



## **Overview and Scrutiny Committee (SBDC)**

**Monday, 19 March 2018 at 6.00 pm**

**Room 6, Capswood, Oxford Road, Denham**

### **A G E N D A**

#### Item

1. Evacuation Procedure
2. Apologies for Absence  
To receive any apologies for absence.
3. Minutes (*Pages 5 - 12*)  
To approve the minutes of the meeting held on 30 January 2018.
4. Declarations of Interest  
To receive any declarations of interest
5. Presentation by the South Central Ambulance Service NHS Foundation Trust  
To receive a presentation from Andy Battye (Head of Operations) and Mark Ainsworth (Director of Operations).
6. Presentation by NHS Aylesbury Vale and Chiltern Clinical Commissioning Group  
To receive a presentation by Robert Majilton, Deputy Accountable Officer

7. Performance Indicator Review 2018-19 (*Pages 13 - 16*)  
*Appendix A: Priority PI's 2018-19 (Pages 17 - 20)*  
*Appendix B: Corporate PI's 2018-19 (Pages 21 - 26)*  
*Appendix C: Data Only PI's 2018-19 (Pages 27 - 28)*
8. Performance Report Quarter 3 2017-18 (*Pages 29 - 32*)  
*Appendix A: Priority PI's Q3 2017-2018 (Pages 33 - 36)*  
*Appendix B: Corporate PI's Q3 2017-18 (Pages 37 - 42)*  
*Appendix C: Additional Homelessness Performance Indicators (Task and Finish Group recommendations) (Pages 43 - 44)*
9. Bucks Health and Adult Social Care Select Committee  
  
To receive:  
  
*Minutes of the 30 January 2018 (draft) (Pages 45 - 54)*
10. Bucks Children's Social Care and Learning Select Committee  
  
*Minutes of the 2 February 2018 (draft) (Pages 55 - 64)*  
  
*Minutes of the 6 February 2018 (draft) (Pages 65 - 70)*
11. Members Questions and Answers  
  
An opportunity for Members to raise questions about items:
  - during the meeting
  - written questions submitted previously
  - raised by information items
12. Work Programme (*Pages 71 - 72*)  
  
To note the work programme timetable.

**Note:** All reports will be updated orally at the meeting if appropriate and may be supplemented by additional reports at the Chairman's discretion.

**Membership: Overview and Scrutiny Committee (SBDC)**

Councillors: M Bradford (Chairman)  
P Bastiman (Vice-Chairman)  
M Bezzant  
D Dhillon  
T Egleton  
P Hogan  
M Lewis  
D Saunders

**Date of next meeting – Wednesday, 16 May 2018**

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**OVERVIEW AND SCRUTINY COMMITTEE (SBDC)****Meeting - 30 January 2018**

Present: M Bradford (Chairman)  
P Bastiman, M Bezzant, D Dhillon, P Hogan, M Lewis and  
D Saunders

Apologies for absence: T Egleton

**25. MINUTES**

The minutes of the meeting held on 16 October 2017 were confirmed and signed by the Chairman.

**26. DECLARATIONS OF INTEREST (IF ANY)**

There were no declarations of interest

**27. REVIEW OF HOMELESSNESS MANAGEMENT UPDATE**

The Committee received a report which updated Members on the progress in implementing the Homelessness Management Task and Finish Group recommendations and informed Members of the revised Homelessness Case Management process and proposed additional Performance Indicators.

At its meeting on 16th October 2017, the Overview and Scrutiny Committee received a presentation by Councillor Philip Bastiman, Chairman of the Review of Homelessness Management Task and Finish Group, which set out the recommendations of the Task and Finish Group following the review of Homelessness Management. The final recommendations of the Task and Finish Group were subsequently submitted to Cabinet and Cabinet provided a formal written response. This report updated the Overview and Scrutiny Committee on the progress in responding to the recommendations of the Task and Finish Group.

The Committee received the following appendices to the report and were given the opportunity to comment on them:

- **Appendix 1** - the Action Plan which updates the progress to date on each of the recommendations.
- **Appendix 2** - the overall revised Homelessness process map which was reported to Task and Finish Group and covers case management, temporary accommodation and charging.
- **Appendix 3** - the draft revised and updated procedure for managing homelessness applications (which is covered in the "Housing" column of the overall Process Map). This procedure specifically covers the process operated by SBDC for receiving, managing and determining requests for assistance under Part 7 (Homelessness) of the Housing Act 1996.
- **Appendix 4** - the additional Performance Indicators that were due to be introduced to support the monitoring of the homelessness management service in response to

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the recommendations of the Task and Finish Group. These would be incorporated onto Covalent in addition to the existing homelessness Pls.

**RESOLVED** that the following be noted:

- the Action Plan update
- the draft revised Homelessness Case Management Process; and
- the adoption of the proposed additional performance indicators.

*Note: Councillor Saunders entered the meeting at 6.04pm*

## 28. **REVENUE BUDGET & COUNCIL TAX 2018/19**

The Cabinet on 7 February 2018 would be receiving a report on the Council's Budget Proposals and Council Tax for 2018/2019 and, in accordance with the Council's Constitution, the Committee was invited to comment on the proposals.

The Committee were advised that since the Cabinet considered the Budget in December, the Government had announced the grant funding decisions affecting the Council. In December, the Cabinet agreed for further work to be done to eliminate the proposed use of general reserves in the draft budget.

