - Communitie	s and Partnerships
Cabinet Member(s) r	e) responsible: Cllr Irene Walsh, Cabinet Member for Communities		ies
Contact Officer(s):	Anna Jack,	Head of Youth Support Services	Tel. 01223 507220

# YOUTH JUSTICE PLAN 2019-22

RECOMMENDATIONS				
Deadline date:				
-				

It is recommended that the Adults and Communities Scrutiny Committee:

- 1. scrutinises and endorses the Joint Cambridgeshire and Peterborough Youth Justice Plan
- 2. scrutinises and endorses the strategic objectives of the Youth Justice Management Partnership
- 3. scrutinises and endorses the Peterborough Youth Offending Service operational priorities

# 1. ORIGIN OF REPORT

1.1 This report is presented to the Adults and Communities Scrutiny Committee at the request of the Service Director - Communities and Partnerships.

# 2. PURPOSE AND REASON FOR REPORT

- 2.1 This report describes the objectives and priorities set out within the Joint Cambridgeshire and Peterborough Youth Justice Plan 2019-22. It is a statutory requirement under the 1998 Crime & Disorder Act for local authorities and the wider partnership to have a Youth Justice Management Board and strategic Youth Justice Plan. Cambridgeshire and Peterborough have developed and submitted a Joint Youth Justice Board Plan through the Cambridgeshire and Peterborough Youth Justice Management Board. The Youth Justice Plan is endorsed by the Joint Management Board and the central Youth Justice Board (YJB) prior to release of the Youth Offending Team's Youth Justice Grants.
- 2.2 This report is for the Adults and Communities Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 Overview Scrutiny Functions, paragraph No. 2.1

Functions determined by Council:

4. Neighbourhood and Community Support (including cohesion, community safety and youth offending)

and Functions determined by Statute:

To review and scrutinise crime and disorder matters, including acting as the Council's crime and disorder committee in accordance with Sections 19 of the Police and Justice Act 2006;.

2.3 The Youth Justice Plan closely aligns with Peterborough's Strategic Objectives in respect of the

following priorities:

- Improving educational attainment and skills
- Safeguarding vulnerable children and adults
- Keeping all our communities safe, cohesive and healthy
- Achieving the best health and wellbeing for the city
- 2.4 This report links to the Children in Care Pledge in respect of:
  - Supporting young people into college and education
  - helping encourage young people to be healthy
  - supporting young people to have a good education

# 3. TIMESCALES

Is this a Major Policy Item/Statutory Plan?	YES	If yes, date for Cabinet meeting	18 November 2019
Date for relevant Council meeting if applicable	18 December 2019	Date for submission to Government Dept.	N/A

# 4. BACKGROUND AND KEY ISSUES

- 4.1 This report describes the objectives and priorities set out within the Joint Cambridgeshire and Peterborough Youth Justice Plan 2019-22. It is a statutory requirement under the 1998 Crime & Disorder Act for local authorities and the wider partnership to have a Youth Justice Management Board and strategic Youth Justice Plan. Cambridgeshire and Peterborough have developed and submitted a Joint Youth Justice Board Plan through the Cambridgeshire and Peterborough Youth Justice Management Board. The Youth Justice Plan is endorsed by the Joint Management Board and the central Youth Justice Board (YJB) prior to release of the Youth Offending Team's Youth Justice Grants.
- 4.2 For the first time a three year plan has been developed with an annual review and update section that will be completed every 12 months. This approach has been agreed with the Youth Justice Board.
- 4.3 The Youth Justice Plan reviews performance for 2018/19 where it can be seen that the youth justice partnership has performed well in respect of key performance indicators for preventing first time entrants into the criminal justice system, and reducing custody. We have performed better than both the national and Eastern Region averages in these areas. However, we have seen a slight decline during the overall annual period for re-offending, which is as a result of a small, high risk and complex cohort, and a response is in place to address this and improve in this area.
- 4.4 HM Probation Inspectorate launched a new three year phased Youth Justice inspection framework in May 2018. They will inspect three 'domains' of Youth Offending Services work: Organisational delivery; Court Disposals; and Out of Court Disposals (OOCD). Overall judgements against the 3 domains will be given as either Outstanding, Good, Requires Improvement or Inadequate. Results of the inspection will be given during the last day of the Inspection, with a report and press release published 6 weeks later.
- 4.5 Peterborough last received an inspection in April 2014 when they received an overall **Good** judgement. Activity to ensure we are inspection-ready is in place, including an audit programme, self-assessment, improvement plan, story of place document, and opening Inspection presentation.
- 4.6 The youth offending service continues to receive statutory financial, staff and payment in kind contributions from the Clinical Commissioning Group, the Constabulary and Probation Service.

There has been a minimal reduction to grant contributions from the Youth Justice Board in respect of the Effective Practice Grant for 2019/20, where we have seen a 1% reduction in funding.

- 4.7 We have been successful in securing a Home Office Early Intervention Fund bid of £484k to fund a Safer Relationships Team across Cambridgeshire and Peterborough for a 12 month period. This team will work alongside our most vulnerable and high risk young people who are at moderate and significant risk of Criminal Exploitation and Serious Youth Violence.
- 4.8 Within the 2019-22 Youth Justice Plan the following strategic objectives have been identified:
  - Increasing engagement in relation to young people in education, employment or training (EET), and reducing those not in education, employment or training (NEET) or who are missing from education
  - Ensuring effective transitions and support to move young people to adult services
  - Ensuring that health and social care services are integrated with youth justice services, and we promote and improve young people's health, wellbeing and life chances
  - Implementing a partnership response to re-offending data and setting priorities for reducing the number of young people who reoffend
  - Enhancing the partnership response to Child Criminal Exploitation (CCE) and Serious Youth Violence
  - Ensuring that there are robust partnership arrangements to prevent custodial sentences/remands and that facilitate effective post custody resettlement
  - Developing a partnership strategy for prevention and out of court disposals to reduce the number of young people becoming first time entrants and those receiving Court disposals
- 4.9 The Youth Justice Plan also outlines the following operational priority areas for Peterborough Youth Offending Service:
  - Strong quality assurance process and live monitoring of re-offending
  - Strong data, information and performance analysis processes
  - Production of high quality Asset Plus Assessments
  - Review and development of the Targeted Youth Support Service
  - Effective Multi-Agency Public Protection practice and processes
  - Responding to Criminal Exploitation and Serious Youth Violence
  - Identification of health needs and delivery of interventions
  - Development of Contextual Safeguarding and Trauma Informed Practice

# 5. CONSULTATION

5.1 The Youth Justice Plan 2019-22 has been completed in consultation with staff, partners and Cambridgeshire and Peterborough Youth Justice Management Board.

# 6. ANTICIPATED OUTCOMES OR IMPACT

6.1 Endorsement of the Youth Justice Plan will enable the Youth Justice Partnership to focus on strategic objectives and operational priorities for the next 3 years.

# 7. REASON FOR THE RECOMMENDATION

7.1 It is a statutory requirement to have an agreed Partnership Youth Justice Plan as defined by the Crime and Disorder Act 1998 and best practice for this to be scrutinised by Members.

## 8. ALTERNATIVE OPTIONS CONSIDERED

8.1 NA

# 9. IMPLICATIONS

9.1 Financial Implications

N/A

# 9.2 Legal Implications

As stated above it is a statutory requirement to have an agreed Partnership Youth Justice Plan as defined by the Crime and Disorder Act 1998.

# 9.3 Equalities Implications

N/A

9.4 Rural Implications

N/A

#### 10. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

10.1 Cambridgeshire and Peterborough Youth Justice Plan 2019-22

# 11. APPENDICES

11.1 Appendix 1 - Cambridgeshire and Peterborough Youth Justice Plan 2019-22

## **Cambridgeshire and Peterborough**

**Joint Youth Justice Plan** 

July 2019 – 2022

## **Chair's Forward**

This Youth Justice Plan reviews the performance outcomes and service delivery of Cambridgeshire and Peterborough Youth Offending Services over the past 12 months. The plan also outlines key strategic objectives and priorities for the future to ensure that services continue to improve, that we achieve effectiveness and deliver value for money. This Youth Justice Plan will set strategic objectives and priorities for the next three years to enable us to focus on long-term strategic direction. It will be reviewed annually to meet statutory requirements of the YJB Effective Practice terms of grant.

Cambridgeshire and Peterborough Local Authorities embedded a Joint Strategic Leadership Team in 2017 and appointed a Joint Head of Service in February 2018 across both Local Authority Youth Justice Services. The joint governance Youth Justice Management Board has now been in place for two years and I was excited to take on the responsibility of independent Chair in January 2018. External leadership provides an independent position of challenge for the local authority (YOT hosts) and the wider Youth Justice Partnership.

We continue to see a period of change for local authorities and the wider partnership and it is essential that we review how agencies are collaborating and working together to consistently meet the needs of young people at risk of entering the youth justice system, those reoffending and presenting risk of harm to the public. The partnership are committed to better understanding our cohort and the needs and challenges facing young people so we can structure and deliver services that allow them to progress to adulthood and achieve the best possible personal outcomes.

Cambridgeshire and Peterborough have not been subject to an individual inspection during the last 12 months. However, we are following a process to ensure continuous improvement and inspection readiness in line with HMIP criteria and thematic inspections.

Both Youth Offending Services, local authorities and the wider partnership will ensure we are striving to deliver quality services to young people, families and victims that meet the expectations of the HM Probation Inspectorate and achieve positive outcomes for the future.

## Structure and Governance

Cambridgeshire and Peterborough Joint Youth Justice Management Board has been in place for two years and is chaired by Assistant Chief Constable, Dan Vajzovic. The Board has appropriate membership from across the partnership with senior representation from Social Care, the National Probation Service, Cambridgeshire Constabulary, the Police and Crime Commissioners Office, Clinical Commissioning Group and voluntary sector. Education representation is in place and will become the responsibility of the new Assistant Director of Education from May 2019. The board has made clear the requirement to send appropriate deputies and informed all members of the statutory requirement in respect of partnership governance. New board members will receive an induction in respect of their role and the statutory functions of Management Board when they become members.

The joint Youth Justice Management Board holds the partnership to account and oversees the delivery of Youth Justice Services in Cambridgeshire and Peterborough. The Board will continue to oversee any Inspection preparation and Improvement Plans for both services.

Reports and updates are regularly provided to the Board with regards to Performance against:

- National Indicators: Re-offending, First Time Entrants, Disproportionality, Custody
- Locally Agreed Indicators: Education, Training and Employment, Accommodation and Remands
- Live Re-offending Tracker
- National Standards Audits
- Qualitative Core Case and Thematic Audits in line with HMI Probation Criteria
- Transfer of Information to the Secure Estate
- Partner themed deep dive analysis
- Case Studies and recommendations prepared by the YOS and wider partnership.

The Board supports the Youth Offending Services in overcoming barriers to effective multi-agency working and ensures that partner agencies make an effective contribution to delivering against key youth justice outcomes. Youth Justice Priorities sit within the wider Directorate Service Plans, Strategic Needs Assessments, Safeguarding Board Strategic Plan, Community Safety Plan and Police and Crime Commissioners Plan. The partnership is currently supporting the YOS in respect of multi-agency working arrangements and any challenges in respect of youth justice outcomes are raised through the board.

The Youth Justice Management Board is responsible for decision making in matters in relation to youth justice and members should ensure that they have the delegated authority from their own organisations to be able to make determination decisions. As such the Board is constituted as a board with decision-making power.

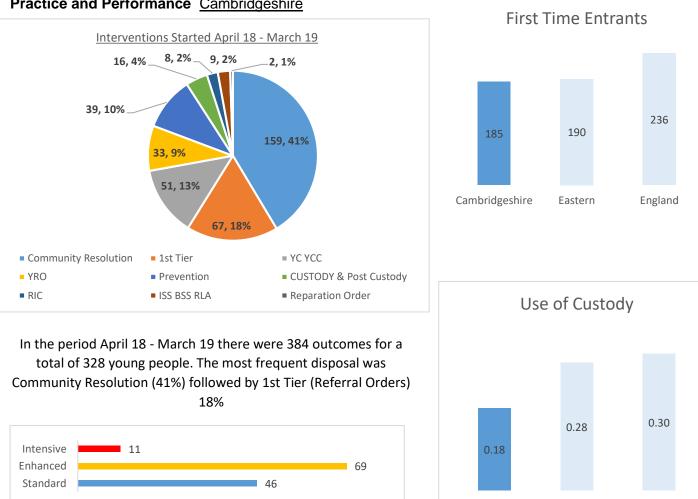
The Board will ensure that appropriate updates and reports are sent to the Countywide Safer Community Partnership Board and Executive Safeguarding Board. The performance and work of the Youth Justice Partnership Services will also be reviewed by Cambridgeshire and Peterborough Local Authority Scrutiny Committees and other relevant strategy and performance boards as appropriate and requested.

Following each Youth Justice Management Board the lead officer will prepare a summary report detailing:

- what the board has achieved in the last quarter
- support required from other partner boards
- our priorities for the next 3 months
- identified risks going forward.

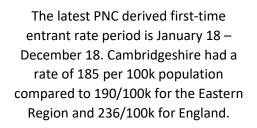
Cambridgeshire and Peterborough YOS were tasked by the Board to implement a Live Re-offending Toolkit and this is monitored by the Board every six months. The Board is currently considering this data to explore how we can respond to young people most at risk of re-offending and any trends and patterns relevant to this cohort. The toolkit provides access to current data on a cohort of young people across all intervention from early help, out of court disposals and post court interventions. The partnership's aim is to understand more about the cohort in respect of age, ethnicity, offence type, gender, disposals, geographic location, pattern of repeat offending, other needs and status, intervention effectiveness. The YOS management team is now implementing the toolkit as a management supervision tool to identify our priority young people and assign, monitor and evaluate tasks allocated to cases.





#### Practice and Performance Cambridgeshire

Of young people assessed using Asset plus the most frequent level was enhanced.



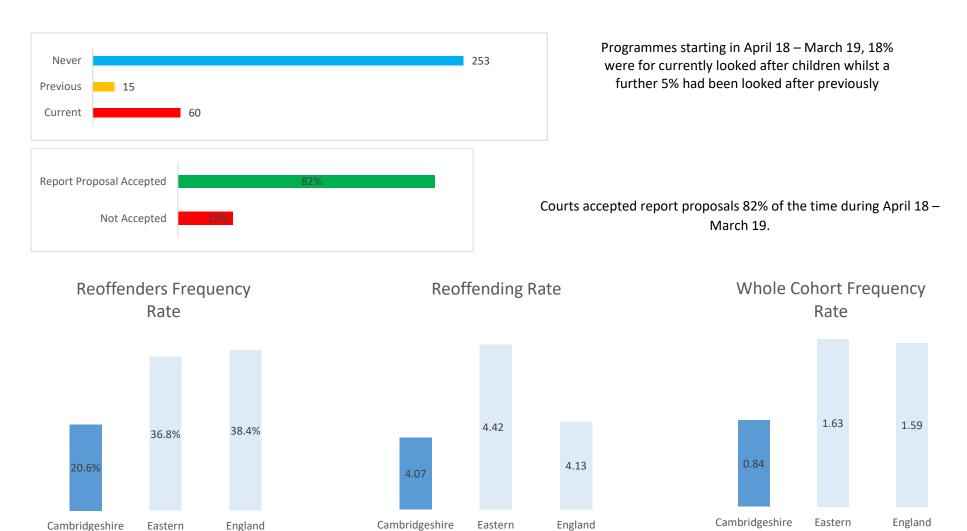
The custody rate for Cambridgeshire in 2018/19 (Apr18-Mar19) was 0.18/1k population compared to 0.28/1k for the Eastern Region and 0.3/1k for England. Custodial sentences accounted for 4% of all court disposals.

Cambridgeshire

Eastern

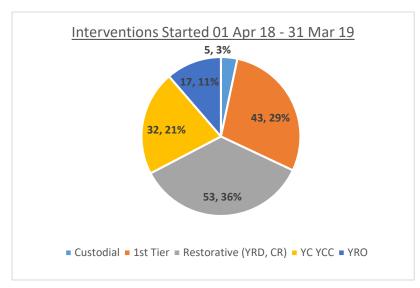
England



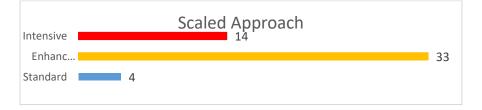


The latest reoffending rate period is Apr - Jun 17. Cambridgeshire had a binary rate of 20.6% compared to 36.8% for the Eastern Region and 38.4% for England. Frequency rate 1 (re-offenders only) for Cambridgeshire was 4.07 compared to 4.42 for the Eastern Region and 4.13 for England. The whole cohort frequency rate (rate 2) was 0.84 for Cambridgeshire compared to 1.63 for the Eastern Region and 1.59 for England.

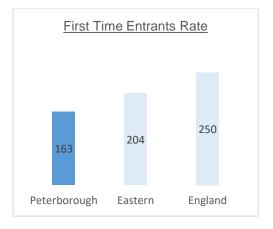
#### Peterborough



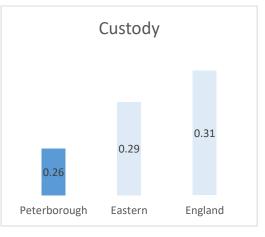
In the period April 2018 – March 2019 there were 150 outcomes. The most frequent disposal was Youth Restorative Disposals (35%) followed by Referral Orders (29%).



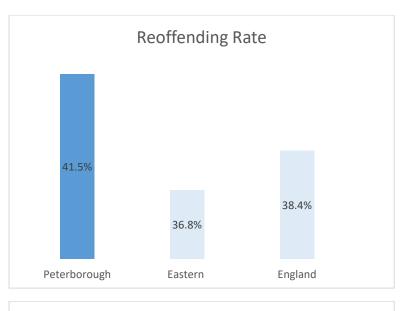
Of the young people assessed using Asset plus the most frequent level was enhanced.

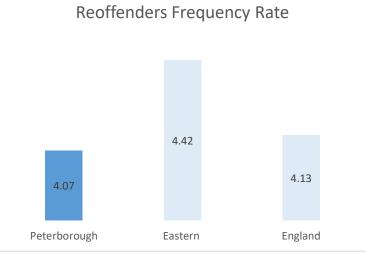


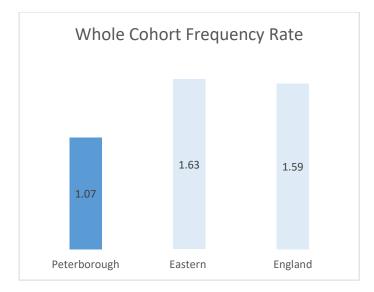
First time entrant rates remain low and are lower than both Eastern Region and national average



Custody remain higher than the local target set, but are lower than both the Eastern Region and national average







The latest reoffending rate period is Apr - Jun 17. Peterborough had a binary rate of 41.5% compared to 36.8% for Eastern Region and 38.4% for England. Frequency rate 1 (reoffenders only) for Peterborough was 4.07 compared to 4.42 for Stat neighbours and 4.13 for England. The whole cohort frequency rate (rate 2) was 1.07 for Peterborough compared to 1.63 for the Eastern Region and 1.59 for England.

#### Feedback

Parents:

'Despite problems they helped him understand boundaries and he benefited from consistency and trusted her. His worker also supported me in a complex home situation. They showed empathy and good communication which was very supportive'

'Worker was thoroughly fair and respectful towards ...'

'He enjoyed having someone to talk to. He would always come home in a good mood after spending time with his worker'

# Young people:

'The worker made me think about what I did and what not to do in future. They helped me understand not to steal'

'I liked talking and having someone to listen'

'They talked to me about the importance of walking away. There is more to life than getting in trouble'

#### **Resources and Value for Money**

Cambridgeshire and Peterborough have implemented ambitious plans for service development through a joint Youth Justice Plan in the last two years. This has led to positive outcomes across some areas and identification of future priority and further improvement. For the coming three years the services will seek to improve their current performance in areas of decline and sustain positive achievements in relation to the relevant key national and local performance areas. We have seen improvements across all performance areas in the last 12 months, except for re-offending in Peterborough. The partnership will need to focus particular attention on sustaining and improving upon this over the next three years, particularly in respect of complex young people and those at risk of criminal exploitation and youth violence. The Board will ensure a focus on achieving improvements and ensuring the Youth Justice Board grant is used for its intended purpose. The Grant will also be used to achieve the strategic objectives outlined in this three year plan.

Both Cambridgeshire and Peterborough YOS continue to be funded by a full range of partnership contributions as detailed in Table 1.

Peterborough has seen a static budget position in the last 12 months, and our continued contributions can be seen below. Cambridgeshire has seen a slight £40k reduction in the Local Authority contribution for 2019/20 and this has been approved by the management board with a clear expectation that future reductions could impact upon partner contributions. The Youth Justice Board Effective Practice grant has seen a 1% reduction in both Cambridgeshire and Peterborough during the last 12 months. We have seen an uplift in Remand Grant in both areas due to the increase in remands during 2018/19. The Youth Justice Board have announced that there will not be a review of grant formulation and allocation in 2019/20, but this is likely to happen in the next three years, which could bring risks to both Youth Offending Services across Cambridgeshire and Peterborough.

In line with the Crime and Disorder Act 1998 Cambridgeshire and Peterborough Youth Offending Services have their full complement of seconded staff. Both services have Social Workers, Psychologists, Physical Health Nurses, Police Officers, Probation Officers and Education, Training and Employment Workers allocations. All of these staff make a significant and valued contribution to the work of the service. The services now share a full time seconded Probation Officer, which will assist transitions for young people within the county into adulthood. We are also reviewing and recommissioning arrangements with the Clinical Commissioning Group and Cambridgeshire and Peterborough Foundation Trust to improve our psychology and clinical offer to both Services.

Cambridgeshire and Peterborough YOS have submitted two partnership funding bids to support the development and delivery of Criminal Exploitation and County Lines interventions and have been awarded £384,431 from the Home Office Early Intervention Youth Fund. This will be used to implement and pilot a 12 month targeted Criminal Exploitation/Gang Team that will deliver intensive trauma focussed interventions across both Cambridgeshire and Peterborough. We are also hopeful that additional YJB Pathfinder County Lines resources will be allocated to Cambridgeshire as a result of the high number of County Lines affecting Cambridge City.

July 2019	
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Table 1 - Contributions to the youth offending partnership pooled budget 2018/19

	Cambridgeshire		Peterborough	Peterborough		
Agency	Financial Contribution	Payment in Kind	Financial Contribution	Payment in Kind	Total	
Local Authority	£912,016	-	£443,179	-	£1,355,195	
Police	-	£90,000	-	£45,000	£135,000	
PCC Office	£127,000	-	£136,000	-	£263,000	
Public Health	£95,000	-	-	-	£95,000	
Clinical Commissioning Group	£28,220	£79,172	-	£113,740	£221,132	
National Probation Service	£10,000	£60,000	£5,000	£20,000	£95,000	
YJB Effective Practice Grant	£544,123	-	£448,988	-	£993,111	
YJB Remand Grant	£59,740	-	£29,219	-	88,959	
Peterborough CCC	£40,415				£40,415	
Total	1,816,514	229,172	1,062,386	178,740	3,286,812	

#### Junior Attendance Centre Grant

Cambridgeshire and Peterborough YOS Services continue to manage and run Attendance Centres both in Peterborough, Fenland and Cambridge City. New sessionals and volunteers have been recruited to support this service provision and a programme of work continues to be delivered through the centres lead by both Officers in Charge.

Cases are now referred to the centres across all interventions offered other than Prevention, which includes Intensive Supervision and Surveillance programme, Youth Rehabilitation Order, Referral Order and Pre-court disposals. Both services will continue to develop their programmes of interventions and ensure spaces are utilised for the future across the caseload and as directed by the Courts.

#### PACE/Appropriate Adult Service/Reparation Service

Cambridgeshire and Peterborough went through a joint successful tender process in respect of our Appropriate Adult /Reparation provision, which is now delivered jointly in both areas. This process has incurred small savings for both services and will ensure a consistent delivery across Cambridgeshire and Peterborough. The contract has been awarded to the YMCA Cambridgeshire and Peterborough and will be monitored through a contract board where issues will be subsequently reported to the YMCA Management Board. In addition both Local Authorities have now jointly commissioning a PACE Foster bed provision that is accessible and meets the needs of vulnerable young people as an alternative to being held in police custody. We are analysing the use of the PACE bed and young people held in overnight custody as a partnership to ensure that PACE duties are being implemented appropriately.

Cambridgeshire Constabulary and Cambridgeshire and Peterborough Local Authorities are also looking at the development of a Looked After Children's Protocol to ensure that the partnership are ensuring that Children in Care are not bought into the Criminal Justice System.

#### July 2019

#### Youth Justice Service Objectives 2019/20

During 2018/19 Cambridgeshire and Peterborough Youth Offending Services have worked with their Joint Management Board stakeholders and staff to create a service vision and strategic objectives that can be owned and aspired to by all. The vision and strategic objectives can be seen below along service priorities and delivery plans for 2018/19.

#### Youth Justice Vision

'To work together as a partnership to support families, reduce and prevent offending and harm caused by young people, and keep victims and the community safe'.

#### Strategic Objectives

- To increase young people known to YOS engagement in ETE and reduce the number of young people who are NEET/ Missing from Education
- To ensure young people have effective transitions and support to move from young people's to adult facing services
- To ensure that health and social care services are integrated with youth justice and that young people have access to services that promote and improve their health, wellbeing and life chances
- To implement a partnership response to re-offending data and set priorities for reducing the number of young people who reoffend
- Enhance the current partnership wide response to Criminal Exploitation and Serious Youth Violence to reduce the number of young people at risk, safeguard them and bring perpetrators to justice
- To ensure that there are robust partnership arrangements to prevent custodial sentences/remands and facilitate effective post custody resettlement
- To develop and implement a partnership strategy for prevention and out of court disposals that seeks to reduce the number of young people becoming First Time Entrants and receiving first and second tier Court disposals

#### Service Priorities

Cambridgeshire and Peterborough will share some Service Priorities for the next 3 years, however, there will also be differing priorities as a result of varying individual service needs. These are outlined and detailed further below.

- Quality Assurance Both YOTs will ensure they continue to run monthly audit programmes using a Quality Assurance Case File Audit process that will include managers auditing one case per month using a HMIP Audit tool. This will seek to identify areas for improvement against the HMIP Framework and inform an Action Plan for improvement. Both services will also implement peer auditing processes at least twice a year. The central Performance and Quality Assurance (PQA) Team will conduct two independent audits across wider Youth Support Services, highlighting strengths and improvement recommendations. Case quality workshops will be offered to staff through the annual PQA training schedule.
- Re-offending Live Tracker Toolkit Both YOTs are now using the YJB Re-offending Tool Kit and provide analysis on trends and areas
  for strategic attentions to the Board. In the next year and beyond we will seek to further develop the use of this tool to inform case load
  management decisions and priorities for managers and practitioners. We will also look to develop local fields in the tool to enable us to
  understand more about the harm presented and safeguarding/welfare needs of our offending population. We will also explore
  partnership early intervention response to address over representation of our CIC population and BAME young people who are over
  represented.
- Asset Plus Cambridgeshire and Peterborough have now embedded Asset Plus. Cambridgeshire have been using the Assessment
  tool for over three years and improvements in respect of quality can be seen. Cambridgeshire will continue to monitor the quality of
  Asset Plus and will address areas for improvement through Case File Audit. Peterborough went live in July 2017 and has relaunched an
  Asset Plus improvement group during 2018, which is focussing on specific areas for improvements identified in Case File Audits and
  providing additional training refresh to case holders.
- Targeted Youth Support Service (TYSS) Peterborough The new TYSS went live in Peterborough in September 2018 and transformed all other City Council young people's services by bringing them together in to one service that works with adolescents with a unique set of risk. This innovative new model builds upon a multi-agency partnership approach. The TYSS now provides Early Help, YOS, Social Care Child in Need and Edge of Care interventions to young people. We already have anecdotal evidence that this is resulting in a coordinated response and offer to young people. Our PQA Team will audit the service in April and September 2019 which will enable us to identify YOS and wider TYSS strengths and service delivery improvements. We will also undertake a 12 month review of the service in October 2019.
- Cambridgeshire YOS and Adolescent Service During 2018 Children's Safeguarding have launched a new Adolescent Service which provides greater opportunity for a joint working approach with young people. In the next 12 months we will closer embed joint working and explore a consistent model and approach to working with our complex cohort of young people.

- MAPPA and Public Protection Procedures and Practice The Management Team monitor all cases that hit the MAPPA criteria through monthly Management Meetings and in supervision with case holders. The joint High Risk Manager is responsible for maintaining this list and will ensure that we are offering appropriate high risk interventions to this cohort. We will continue to ensure that we are delivering training and development in respect of MAPPA across both areas.
- Criminal Exploitation/Serious Youth Violence In 2018 the Safeguarding Board agreed a new Criminal Exploitation Strategy that YOS have embedded in both areas. We have made progress in respect of identifying, tracking and assessing this cohort appropriately to ensure a partnership approach to management and safety and wellbeing. We have also started to implement the NRM process and ensure young people are considered where appropriate. We now need to further our delivery to ensure structure intervention and contextual safeguarding approaches with young people at risk of CCE. The YOS is leading upon a partnership group to focus upon preparing and producing funding bids for opportunities such as the Youth Endowment Fund. The service is also leading on the implementation of an Early Intervention Youth Fund funded Criminal Exploitation/Gang Team.
- Prevention and Out of Court Disposals Both Cambridgeshire and Peterborough have embedded a structure where Prevention, Youth Caution with conditions and Youth Conditional Cautions are held by YOS Officer or Youth Justice Officer alongside the post court caseload. We are in the process of developing a joint strategy and practice guidance with the Police across both areas to ensure practice is consistent and in line with HMIP expectations and criteria.
- Data, information and performance analysis Cambridgeshire and Peterborough have developed and implemented a dual performance dashboard framework for both areas to monitor performance against national and local indicators. This performance framework is monitored by the Management Board and in operational management meetings. Peterborough have improved data entry and reporting through CAPITA in the last 12 months and we will continue to strengthen this to ensure we are monitoring and analysing data in a timely way and respond to areas of concern. Peterborough are experiencing issues in respect of their CAPITA connectivity and this has been escalated to the Management Board and Youth Justice Board.
- Health Needs and Intervention The YOS, CCG and CPFT are working to recommission psychology and clinical resources to develop
  a consistent and needs led response across both areas. A three year arrangement should be in place during 2019. A new
  commissioning and delivery arrangement for Substance Misuse will also be implemented during 2019. The YOS is working with new
  delivery partners to ensure there is Memorandum of Understanding between the service and substance misuse providers. Both areas
  intend to further develop a trauma based formulation approach to delivery during the coming planning period.
- Contextual Safeguarding Approach to work with and support the Targeted Youth Support Service and Adolescent Services to embed a Contextual Safeguarding approach

#### **Partnership Arrangements**

Cambridgeshire and Peterborough YOS Services are respected and supported locally by partners. Both services are represented at Countywide Safeguarding Boards and are closely aligned with wider early help and children services. In addition they are represented at wider children and young people strategic meetings locally.

The Youth Offending Services in Cambridgeshire have good relationships with Children's Services Safeguarding, which includes District Based Children's Social Care, Early Help and specialist Adolescent Teams, that have been established to work with young people who are Children in Need. In Peterborough the Youth Offending Service sits as part of a new wider Targeted Youth Support Service, which includes Early Help services for young people and a Youth and Family Team that manages young people who are being supported through Children in Need Plans. Both Local Authorities are currently exploring the benefits of embedding a Contextual Safeguarding Model to shape work with young people. The YOS Risk, Safety and Wellbeing Management Model is supported by Social Care who attend and give input where required.

Both Youth Offending Services have strong processes with the Multi-Agency Safeguarding Hub (MASH) and will participate in Strategy discussions with police, health, education and Children's Social Care where cases are known or there are concerns with regards to Child Criminal Exploitation and offending. A new joint National Referral Mechanism meeting process has just been implemented with the Constabulary. The YOS is a key partner in respect of Serious Youth Violence and Criminal Exploitation, and attends monthly Multi-Agency Child Exploitation (MACE) Meetings to contribute to joint safeguarding and management of risk of harm in respect of young people who are involved in Exploitation.

The Head of Youth Support Service chairs the Cambridgeshire and Peterborough Channel Panel and sits at the Strategic Prevent Board, Safeguarding Delivery Board, SCR Panel and Exploitation Strategic Group. Both Councils are aware of their Prevent duties and are engaged with partners to screen, assess and intervene with young people at risk of extremism. Where young people hit the required MAPPA Threshold cases are referred to MAPPA meetings where multi-agency management of risk of serious harm to others is managed. YOS Services are represented MAPPA Strategic Board and Integrated Offender Management Reducing Re-offending Groups.

Both YOTS are allocated Wetherby as their local Young Offender Institute, and Oakhill and Rainsbrook as Secure Training Centres. If services have any challenges with care management in the secure estate these are reported to the YJB. A significant challenge in Peterborough during the last 12 months has been the successful transfer of secure information, which is failing as a result of a YJB error. This has been reported to the YJB and to senior managers through the Youth Justice Management Board Chair.

Both Youth Offending Services launched a new Local Serious Incident Process in 2018 and any cases that meet the threshold are referred to the Head of Service, Safeguarding Board and Management Board as appropriate. Action Plans are agreed and managed through these strategic forums.

The joint Youth Justice Management Board reports quarterly updates and delivery priorities to the Cambridgeshire and Peterborough Safeguarding Executive Board and Countywide Community Safety Board. The Police and Crime Commissioners Office are engaged with the Youth Justice agendas and the PCC chairs the latter Board. Youth Crime is detailed and recognised appropriately within the Police and Crime Commissioners Plan.

#### **Risks to Future Delivery against the Youth Justice Outcome Measures**

#### <u>Cohort</u>

During the last 12 months Cambridgeshire has seen a decrease in cohort with 518 cases in 2017/18 to 384 cases in 2018/19, and in Peterborough 172 cases in 2017/18 to 150 cases in 2018/19. Whilst Statutory Court Ordered cases have seen a decrease both YOSs have seen an increase in both Out of Court Disposal Interventions and Prevention Interventions. In both areas Prevention Intervention cohort is almost 40% of the size of Court Ordered Interventions. Both services are seeing an increase in complexity of cases in respect of both reoffending, risk of harm to others and safety and wellbeing. This is evidenced through the high number of cases managed at the intensive and enhanced scaled approach levels. Process are in place to robustly manage these high-risk cases through Risk/Safety and Wellbeing Management meetings and multi-agency systems to track and manage young people at risk of Child Sexual and Criminal Exploitation. It is to be noted that high numbers of young people involved in County Lines, CCE and Youth Violence are unknown to the Youth Offending Services, and the partnership are implementing process to engage these young people at a preventative and voluntary level.

The Youth Offending Services will be leading on the implementation of an Early Intervention Youth Fund Exploitation/Gang/Safer Relationship Team that will sit alongside YOS and Children's Services delivering interventions to young people at moderate and significant risk of Criminal Exploitation. It is intended that the team will be launched by end of August 2019 and will deliver for a full 12 months with funding support from the Office of Police and Crime Commissioner. The governance for reporting outcomes to the Home Office relating to this team will be managed through the Youth Justice Management Board.

#### **Recidivism**

Whilst Cambridgeshire has seen a reduction in recidivism during the last 12 months, Peterborough has seen an increase with significant high offending amongst a small population during quarter two. High risk and intensive services from Cambridgeshire have now been extended to Peterborough with one High Risk Team delivering interventions across both Youth Offending Teams. Re-offending Live Trackers across both areas indicate that re-offending is on the decrease and this was evidenced through Cambridgeshire's quarter one data for 2019/20.

The implementation of a specialist team that works with young people at risk of CCE and Youth Violence should impact upon reducing recidivism further.

#### **Custody**

Both areas have demonstrated low custody rates in line with Eastern and National comparators. Robust High Risk and Intensive Supervision and Surveillance packages are now available as alternatives to custody in both areas.

#### First Time Entrants

Both areas have seen a reduction in first time entrants during the last 12 months and preventative interventions have been extended in Cambridgeshire and Peterborough with an increasing caseload of early intervention. The services are also reviewing their Diversion services and developing a new Out of Court Protocol with the Constabulary to ensure all cases are managed in line with effective practice and HMP Inspection standards.

#### <u>BAME</u>

Current live tracker re-offending data indicates that young people from BAME backgrounds are over represented in the re-offending population. The Management Board will further analyse data in respect of police actions, court outcomes and completion of disposals for this cohort of young people. This data will also be compared to young people who are exploited to see if there is an overlap across these cohorts. The Youth Justice Management Teams will develop a task and finish group and research appropriate early interventions for young people from BAME backgrounds and what is currently being offered in Cambridgeshire and Peterborough. Both Youth Offending Services will continue to work with Business Intelligence Teams to see how this data can be captured and reported accurately to allow an appropriate response across the partnership in respect of BAME young people.

#### Other risk for Youth Justice Services

As with most Local Authorities and the whole of the public sector the largest risk to future delivery remains the financial challenges they face. Cambridgeshire and Peterborough Youth Offending Services are also aware of other risk such as:

- Performance against the new HMI Probation Inspection Framework Self-assessment and Improvement plan in place and reviewed monthly and quarterly by the Management Board
- Retention and recruitment of a YOS and TYSS skilled workforce
- Retention and recruitment of skilled psychology/clinical staff
- Performance in respect of Children Missing from Education and NEET population in Peterborough
- The changing nature and complexity of the young people who offend and increase of young people involved in Criminal Exploitation
- The changing structure and landscape for partner agencies and the need to sustain joint working relationships.

The joint Youth Justice Management Board and both Local Authorities will continue to focus on how they can consider and mitigate against these risks. One of the key actions is to understand and respond to the complex cohort in respect of Criminal Exploitation and County Lines and fully implement the new Safeguarding Board Criminal Exploitation Strategy and Action Plan across the partnership.

# ADULTS AND COMMUNITIES SCRUTINY COMMITTEE

AGENDA ITEM No. 8.

## 10 SEPTEMBER 2019

**PUBLIC REPORT** 

Report of:	Fiona McMillan, Director of Law and Governand	e .
Contact Officer(s):	David Beauchamp, Democratic Services Officer	Tel. 01733 384628

## MONITORING SCRUTINY RECOMMENDATIONS

RECOMMENDATIONS					
FROM: Director of Governance   Deadline date: N/A					
It is recommended that the Adults and Communities Scrutin	y Committee:				

1. Considers the responses from Cabinet Members and Officers to recommendations made at previous meetings as attached in Appendix 1 to the report and provides feedback including whether further monitoring of each recommendation is required.

## 1. ORIGIN OF REPORT

1.1 The Adults and Communities Scrutiny Committee agreed at a meeting held on 21 June 2017 that a report be provided at each meeting to note the outcome of any recommendations made at the previous meeting held thereby providing an opportunity for the Committee to request further monitoring of the recommendation should this be required.

## 2. PURPOSE AND REASON FOR REPORT

- 2.1 The report enables the Scrutiny Committee to monitor and track progress on recommendations made to the Executive or Officers at previous meetings.
- 2.2 This report is for the Adults and Communities Scrutiny Committee to consider under its Terms of Reference No. *Part 3, Section 4 Overview and Scrutiny Functions, paragraph 3.3:*

The Scrutiny Committees will:

- (a) Review and scrutinise the Executive, Committee and officer decisions and performance in connection with the discharge of any of the Council's functions;
- (b) Review and scrutinise the Council's performance in meeting the aims of its policies and performance targets and/or particular service areas;
- (c) Question Members of the Executive, Committees and senior officers about their decisions and performance of the Council, both generally and in relation to particular decisions or projects;
- (d) Make recommendations to the Executive and the Council as a result of the scrutiny process

#### 3. TIMESCALES

Is this a Major Policy	NO	If yes, date for	N/A
Item/Statutory Plan?		Cabinet meeting	

#### 4. BACKGROUND

- 4.1 Appendix 1 of the report sets out the recommendations made to Cabinet Members or Officers at previous meetings of the Scrutiny Committee. It also contains summaries of any action taken by Cabinet Members or Officers in response to the recommendations.
- 4.2 The progress status for each recommendation is indicated and if the Scrutiny Committee confirms acceptance of the items marked as completed they will be removed from the list. In cases where action on the recommendation is outstanding or the Committee does not accept the matter has been adequately completed it will be kept on the list and reported back to the next meeting of the Committee. It will remain on the list until such time as the Committee accepts the recommendation as completed.

#### 5. ANTICIPATED OUTCOMES OR IMPACT

5.1 Timelier monitoring of recommendations made will assist the Scrutiny Committee in assessing the impact and consequence of the recommendations.

#### 6. REASON FOR THE RECOMMENDATION

6.1 To assist the Committee in assessing the impact and consequence of recommendations made at previous meetings.

#### 7. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

7.1 Minutes of the Adults and Communities Scrutiny Committee meetings held on 12 March 2019 and 1 July 2019.

#### 8. APPENDICES

8.1 Appendix 1 – Recommendation Monitoring Report

## **RECOMMENDATIONS MONITORING REPORT 2019/20 and 2018/2019**

## ADULTS AND COMMUNITIES SCRUTINY COMMITTEE

Meeting date Recommendations Made	Portfolio Holder / Directorate Responsible	Agenda Item Title	Recommendation Made	Action Taken	Progress Status					
2019/20	2019/20									
1 JULY 2019	Councillor Walsh, Cabinet Member for Communities	9. Prevent Strategy Refresh 2019/2020	The Adults and Communities Scrutiny Committee <b>RESOLVED</b> to endorse the strategy for approval by Cabinet and supported its relaunch via an internal and external engagement plan.	Recommendation sent to Councillor Walsh, Cabinet Member for Communities. Scheduled to go to Cabinet on 23 September 2019.	Ongoing					
2018/29										
12 March 2019	Councillor Walsh, Cabinet Member for Communities	7. Selective Licensing – interim review and outcomes	<b>RECOMMENDATION:</b> The Adults and Communities Scrutiny Committee <b>RESOLVED</b> to recommend that Cabinet should consider extending Selective Licensing across the whole city after the current scheme expires in 2021.	Recommendation sent to Councillor Walsh, Cabinet Member for Communities and Jo Bezant, Manager, Housing Enforcement and Selective Licensing on 18/03/2019. Response received and sent to committee members on 03/04/2019. Please see below:	Ongoing.					

Meeting date Recommendations Made	Portfolio Holder / Directorate Responsible	Agenda Item Title	Recommendation Made	Action Taken	Progress Status
	existing scheme we did using the same format for a selective licensing comprehensive public rented sector would be Communities and Loca However, MHCLG is c some time this year. T	d this via an extensive anal as the previous scheme. g scheme to be introduced consultation of at least 10 v affected by any new sche al Government (MHCLG). urrently undertaking a revie his review could affect any	Is to demonstrate that certain cond ysis of data. To extend the schem This data would then identify the a . Following any decision on propose weeks would need to take place. I me it would be necessary for appro- ew of selective licensing across the future schemes the council may wo in the complexities of developing ne	e we would need to underta reas of the city that meet th sed areas for a new scheme n addition, if more than 209 oval to be sought from the l e country. The outcome of rant to introduce, and we ha	ake a similar exercise be government set criteria e, a full and % of the city's private Ministry for Housing, the review is expected ave therefore agreed that

# ADULTS AND COMMUNITIES SCRUTINY COMMITTEE

AGENDA ITEM No. 9.

## 10 SEPTEMBER 2019

PUBLIC REPORT

Report of:		Fiona McMillan, Director of Law and Governance			
Cabinet Member(s) r	esponsible:	Cabinet Member for Resources			
Contact Officer(s):	David Beau	champ, Democratic Services Officer	Tel. 01733 384628		

# FORWARD PLAN OF EXECUTIVE DECISIONS

RECOMMENDATIONS				
FROM: Director of Law and Governance	Deadline date: N/A			

It is recommended that the Adults and Communities Scrutiny Committee:

1. Considers the current Forward Plan of Executive Decisions and identifies any relevant items for inclusion within their work programme or request further information.

## 1. ORIGIN OF REPORT

1.1 The report is presented to the Committee in accordance with the Terms of Reference as set out in section 2.2 of the report.

## 2. PURPOSE AND REASON FOR REPORT

- 2.1 This is a regular report to the Adults and Communities Scrutiny Committee outlining the content of the Forward Plan of Executive Decisions.
- 2.2 This report is for the Adults and Communities Scrutiny Committee to consider under its Terms of Reference No. Part 3, Section 4 Overview and Scrutiny Functions, paragraph 3.3:

The Scrutiny Committees will:

- (f) Hold the Executive to account for the discharge of functions in the following ways:
  - *ii)* By scrutinising Key Decisions which the Executive is planning to take, as set out in the Forward Plan of Executive Decisions;

#### 3. TIMESCALES

Is this a Major Policy	NO	If yes, date for	N/A
Item/Statutory Plan?		Cabinet meeting	

## 4. BACKGROUND AND KEY ISSUES

4.1 The latest version of the Forward Plan of Executive Decisions is attached at Appendix 1. The Forward Plan contains those Executive Decisions which the Leader of the Council believes that

the Cabinet or individual Cabinet Member(s) can take and any new key decisions to be taken after 30 September 2019.

- 4.2 The information in the Forward Plan of Executive Decisions provides the Committee with the opportunity of considering whether it wishes to seek to influence any of these executive decisions, or to request further information.
- 4.3 If the Committee wished to examine any of the executive decisions, consideration would need to be given as to how this could be accommodated within the work programme.
- 4.4 As the Forward Plan is published fortnightly any version of the Forward Plan published after dispatch of this agenda will be tabled at the meeting.

#### 5. CONSULTATION

5.1 Details of any consultation on individual decisions are contained within the Forward Plan of Executive Decisions.

#### 6. ANTICIPATED OUTCOMES OR IMPACT

6.1 After consideration of the Forward Plan of Executive Decisions the Committee may request further information on any Executive Decision that falls within the remit of the Committee.

#### 7. REASON FOR THE RECOMMENDATION

7.1 The report presented allows the Committee to fulfil the requirement to scrutinise Key Decisions which the Executive is planning to take, as set out in the Forward Plan of Executive Decisions in accordance with their terms of reference as set out in Part 3, Section 4 - Overview and Scrutiny Functions, paragraph 3.3.

#### 8. ALTERNATIVE OPTIONS CONSIDERED

8.1 N/A

#### 9. IMPLICATIONS

**Financial Implications** 

9.1 N/A

**Legal Implications** 

9.2 N/A

#### 10. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

- 10.1 None
- 11. APPENDICES
- 11.1 Appendix 1 Forward Plan of Executive Decisions

# PETERBOROUGH CITY COUNCIL'S FORWARD PLAN OF EXECUTIVE DECISIONS

PUBLISHED: 30 AUGUST 2019

# **FORWARD PLAN**

#### PART 1 - KEY DECISIONS

In the period commencing 28 clear days after the date of publication of this Plan, Peterborough City Council's Executive intends to take 'key decisions' on the issues set out below in **Part 1**. Key decisions relate to those executive decisions which are likely to result in the Council spending or saving money in excess of £500,000 and/or have a significant impact on two or more wards in Peterborough.

If the decision is to be taken by an individual Cabinet Member, the name of the Cabinet Member is shown against the decision, in addition to details of the Councillor's portfolio. If the decision is to be taken by the Cabinet, this too is shown against the decision and its members are as listed below: Cllr Holdich (Leader); Cllr Fitzgerald (Deputy Leader); Cllr Ayres; Cllr Cereste; Cllr Hiller; Cllr Seaton; Cllr Walsh; Cllr Allen and Cllr Farooq.

This Plan should be seen as an outline of the proposed decisions for the forthcoming month and it will be updated on a fortnightly basis to reflect new key-decisions. Each new Plan supersedes the previous Plan and items may be carried over into forthcoming Plans. Any questions on specific issues included on the Plan should be included on the form which appears at the back of the Plan and submitted to philippa.turvey@peterborough.gov.uk, Democratic and Constitutional Services Manager, Legal and Governance Department, Town Hall, Bridge Street, PE1 1HG (fax 08702 388039). Alternatively, you can submit your views via e-mail to or by telephone on 01733 452460. For each decision a public report will be available from the Democratic Services Team one week before the decision is taken.

#### PART 2 - NOTICE OF INTENTION TO TAKE DECISION IN PRIVATE

Whilst the majority of the Executive's business at the Cabinet meetings listed in this Plan will be open to the public and media organisations to attend, there will be some business to be considered that contains, for example, confidential, commercially sensitive or personal information. In these circumstances the meeting may be held in private, and on the rare occasion this applies, notice will be given within **Part 2** of this document, 'notice of intention to hold meeting in private'. A further formal notice of the intention to hold the meeting, or part of it, in private, will also be given 28 clear days in advance of any private meeting in accordance with The Local Authorities (Executive Arrangements) below and Access to Information) (England) Regulations 2012.

The Council invites members of the public to attend any of the meetings at which these decisions will be discussed (unless a notice of intention to hold the meeting in private has been given).

#### PART 3 – NOTIFICATION OF NON-KEY DECISIONS

For complete transparency relating to the work of the Executive, this Plan also includes an overview of non-key decisions to be taken by the Cabinet or individual Cabinet Members, these decisions are listed at **Part 3** and will be updated on a weekly basis.

You are entitled to view any documents listed on the Plan, or obtain extracts from any documents listed or subsequently submitted to the decision maker prior to the decision being made, subject to any restrictions on disclosure. There is no charge for viewing the documents, although charges may be made for photocopying or postage. Documents listed on the notice and relevant documents subsequently being submitted can be requested from Philippa Turvey, Democratic and Constitutional Services Manager, Legal and Governance Department, Town Hall, Bridge Street, PE1 1HG (fax 08702 388038), e-mail to philippa.turvey@peterborough.gov.uk or by telephone on 01733 452460.

All decisions will be posted on the Council's website: <u>www.peterborough.gov.uk/executivedeisions</u>. If you wish to make comments or representations regarding the 'key decisions' outlined in this Plan, please submit them to the Democratic and Constitutional Services Manager using the form attached. For your information, the contact details for the Council's various service departments are incorporated within this Plan.

KEY DECISIONS FROM 30 SEPTEMBER 2019								
KEY DECISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION	
Purchase of Social Housing Development – KEY/30SEP19/01 Potential purchase of social housing development to acquire freehold social housing.	Councillor Peter Hiller, Cabinet Member for Strategic Planning and Commercial Strategy and Investments	October 2019	Growth, Environment and Resources Scrutiny Committee	East	Relevant Internal and External Stakeholders	Anthony Smith, Strategic Asset Management Surveyor, anthony.smith@n ps.go.uk	Valuation Report, exempt under paragraph 3 of schedule 12A	

	PREVIOUSLY ADVERTISED KEY DECISIONS								
KEY	DECISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION	
1. 128	Affordable Warmth Strategy 2019 – 2021 - KEY/17APR17/03 Recommendation to approve the Affordable Warmth Strategy 2019 – 2021	Councillor Walsh, Cabinet Member for Communities	September 2019	Adults and Communities Scrutiny Committee	All wards	Relevant internal and external stakeholders. The draft strategy will be placed on PCC Consultation pages for 3 week consultation period	Sharon Malia, Housing Programmes Manager, Tel: 01733 863764 Email: sharon.malia@peter borough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. BRE Integrated Dwelling Level Housing Stock Modelling Report July 2016 Housing Renewals Policy 2017 – 2019	

		DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
<b>2</b> . 129	Approval of contract for the delivery of Lot 1 - General Information, Advice and Guidance Services and Lot 2 - Specialist Information, Advice and Guidance Services – KEY/16OCT17/04 Following competitive procurement of these services, to approve the contract to deliver Lot 1 Generalist Information, Advice and Guidance Services - Homelessness Prevention; and Lot 2 Specialist Information, Advice and Guidance Services - supporting protected characteristic groups.	Councillor Seaton, Cabinet Member for Finance	September 2019	Adults and Communities Scrutiny Committee	All Wards	Relevant internal and external stakeholders. Voluntary sector advice agencies consulted in service design. Market testing of providers has also taken place.	Ian Phillips, Senior Policy Manager Tel: 01733 863849 Email: ian.phillips@ peterborough .gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published

K	KEY DECISION REQUIRED DECISION MAKER		DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
3.	ICT Infrastructure works for Fletton Quays – KEY/13NOV17/02 To agree to the procurement of ICT infrastructure works for Fletton Quays	Councillor Seaton, Cabinet Member for Finance	September 2019	Growth, Environment & Resources Scrutiny Committee	N/A	Relevant internal and external stakeholders	Peter Carpenter, Acting Corporate Director, Resources Tel: 07920160122 Email: Peter.carpent er@peterbor ough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).
4.	Expansion and Remodelling of Marshfields School – KEY/11DEC17/03 To approve the proposed expansion and remodelling of Marshfields school	Cabinet Member for Children's Services and Education, Skills and University	September 2019	Children and Education Scrutiny Committee	Dogsthorpe Ward	Relevant internal and external stakeholders. Public Consultation Meeting	Sharon Bishop, Capital Projects & Assets Officer Tel: 01733 863997 Email: Sharon.bisho p@peterboro ugh.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. School Organisational Plan

DECISION REQUIRED DECISION MAKER			DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
5. 131	A605 Whittlesey Access Phase 2 - Stanground Access - KEY/25DEC17/03 To approve the design and construction of the A605 Stanground East Junction Improvements for the financial year of 2017/18 - 2018-19 and authorise the associated package of work to be issued to Skanska Construction UK Limited under the Council's existing agreement with SKANSKA dated 18th September 2013 (the Highways Services Agreement).	Cabinet Member for Strategic Planning and Commercial Strategy and Investments	September 2019	Growth, Environment and Resources Scrutiny Committee	Stanground South	Relevant internal and external stakeholders. The scheme is included in the fourth Local Transport Plan. Further consultation will be undertaken during the design process, including ward Councillors.	Lewis Banks, Principal Sustainable Transport Planning Officer. Tel: 01733 317465, Email: lewis.banks@ peterborough. gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. Fourth Local Transport Plan: www.peterborough.gov .uk/Itp National Productivity Investment Fund for the Local Road Network Application Form: <u>https://www.peterborou</u> gh.gov.uk/upload/www. peterborough.gov.uk/re sidents/transport-and- streets/A605Applicatio n.pdf?inline=true

		DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
<b>6</b> .	Approval of funding allocation for the improvement to open spaces in the CAN Do area of the city as part of the capital regeneration programme for the area - KEY/25DEC17/04 Improvement to open spaces in the CAN Do area of the city as part of the capital regeneration programme for the area	Councillor Cereste, Cabinet Member for Waste, Street Scene and Environment	September 2019	Growth, Environment and Resources Scrutiny Committee	Central, North & Park wards	Relevant internal and external stakeholders. Community engagement with local residents, businesses & partner organisations	Charlotte Palmer, Group Manager – Transport and Environment, charlotte.pal mer@peterbo rough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. Budget allocation in MTFP 2017/18
1327.	Approval of funding allocation for community facility improvements in the CAN Do area of the city as part of the capital Regeneration Programme for the area - KEY/25DEC17/05 Community facility improvements in the CAN Do area of the city as part of the capital Regeneration Programme for the area	Councillor Seaton, Cabinet Member for Finance	September 2019	Growth, Environment and Resources Scrutiny Committee	Central, North & Park wards	Relevant internal and external stakeholders. Community engagement with residents, groups, businesses and partner organisations	Cate Harding, Community Capacity Manager. Tel: 01733 317497. Email: cate.harding @peterborou gh.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. Budget allocation of £4m in MTFP 2017/8

		DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
<b>8</b> .	Approval of funding allocation for the public realm improvements within the CAN Do area of the city as part of the capital regeneration programme for the area - KEY/25DEC17/06 public realm improvements within the CAN Do area	Councillor Hiller, Cabinet Member for Strategic Planning and Commercial Strategy and Investments	September 2019	Growth, Environment and Resources Scrutiny Committee	Central, North & Park wards	Relevant internal and external stakeholders. Community engagement with local residents, groups, businesses and partner agencies	Charlotte Palmer, Group Manager – Transport and Environment, charlotte.pal mer@peterb orough.gov.u k	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. Budget allocation £3m in MTFP 2017/18
1 <u>3</u> 39.	Extension to the Section 75 Agreement for Learning Disabilities Services - KEY/30APR18/01 Extension of the existing staff and commissioned arrangements for a period of 12 months	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Adult Social Care, Health & Public Health	September 2019	Health Scrutiny Committee	All wards	Consultation with key stakeholders to agree this interim approach	Cris Green Tel: 01733 207164 Email: cris.green@p eterborough. gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

DECISION REQUIRED		DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
10.	Approval for contract to be awarded to Skanska to deliver widening of the A605 Oundle Road between Alwalton and Lynch Wood Business Park - KEY/11JUN18/03 Approval for contract to be awarded to Skanska to deliver widening of the A605 Oundle Road between Alwalton and Lynch Wood Business Park. The council has received funding (£720k) from the Cambridgeshire and Peterborough Combined Authority to deliver the scheme. In addition the council has also allocated internal funding (£773k) towards the scheme.	Councillor Hiller, Cabinet Member for Strategic Planning and Commercial Strategy and Investments	September 2019	Growth, Environment and Resources Scrutiny Committee	Orton Waterville	Relevant internal and external stakeholders Consultation will take place once the scheme design is completed. This is expected to be later this summer.	Lewis Banks, Principal Sustainable Transport Planning Officer. Tel: 01733 317465, Email: lewis.banks @peterborou gh.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. Cambridgeshire and Peterborough Combined Authority meeting notes confirming grant funding allocation. Also CMDN for award of contract to Skanska for provision of Professional Services under Peterborough Highway Services partnership.

DECISION REQUIRED DECISION MAKER			DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
11.	Disposal of freehold in Centre of the City - KEY/12JUN18/01 To delegate authority to the Corporate Director of Growth and Regeneration to sell the property	Councillor Seaton, Cabinet Member for Finance	September 2019	Growth, Environment and Resources Scrutiny Committee	Central	Relevant internal and external stakeholders	Peter Carpenter, Acting Corporate Director, Resources Tel: 0792016012 2 Email: Peter.carpent er@peterbor ough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).

DECISION REQUIRED DECISION MAKER		DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION	
12.	To approve the awarding of contracts to external providers following a competitive tender exercise led by Cambridgeshire County Council KEY/25JUNE18/02 Cambridgeshire County has recently conducted a tendering exercise to establish a Dynamic Purchasing System for the provision Supported Living Services for Adults with a Learning Disability (Reference number: DN311905). Peterborough City Council is the named authority under this arrangement and would want to commission care and support packages (call- off).	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Adult Social Care, Health & Public Health	September 2019	Adults and Communities Scrutiny Committee	All Wards	Relevant internal and external stakeholders Relevant consultations has been carried out with the service users, family carers, Health colleagues and care and support providers across Cambridgeshire and Peterborough.	Mubarak Darbar, Head of Integrated Commissioni ng, Tel: 0771865420 7, Email: mubarak.dar bar@peterbo rough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

DECISION REQUIRED DECISION MAKER			DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
13.	University Delivery Vehicle – KEY/3SEP18/02 Approval and setting up of an appropriate delivery vehicle with University project partners to move council assets to enable the delivery of the university.	Councillor Lynne Ayres, Cabinet Member for Children's Services and Education, Skills and the University	September 2019	Growth, Environment and Resources Scrutiny Committee	Central	Relevant internal and external stakeholders	Peter Carpenter, Acting Corporate Director, Resources Tel: 0792016012 2 Email: Peter.carpent er@peterbor ough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).

KEY	KEY DECISION REQUIRED DECISION MAKER		DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
14.	Adoption of the "Dynamic Purchasing System" (DPS) procedure for Public Health contracts with Primary Care providers – KEY/10DEC18/01 To seek the approval to adopt the "Dynamic Purchasing System" (DPS) procedure for contracts with Primary Care providers for the duration of up to five years. The proposals have been approved by the Cambridgeshire and Peterborough Joint Commissioning Board.	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Adult Social Care, Health & Public Health	September 2019	Health Scrutiny Committee	All Wards	Relevant internal and external stakeholders.	Claire-Adele Mead Commissioni ng Team Manager- Primary care and Lifestyles Claire- Adele.Mead @cambridge shire.gov.uk 07884 250909 Val Thomas, Consultant in Public Health Val.Thomas @cambridge shire.gov.uk 01223 703264/ 07884 183374	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

		DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
<b>15</b> .	Authority to spot- purchase externally commissioned placement services for looked after children until the mobilization of the new Dynamic Purchasing System – KEY/24DEC18/06 Authority to spot-purchase externally commissioned placement services for looked after children, pending the launch of the Dynamic Purchasing System [DPS] for external	Councillor Ayres, Cabinet Member for Children's Services and Education, Skills and the University	September 2019	Children and Education Scrutiny Committee	All wards	Relevant internal and external stakeholders	Helene Carr, Head of Children's Social Care Commissioni ng - Peterboroug h & Cambridgesh ire, 07904 909039, helene.carr@ peterborough .gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published

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<b>16</b> . 140	Approval of funding for the provision of accommodation to reduce homelessness - KEY/07JAN19/02 Following Cabinet Decision JAN18/CAB/18 this is a new project to increase the supply of housing and address the demand for accommodation resulting from the increase in homelessness	Cabinet	23 September 2019	Growth, Environment And Resources Scrutiny Committee	All Wards	Relevant internal and external stakeholders. The issues associated with homelessness in Peterborough have been subject to significant discussion in various forums, including the Council's Adults and Communities Scrutiny, Cabinet and Full Council	Adrian Chapman, Service Director for Communities and Safety Tel 01733 863887 Email: adrian.chapman@ peterborough.gov. uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).

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17. 141	Clinical Waste Collections - KEY/18FEB19/01 Decision required to approve the new collection method for domestic sharps disposal.	Councillor Cereste, Cabinet Member for Waste, Street Scene and Environment	September 2019	Growth, Environment and Resources Scrutiny Committee	All wards	Relevant internal and external stakeholders.	Amy Nebel, Senior Waste and Recycling Officer amy.nebel@peterb orough.gov.uk 01733 864727	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
18.	Recommissioning of the Unpaid Carers Contract – KEY/01APR19/01 The procurement of the unpaid carers service in collaboration with Cambridgeshire County Council and Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) for the unpaid carers service across Cambridgeshire and Peterborough.	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Adult Social Care, Health & Public Health	November 2019	Adults and Communities Scrutiny Committee	All Wards	Relevant internal and external stakeholders.	Lee McManus, Commissioner, Cambridgeshire County Council & Peterborough City Council. Tel: 07785 721092. Email: lee.mcmanus@ca mbridgeshire.gov.u k	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 1, Information relating to any individual

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19.	Vehicle removal for Parking contravention – KEY/15APR19/02 To ask the Cabinet Member to approve the policy to implement a scheme to remove vehicles of persistent offenders in breach of parking restrictions in the City and to appoint the Local Authority Trading Company to act as the authorised agent of the policy.	Councillor Walsh, Cabinet Member for Communities	September 2019	Growth, Environment and Resources Scrutiny Committee	All Wards	Details of any consultation to be decided. Relevant internal and external stakeholders.	Adam Payton, PES Senior Officer, Parking Lead, 01733 452314 adam.payton@pet erborough.gov.uk	Prevention and Enforcement Service Vehicle Removal For Parking Contraventions Policy and Guidance
1422 <b>0</b> .	Award of contract for the refurbishment of the Town Hall North - KEY/29APR19/04 - Award of construction design and build contract with regard to the refurbishment of the Peterborough Town Hall North	Councillor Seaton, Cabinet Member for Finance	September 2019	Growth, Environment and Resources Scrutiny Committee	N/A	Relevant internal and external stakeholders.	Stuart Macdonald. Head of Property. Email: stuart.macdonald @peterborough.go v.uk Tel: 07715802489.	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<b>21</b> . 143	Approval for contract to be awarded to Skanska to deliver design of Eastern Industries Access Phase 1 scheme - KEY/10JUN19/01 Approval for contract to be awarded to Skanska to deliver design of Eastern Industries Access Phase 1 scheme. The council has received funding (£550k) from the Cambridgeshire and Peterborough Combined Authority to deliver the scheme.	Councillor Hiller, Cabinet Member for Strategic Planning and Commercial Strategy and Investments	September 2019	Growth, Environment and Resources Scrutiny Committee	East Ward	Relevant internal and external stakeholders. Consultation will take place with residents and key stakeholders at the relevant stage of the scheme.	Lewis Banks, Principal Sustainable Transport Planning Officer, 01733 317465, Iewis.banks@peter borough.gov.uk	Cambridgeshire and Peterborough Combined Authority meeting notes confirming grant funding allocation. Also CMDN for award of contract to Skanska for provision of Professional Services under Peterborough Highway Services partnership.

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<b>22</b> .	Approval for contract to be awarded to Skanska to deliver design of A1260 Nene Parkway Junction 15 Improvement scheme – KEY/10JUN19/02 Approval for contract to be awarded to Skanska to deliver design of A1260 Nene Parkway Junction 15 Improvement scheme. The council has received funding (£500k) from the Cambridgeshire and Peterborough Combined Authority to deliver the scheme.	Councillor Hiller, Cabinet Member for Strategic Planning and Commerci al Strategy and Investment s	September 2019	Growth, Environment and Resources Scrutiny Committee	West Ward	Relevant internal and external stakeholders Consultation will take place with residents and key stakeholders at the relevant stage of the scheme.	Lewis Banks, Principal Sustainable Transport Planning Officer, 01733 317465, Iewis.banks@peter borough.gov.uk	Cambridgeshire and Peterborough Combined Authority meeting notes confirming grant funding allocation. Also CMDN for award of contract to Skanska for provision of Professional Services under Peterborough Highway Services partnership.

KE	OECISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
<b>23</b> .	Disposal of Freehold Large Leisure Facility – KEY/24JUN19/01 – Delegate the Authority to the Corporate Director of Growth and Regeneration to sell the property.	Councillor Seaton, Cabinet Member for Finance	September 2019	Growth, Environment & Resources Scrutiny Committee	Fletton and Stanground	Relevant internal and external stakeholders.	Peter Carpenter, Acting Corporate Director, Resources Tel: 07920160122 Email: Peter.carpenter@p eterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).

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<b>24</b> .	Clare Lodge refurbishment (Phase 7) - KEY/24JUN19/02 Refurbishment of 16 bedrooms, 4 lounges and gymnasium	Councillor Lynne Ayres, Cabinet Member for Children's Services and Education, Skills and the University	September 2019	Children and Education Scrutiny Committee	Glinton & Castor	Relevant internal and external stakeholders. Grant submitted to and approved by Department for Education	Steve McFaden, Business Manager Clare Lodge, steve.mcfaden@p eterborough.gov.uk Tel no:01733 253246 Direct no. 01733 254009	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).

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<b>25</b> .	Recommissioning of Integrated Contraception and Sexual Health Services - KEY/24JUN19/03 Seeks approval to undertake a competitive procurement process to re commission sexual health services as one contract across Peterborough City Council and Cambridgeshire County Council.	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Adult Social Care, Health & Public Health	September 2019	Health Scrutiny Committee	All Wards	Relevant internal and external stakeholders. The procurement process will involve consultation current service users, partner organisations and other stakeholders and a general public online request.	Val Thomas, Consultant in Public Health Email: Val.Thomas@cam bridgeshire.gov.uk Tel: 01223 703264/ 07884 183374	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<b>26</b> . 148	Recommissioning Integrated Lifestyle Services - KEY/24JUN19/04 To undertake competitive procurement for the recommission of Integrated lifestyles services	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Adult Social Care, Health & Public Health	September 2019	Health Scrutiny Committee	All Wards	Relevant internal and external stakeholders. The procurement process will involve consultation current service users, partner organisations and other stakeholders and a general public online request	Val Thomas, Consultant in Public Health Email: Val.Thomas@cam bridgeshire.gov.uk Tel: 01223 703264/ 07884 183374	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<b>27</b> . 149	Sign-off on Pseudo Framework - KEY/22JUL19/02 - It is required for the Cabinet member to sign off tender documents prior to Invitation To Tender being published (ITT). The ITT is for Better Care Fund and Hancock-funded services for better integration of health and social care, winter pressures and Prevention services.	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Integrated Adult Social Care and Health and Public Health	November 2019	Adults and Communities Scrutiny Committee	All Wards	Relevant internal and external stakeholders. Equality Impact Assessment	Graeme Hodgson, Commissioner. Tel. 07448 379944 Email: graeme.hodgson@ cambridgeshire.go v.uk"	Service Specifications, Terms and Conditions of Pseudo Framework ITT.
28.	Approval of invest to save expenditure - KEY/22JUL19/03 - The decision required will enable the Council to purchase suitable homes within the local housing market for use as temporary accommodation for households at risk of homelessness. This proposal is predicated on an invest to save proposition based upon an attached business case.	Councillor Steve Allen, Cabinet Member for Housing, Culture and Recreation	September 2019	Adults and Communities Scrutiny Committee	All Wards	Relevant internal and external stakeholders and Ministry of Housing Communities and Local Government	David Anderson Interim Development Director Tel: 01733 452468 Email: Dave.Anderson@p eterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<b>29</b> .	To approve the Sexual and Reproductive Health Prevention retender – KEY/5AUG19/02 – Approval is sought for the recommission of the prevention of sexual ill health services as one contract across Peterborough and Cambridgeshire County Council which will include universal and targeted interventions for high need groups	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Integrated Adult Social Care and Health and Public Health	September 2019	Health Scrutiny Committee	All wards	Relevant internal and external stakeholders. Consultation will be made with current service users, high need groups and partner agencies	Charlene Elliott, Sexual Health Commissioner, 01733863603, charlene.elliott@pe terborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<b>30</b> . 151	Proceed with the purchase of a commercial property investment and associated professional costs - KEY/19AUG19/01 - Purchase of a commercial property investment	Councillor Peter Hiller, Cabinet Member for Strategic Planning and Commercial Strategy and Investments	September 19	Growth, Environment and Resources Scrutiny Committee	N\A	Relevant internal and external stakeholders. The investment is to be made with reference to Peterborough City Council's Investment Strategy and Asset Management Plan which were approved by Cabinet earlier in the year.	Tristram Hill, Strategic Asset Manager; Tel:07849 079787 Email: tristram.hill@peter borough.gov.uk	Investment acquisition business case. Investment strategy. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).

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<b>31</b> . 152	Award of 9 Large Tail lift school transport routes to Aragon Direct Services - KEY/19AUG19/02 - Replacement routes due to current operator terminating contract to transport pupils with complex needs to Phoenix, Heltwate and Marshfields School	Councillor Lynne Ayres, Cabinet Member for Children's Services and Education, Skills and University	September 2019	Children and Education Scrutiny Committee	All Wards	Relevant internal and external stakeholders. Parents of those currently receiving transport advised there will be a change of operator due to current operator terminating routes.	Bryony Wolstenholme - Team Manager, Passenger Transport Operations, Tel: 01733 317453, Email: bryony.wolstenhol me@peterborough .gov.uk	Other documentation to follow once final costs confirmed and decision made on external testing of market

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<b>32</b> .	Consultancy support to ensure delivery of the 2020/21 Medium Term Financial Strategy - KEY/19AUG19/03 - In order to deliver the 2020/21 budget within the required timescales specialist expertise is required to supplement work being undertaken by Council officers and add expertise in following areas: 1) Detailed data and benchmarking information to check that all services being provided are value for money, 2) complex contractual negotiations, 3) technical accountancy and commercial skills, 4) business case development	Councillor David Seaton, Cabinet Member for Finance	September 2019	Growth, Environment and Resources Scrutiny Committee	All Wards	Relevant internal and external stakeholders. Consultation will form part of the 2020/21 Medium Term Financial Plan process	Pete Carpenter, Acting Corporate Director Resources, Email: peter,carpenter@ peterborough.gov .uk Tel: 01733 452520	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<b>33</b> . 154	Decision to delegate responsibility of the commissioning of the National Child Measurement Programme (NCMP) from Peterborough City Council to Cambridgeshire County Council - KEY/2SEP19/01 Approval is being sought to a) award the contract for the delivery of the National Child Measurement Programme (NCMP) to the Integrated Lifestyle Service provider Everyone Health, the Public Health arm of Sports and Leisure Ltd. A decision is also being sought to delegate responsibility of the commissioning of this function from Peterborough City Council (PCC) to Cambridgeshire County Council (CCC), from September 1st 2019 until May 31st 2020.	Councillor Fitzgerald, Deputy Leader and Cabinet Member for Integrated Adult Social Care and Health and Public Health	September 2019	Health Scrutiny Committee	All wards.	Relevant internal and external stakeholders. Consultation has taken place with staff affected by TUPE. The PCC commissioned NCMP will then form part of the current re- commissioning of lifestyle services across Peterborough and Cambridgeshire as one service, which will commence in June 2020. The NCMP will be included in the wider consultation for this reprocurement.	Amy Hall, Childrens Public Health Commissioning Manager, amy.hall@peterb orough.gov.uk, 01733 863687	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<b>34</b> .	Contract for remedial works by PCC to the Stanground Bypass – KEY/2SEP19/02 To approve works to the Stanground bypass and authorise the associated package of work to be issued to Skanska Construction UK Limited under the Council's existing agreement with SKANSKA dated 18th September 2013 (the Highways Services Agreement).	Councillor Peter Hiller, Cabinet Member for Strategic Planning and Commercial Strategy and Investments	September 2019	Growth, Environment and Resources Scrutiny Committee	Stanground South and Hargate and Hempsted	Relevant internal and external stakeholders Standard consultation for highway schemes.	Charlotte Palmer, Group Manager – Transport and Environment, charlotte.palmer @peterborough.g ov.uk	To be determined.
35.	Uncollectable Debts in Excess of £10,000 – KEY/16SEPT19/01 To authorise the write-off of uncollectable debts shown as outstanding in respect of non- domestic rates, council tax, housing benefit overpayments and accounts receivable (sundry debt) accounts. All cases requested for write-off follow a lengthy process to recover the outstanding money, sometimes dating back many years. Only once all avenues have been exhausted will the council consider writing off debt.	Councillor Seaton, Cabinet Member for Finance	November 2019	Growth, Environment, & Resources Scrutiny Committee	All Wards	Relevant internal and external stakeholders.	Peter Carpenter, Acting Corporate Director Of Resources, Tel: 01733 452520, Email: peter.carpenter@ peterborough.gov .uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

	KEY DECISIONS TO BE TAKEN IN PRIVATE										
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Amendments to arrangements with Empower - KEY/29APR19/02 - A loan facility previously approved by Cabinet requires approval of an amendment to that arrangement.	Cabinet	23 September 2019	Growth, Environment and Resources Scrutiny Committee	All Wards	Relevant internal and external stakeholders. Detailed consultation was undertaken in the original decision to offer the loan facility.	Peter Carpenter, Acting Corporate Director, Resources Tel: 07920160122 Email: Peter.carpenter@p eterborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).				

## PART 3 – NOTIFICATION OF NON-KEY DECISIONS

NON-KEY DECISIONS									
DECISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION		
No new items.									

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	PREVIOUSLY ADVERTISED DECISIONS										
		DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION			
1.	A Lengthmans to be deployed on Lincoln Road Millfield - There will be a daily presence along Lincoln Road, the operative will litter pick, empty bins as well as report fly-tips and other environmental issues.	Councillor Cereste, Cabinet Member for Waste, Street Scene and Environment	September 2019	Growth, Environment & Resources Scrutiny Committee	Central Ward	Relevant internal and external stakeholders. Cross party task and finish group report which went to the Growth, Environment and Resources Scrutiny Committee and it was also approved at Full Council as part of the 2017-18 Budget.	James Collingridge, Head of Environmental Partnerships, Tel: 01733 864736 Email: james.collingridge @peterborough.go v.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.			
2.	2017/18 VCS grant funding - Award of grant to VCS organisations to provide Information, Advice and Guidance services	Councillor Seaton, Cabinet Member for Finance	September 2019	Adults and Communities Scrutiny Committee	All wards	Relevant internal and external stakeholders.	Ian Phillips, Senior Policy Manager Tel: 863849 Email: ian.phillips@peter borough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.			

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<b>3.</b> 159	Inclusion of Investment Acquisition Strategy in the Council's Medium Term Financial Strategy (MTFS) - To recommend to Council that the Investment Acquisition Strategy be included in the Medium Term Financial Strategy to enable the Council to acquire investment properties	Cabinet	23 September 2019	Growth, Environment and Resources	N/A	Relevant internal and external stakeholders	Peter Carpenter, Acting Corporate Director, Resources Tel: 07920160122 Email: Peter.carpenter@pete rborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
4.	Grant funding for voluntary organisations – To provide funding for voluntary organisations in Peterborough to carry out essential support for vulnerable people, particularly in relation to welfare benefits assistance and other crisis support.	Councillor Seaton, Cabinet Member for Finance	September 2019	Adults and Communities Scrutiny Committee	N/A	Relevant internal and external stakeholders.	Ian Phillips Senior Policy Manager Tel: 01733 863849 Email: Ian.Phillips@peterbor ough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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5.	Approval of Additional Powers to the Combined Authority (Transfer of Powers) - Approve additional powers for the Combined Authority via a Statutory Instrument for Adult Skills Commissioning.	Councillor Holdich, Leader of the Council and Deputy Mayor of the Cambridgeshi re and Peterborough Combined Authority	September 2019	Growth, Environment and Resources Scrutiny Committee	All	All Councils in Peterborough and Cambridgeshire have to agree to the transfer	Peter Carpenter, Acting Corporate Director, Resources Tel: 07920160122 Email: Peter.carpenter@pete rborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. Combined Authority Statutory Instrument Request

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<b>6.</b> 161	To agree the process of awarding community grants through the Integrated Communities Programme – Following the successful bid to Government, funding has been awarded to the council via the Integrated Communities Strategy. One of the funded projects will see a communities grant programme launched that will provide opportunities for communities to apply for up to £20k to deliver projects in their neighbourhood. The Cabinet Member is requested to approve the process in which the grants programme will be run.	Councillor Seaton, Cabinet Member for Finance	September 2019	Adults and Communities Scrutiny Committee	N/A	Relevant internal and external stakeholders.	Ian Phillips Senior Policy Manager – Tel: 01733 863849 Email: ian.phillips@pet erborough.gov.u k	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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7. 162	Disposal of former Barnack Primary School caretaker house - Delegate authority to the Corporate Director of Growth and Regeneration to dispose of the property.	Councillor Seaton, Cabinet Member for Finance	September 2019	Growth, Environment & Resources Scrutiny Committee	N\A	Relevant internal and external stakeholders.	Stuart Macdonald, Property Manager. Tel: 07715 802 489. Email: stuart.macdonald @peterborough.go v.uk Bill Tilah (Bill.Tilah@nps.co. uk)	It is not anticipated that there will be any documents other than the report and relevant appendices to be published. The decision will include an exempt annexe. By virtue of paragraph 3, information relating to the financial or business affairs of any particular person (including the authority holding that information).

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<b>8.</b> 163	Approval to dispose of a property on Cromwell Road at a minimum of £375,000 and a maximum of £475,000 - This property was most recently used by Youth Services but has now become surplus to requirements. It has been marked for disposal by the council in order to generate a capital receipt.	Councillor Seaton, Cabinet Member for Finance	September 2019	Growth, Environment and Resources Scrutiny Committee	Central Ward	Relevant internal and external stakeholders. Authority has been provided by the acting head of resources to dispose of this property. A Cabinet Member Decision Notice will need to be produced once heads of terms have been agreed with a purchaser.	Tristram Hill, Strategic Asset Manager, Tel: 07849 079787 Email: tristram.hill@nps.c o.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
9.	Funding for voluntary sector 2019/20 - To provide funding to a number of voluntary sector organisations to provide essential support to vulnerable clients	Councillor Seaton, Cabinet Member for Finance	September 2019	Adults and Communities Scrutiny Committee	N/A	Relevant internal and external stakeholders.	Ian Phillips Senior Policy Manager Tel: 01733 863849 Email: ian.phillips@peter borough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

DEC	SISION REQUIRED	DECISION MAKER	DATE DECISION EXPECTED	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
10.	Asset Transfer of Gladstone Park Community Centre - The proposed long term lease of Gladstone Park Community Centre to The Thomas Deacon Academy Trust	Councillor Seaton, Cabinet Member for Finance	September 2019	Growth, Environment and Resources Scrutiny Committee	North	Relevant internal and external stakeholders. Ward Councillors for Central, Park and North have been advised of the decision to transfer of the Community Centre	Caroline Rowan, Urban Regeneration Project Manager, Tel: 01733 864095 Email:caroline.row an@peterborough. gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
154	To purchase the offices at 16-20 Lincoln Road, Peterborough PE1 2RL at a cost set out in the annex – The above property is being purchased for its strategic position in the city centre (which is important for future redevelopment) and will in the short term provide rental income to PCC.	Cabinet Seaton, Cabinet Member for Finance	September 2019	Growth, Environment and Resources Scrutiny Committee	Central	Relevant internal and external stakeholders. NPS are acting for PCC in the acquisition of this commercial property. All the relevant internal stakeholders for example in democratic services, legal, finance and property will be consulted in this process.	Tristram Hill, Strategic Asset Manager, NPS, Email: tristram.hill@peter borough.gov.uk Tel: 07849 079787	Heads of terms for the purchase of 16-20 Lincoln Road, Peterborough. Details of the purchase, the price and associated costs should not be made public whilst commercial negotiations and associated legal work are progressing.

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12.	Food and Feed Service Plan 2019/20 - Decision required to approve Food and Feed Service Plan 2019/20 in line with Government guidance	Councillor Walsh, Cabinet Member for Communities	September 2019	Growth, Environment and Resources Scrutiny Committee	N/A	Relevant internal and external stakeholders.	Stuart Brough, Business Compliance Manager, Tel: 07989 432151 Email: stuart.brough@pet erborough.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
1 <del>85</del> .	Approval of the Corporate Energy Strategy – The Corporate Energy Strategy has been jointly drafted with Cambridgeshire County Council and approved at Joint SMT.	Councillor Cereste, Cabinet Member for Waste, Street Scene and Environment	September 2019	Growth, Environment and Resources Scrutiny Committee	N/A	Relevant internal and external stakeholders Predominantly internal consultation. As a Strategy, it is intended to show a direction and not specific projects at this stage, which would impact and require wider consultation.	Elliot Smith, Commercial Manager; Smart 7Energy, Infrastructure and Regeneration, elliot.smith@peter borough.gov.uk	The Corporate Energy Strategy.

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14.	Approval of the Proposed Submission version of the Cambridgeshire and Peterborough Minerals and Waste Local Plan for public consultation and subsequent submission to the Secretary of State for independent examination - For Cabinet to recommend to Full Council for approval of the Proposed Submission version of the Cambridgeshire and Peterborough Minerals and Waste Local Plan for public consultation and subsequent submission to the Secretary of State for the purposes of independent examination	Cabinet	Cabinet on 23rd September and then Full Council on 16th October	Growth, Environment and Resources Scrutiny Committee	All	Relevant internal and external stakeholders Planning Committee on 3rd September; Scrutiny briefing note to be submitted to the committee on 4th September.	Richard Kay, Head of Sustainable Growth Strategy, Tel: 863795 Email: richard.kay@peter borough.gov.uk and Chris Stanek, Senior Strategic Planning Officer, Tel 863883 Email: chris.stanek@pete rborough.gov.uk	Cambridgeshire and Peterborough Minerals and Waste Local Plan It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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<b>15</b> .	To seek approval to implement a refreshed Prevent Strategy, bringing together the PCC and CCC processes - To provide cabinet with an explanation of the proposed shared Prevent Strategy, and seek approval to implement	Cabinet	Sept 2019	Adults and Communities Scrutiny Committee	All Wards	Relevant internal and external stakeholders	Rob Hill – Assistant Director Public Protection Tel: 01733 864715 Email: rob.hill@peterboro ugh.gov.uk	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.
16.	Amendment to Environmental Enforcement Contact - Amendment is required to the current environmental enforcement contract	Councillor Irene Walsh, Cabinet Member for Communities	September 2019	Adults and Communities Scrutiny Committee	N/A	Relevant internal and external stakeholders	Clair George Acting Head of Service - Prevention and Enforcement Service Tel: 01733 453576 Email: clair.georgepes@p eterborough.gov.u k	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

## PART 4 – NOTIFICATION OF KEY DECISIONS TAKEN UNDER URGENCY PROCEDURES

DECISION TAKEN:	DECISION MAKER	DATE DECISION TAKEN	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
<ul> <li>The Future of the Northminster (Market) Multi-Storey Car Park (MSCP) - AUG19/CMDN/29</li> <li>The Cabinet Member, in consultation with the Leader of this Council: <ol> <li>Authorised the council to demolish the Northminster multi- storey car park at the earliest opportunity.</li> </ol> </li> <li>Authorised the council to make the budget available to cover the anticipated costs of demolition and the costs associated with making safe and vacating of between £1m and £2.75m (capital and revenue).</li> <li>Authorised the Director for Legal and Governance, or delegated officers, to enter into any other legal documentation on behalf of the council in relation to this matter.</li> </ul>	Councillor Peter Hiller, Cabinet Member for Strategic Planning and Commercial Strategy and Investments	21 August 2019	Growth, Environment and Resources Scrutiny Committee	Central	Relevant internal and external stakeholders. The Council has engaged shop tenants, market traders and internal stakeholders over the options open to the Council.	Stuart Macdonald. Head of Property. Tel: 07715 802 489. Email: stuart.macdon ald@peterboro ugh.gov.uk	Rolton Engineer Group Report. SKANSKA Engineer Report It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

DECISION TAKEN:	DECISION MAKER	DATE DECISION TAKEN	RELEVANT SCRUTINY COMMITTEE	WARD	CONSULTATION	CONTACT DETAILS / REPORT AUTHORS	DOCUMENTS RELEVANT TO THE DECISION SUBMITTED TO THE DECISION MAKER INCLUDING EXEMPT APPENDICES AND REASONS FOR EXEMPTION
Award the new contract for Multi Functional Devices as well as Print equipment across variety of Council's sites – AUG19/CMDN/31 With the approval of the Chairman of Growth, Environment, and Resources Committee, the special urgency procedure has been invoked to suspend the requirement to publish the decision for five days. This procedure has been invoked to ensure that the project can be implemented within very challenging timescales. The new contract commencement is 1st of November which leaves only 2 months (September and October) to finalize the size of the fleet, arrange felevant IT resources and infrastructure, implement, manage change across the organisation and assure smooth exit/entry of the contract with the incumbent supplier. The decision to progress with this project was delayed due to the detailed negotiations with the supplier on: contract flexibility, other value added services provided to the Council free of charge. Furthermore the incumbent supplier (Konica Minolta East Solutions Ltd) provided the quote for the available 1 year extension which had to be explored and considered. This option was discarded due to the fact that reduced quarterly charge was offered based on 60% fleet reduction rather than lease charge reduction. The Cabinet Member awarded a contract to Specialist Computer Centre Ltd for the Managed Print Services Provision (Multi - Functional Devices (MFD's) for a period of up to five years for a sum of £86,912 per annum for machines lease and approx £72,000 per annum for usage (based on the 2018/2019 volumes and click charge of: £0.0022 mono and £0.022 colour).	Councillor Mohammed Farooq, Cabinet Member for Digital Services and Transformati on	28 August 2019	Growth, Environmen t and Resources Scrutiny Committee	N/A	Consultation was undertaken with Director of Resources, Director of Customer and Digital, Heads of Service and other members of staff. The communication was issued on Insite as well as Change Champion Network was used to approach various service areas	Ewa Klimek Senior Category Manager, ewa.klimek@p eterborough.g ov.uk Report completed on behalf of Colin Arnold- ICT Manager.	It is not anticipated that there will be any documents other than the report and relevant appendices to be published.

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## Draft Adults and Communities Scrutiny Committee Work Programme 2019/2020

Updated: 2 September 2019

Meeting Date	Item	Indicative Timings	Comments
<b>1 JULY 2019</b> Draft Report 6 June Final Report 19 June	Co-opted Member Report To agree to the appointment of co-opted members to the committee for the municipal year 2019/2020 Contact Officer: Paulina Ford, Senior Democratic Services Officer		
	<ul> <li>Community Involvement in Neighbourhood Issues</li> <li>To invite Members to consider and approve the recommendations of the Task and Finish group which has reviewed Community Involvement in Neighbourhood Issues during 2017 - 2018, in the context of significant programmes of work which have emerged since June 2017. The report provides an opportunity for the Committee to be updated on progress against these wider programmes of work, and agree to specific recommendations arising from them.</li> <li>Contact Officer: Sarah Ferguson, Cate Harding</li> </ul>		
	Review of Homelessness Reduction Strategy 2018-2020 and Safer Off the Streets To provide the committee with an update of progress in delivering the City Council's Homelessness Reduction Strategy 2018 - 2020 and to seek comments and agreements from members to the proposed process for		

review of the review of the strategy and development of a new strategy for 2020 - 2025. Contact Officer: Sarah Ferguson, Sean Evans	
<b>Prevent Strategy Refresh – 2019/2021</b> To outline to the Adults and Communities Scrutiny Committee the newly combined Cambridgeshire and Peterborough Prevent Strategy.	
Contact Officer: Rob Hill	
Review Of 2018/2019 And Work Programme For 2019/2020	
To review the work undertaken during 2018/19 and to consider the work programme of the Committee for 2019/2020	
Contact Officer: Paulina Ford, Senior Democratic Services Officer	
Forward Plan of Executive Decisions That the Committee identifies any relevant items for inclusion within their work programme which are relevant to the remit of this Committee.	
Contact Officer: Paulina Ford, Senior Democratic Services Officer	

<b>10 SEPTEMBER 2019</b> Draft Report 15 August Final Report 29 August	<ul> <li>Cambridgeshire and Peterborough Foundation Trust (CPFT) Section 75 - Annual Report</li> <li>To receive an update on service and financial performance, activity and outcomes under the Mental Health (MH)</li> <li>Section 75 Partnership Agreement 2018-19 and endorse the revised Mental Health Section 75 Partnership Agreement.</li> <li>Contact Officer: Fiona Adley</li> </ul>	
	<ul> <li>Community Asset Transfer Interim Report         To scrutinise the progress made to date regarding the         properties in scope for community asset transfers, ensure         that there are sufficient arrangements in place to support         community groups, and comment on the final next steps         required to enable the programme to be successfully         concluded.     </li> <li>Contact Officer: Cate Harding</li> </ul>	
	<ul> <li>Youth Justice Plan and Inspection Report         To scrutinise the objectives and priorities set out within the         Joint Cambridgeshire and Peterborough Youth Justice Plan         2019-22 and endorse it for approval by Cabinet and Full         Council.     </li> <li>Contact Officer: Sarah Ferguson</li> </ul>	
	<b>Monitoring Scrutiny Recommendations</b> To monitor progress made on recommendations made at the previous meeting.	

	Contact Officer: Paulina Ford, Senior Democratic Services Officer	
	<b>Forward Plan of Executive Decisions</b> That the Committee identifies any relevant items for inclusion within their work programme which are relevant to the remit of this Committee.	
	Contact Officer: Paulina Ford, Senior Democratic Services Officer	
	Work Programme 2019/2020 To consider the Work Programme for 2019/2020	
	Contact Officer: Paulina Ford, Senior Democratic Services Officer	
<b>12 NOVEMBER 2019</b> Draft Report 18 October Final Report 31 October	Adults and Communities Scrutiny Committee Meeting Start Time 2020-2021	
	Contact Officer: David Beauchamp	
	Draft Safer Peterborough Partnership Plan incorporating report on Safer Peterborough Partnership Focus areas inc. 'high harm' and knife crime.	
	To be deferred. Briefing note to follow.	
	Contact Officer: Rob Hill	

Domestic Abuse and Sexual Violence- Service Review -	
Contact Officer: Rob Hill	
Integrated Communities Strategy	
Contact Officer: Sarah Ferguson	
Adult Social Care Carer's Survey / Adults Social Care Annual Complaints Report 2018-19	
Contact Officer: Tina Hornsby / Debbie McQuade	
Pending: Cambridgeshire and Peterborough Safeguarding Adult Board Annual Report 2018-19	
Contact Officer: Jo Proctor / Russell Wate	
Monitoring Scrutiny Recommendations	
To monitor progress made on recommendations made at the previous meeting.	
Contact Officer: Paulina Ford, Senior Democratic Services Officer	
Forward Plan of Executive Decisions	
That the Committee identifies any relevant items for inclusion within their work programme which are relevant to the remit of this Committee.	
Contact Officer: Paulina Ford, Senior Democratic Services Officer	

	Work Programme 2019/2020         To consider the Work Programme for 2019/2020         Contact Officer: Paulina Ford, Senior Democratic         Services Officer	
<b>14 JANUARY 2020</b> Draft Report 12 December Final Report 2 January	Homelessness Reduction and Rough Sleepers Strategy 2020 - 2025 - Final Draft Contact Officer: Sarah Ferguson	
	Adults Social Care – Annual Service User Feedback Contact Officer: Tina Hornsby	
	Portfolio Progress Report for the Cabinet Member for Adult Social Care, Health and Public Health incorporating the Annual Report for the Service Director for Adults and Safeguarding. Contact Officer: Debbie McQuade and Oliver Hayward	
	Review of selective licensing scheme incorporating review of HMOs Contact Officer: Rob Hill	TBC
	Monitoring Scrutiny Recommendations To monitor progress made on recommendations made at the previous meeting.	

	Contact Officer: Paulina Ford, Senior Democratic Services Officer	
	Forward Plan of Executive Decisions That the Committee identifies any relevant items for inclusion within their work programme which are relevant to the remit of this Committee. Contact Officer: Paulina Ford, Senior Democratic	
	Services Officer         Work Programme 2019/2020         To consider the Work Programme for 2019/2020	
	Contact Officer: Paulina Ford, Senior Democratic Services Officer	
<b>3 MARCH 2020</b> Draft Report 7 February Final Report 20 February	Safer Peterborough Partnership Plan	
rinal Report 20 February	Contact Officer: Rob Hill	
	Portfolio Progress Report for the Cabinet Member for Communities	
	Contact Officer: Adrian Chapman	
	Portfolio Progress Report for the Cabinet Member for Housing, Culture and Recreation	
	Contact Officer: Adrian Chapman	

Monitoring Scrutiny RecommendationsTo monitor progress made on recommendations made at the previous meeting.Contact Officer: Paulina Ford, Senior Democratic Services Officer	
Forward Plan of Executive Decisions That the Committee identifies any relevant items for inclusion within their work programme which are relevant to the remit of this Committee. Contact Officer: Paulina Ford, Senior Democratic Services Officer	