The Committee's attention was drawn to the following key points:

- The New Homes Grant allocation was £207k less than anticipated.
- The Budget reflects the impact of the proposed local pay award for 2018/19, £54k.
- Funding is provided for the creation of a new Economic Development Team, the cost to be shared between CDC and SBDC, with the SBDC element being £42k, to be funded from reserves.
- Additional savings or additional income, have been identified totalling £294k.
- The main financial risks for 2018/19 are:
  - Shortfall on income targets.
  - The cost of major planning inquiries, enforcement actions or responding to national infrastructure proposals that impact on the area.
  - The costs of temporary accommodation, and supporting solutions to the temporary accommodation issue.
  - Letting income for the Capswood offices
- The Medium Term Financial Strategy (MTFS) shows a funding gap of between £400k and £960k per annum over the period to 2023. Given the financial gap indicated in the MTFS it would be important to start the review of the MTFS as soon as possible and to focus on the savings plans within the Strategy and their robustness and whether they could be added to. It was being proposed that a Task & Finish Group be set up to consider the Medium Term Financial Strategy and savings options.

Members asked a number of questions and sought clarification and explanation of certain issues surrounding the revenue budget and use of reserves. This included clarification on the creation of a new Economic Development Team, the national increase in planning fees and the referendum threshold with regards to Council Tax increases. Members were supportive in undertaking the proposed work to look at the Medium Term Financial Strategy.

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It was noted that if Cabinet agrees the proposed new car parking charges at its meeting on 7<sup>th</sup> February 2018, the fees and charges schedule set out in appendix C would need to be updated before being presented to Full Council.

Following the discussion, the Committee **RESOLVED** that

- 1) the Cabinet be informed it had no comments to make on the 2018/19 budget proposals; and
- 2) a Task & Finish Group be set up to consider the Medium Term Financial Strategy and savings options.

*Note: Councillor Bastiman and Councillor Bezzant entered the meeting at 6.10pm*

## 29. **CAPITAL PROGRAMME 2018/19 TO 2022/23**

The Committee received a report on the Capital Strategy and the proposed Capital Programme for 2018/19 – 2022/23. The Committee were asked to comment on the strategy and proposed programme before it was presented to Cabinet on 7 February 2018 for onward submission to Council on 27 February 2018.

As part of the Council's budget process the Capital Programme is reviewed in order to assess, as part of the overall financial strategy of the Authority, what the scale and composition of the programme should be and the consequential funding implications for the financial strategy. In recent years decisions have been undertaken to embark on a number of significant capital projects. These projects have changed the scale and composition of the capital programme, creating the need to finance these projects from borrowing.

**RESOLVED** that the report be noted and that the Cabinet be informed that the Committee had no comments to make.

## 30. **FRIMLEY HEALTH NHS FOUNDATION TRUST**

Sir Andrew Morris, Chief Executive, Frimley Health NHS Foundation Trust, attended for this item to provide an update on the work of the Trust.

The update included the following areas:

- Performance from April 2017 to December 2017
- Frimley Health Wexham Park – Objectives
- The redevelopment of Maternity at Wexham Park
- Investment in a new Emergency Department at Wexham Park
- Investment in the High Dependency Unit at Wexham Park
- The vision for Heatherwood Hospital by 2020.

Following the presentation, a number of issues were discussed including the following:

- Car parking at Wexham Park Hospital.
- The issue of staffing and the importance of apprenticeships.
- Treating patients with mental health issues, in particular elderly patients with dementia.
- How residents were being kept informed of all the improvements being carried out by the Trust.

In order to help make South Bucks residents aware of all the developments taking place at Wexham Park Hospital, the Committee agreed that information on the work being carried

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out should be put on the Council's website, and the Council's Communications Manager be asked to liaise with the Trust's communications team to see how we can assist with getting information out in the South Bucks area.

The Committee thanked Sir Andrew for his interesting presentation and asked that the Committee continue to receive, on an annual basis, updates on the work of the Trust.

*Note: Councillor Dhillon left the meeting at 7.10pm*

*Note: Councillor Bezzant left the meeting at 7.35pm*

**31. TREASURY MANAGEMENT STRATEGY 2018/19**

The Committee received a report on the proposed Treasury Management Strategy 2018/19 and related documents and were asked to comment on the strategy and related documents before they were presented to Cabinet on 7 February 2018 for onward submission to Council on 27 February 2018.

The Council was required to formally review its treasury management policies each year as part of determining what level of returns will be achieved from investments. The format of the treasury management policies was defined by the Code of Practice adopted by the Council, and was required to be approved by the Council on recommendation from the Cabinet.

The treasury management policies underpin the strategy for the year in question, which seek to achieve a level of investment return and efficiently manage any borrowing. The Committee were advised that external borrowing which was planned in 2017/18 to facilitate a major capital project would not be required. However, in order to facilitate the planned capital programme in 2018/19 it would be necessary to borrow funds, and this would be in accordance with the Capital Strategy. The Council has been debt free for many years so this would represent a substantial change in approach.

**RESOLVED** that the report be noted and that Cabinet be informed that the Committee had no comments to make.

**32. SERVICE PLAN SUMMARIES 2018-19**

The Committee received a report which provided a summary of the service plans produced by service areas within the Council.

The service plans, which were jointly produced per service area for both Chiltern and South Bucks, provided a summary of achievements from the current year and an overview of what each service aims to deliver for 2018-19. As well as looking at aims and achievements, services were asked to look at a range of areas including:

- Shared Services Programme
- Know your customer and equalities
- Performance indicators and risks
- Costs and cost comparison information.



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The Committee were advised that this year in order to ensure that the Service Planning process had been more robust than in previous years, the internal consultation process had been extended to include all managers within service areas, plus other staff as appropriate, prior to sign-off from Heads of Service. This process would continue to be refined in coming years.

Following a question, the Committee were advised that the service plans set the content which goes into the performance and appraisal system for staff.

The Committee agreed that service plans for next year should contain key actions on what has changed only and that all the appendices were not required. It was noted that a one page dashboard per service area would be sufficient.

**RESOLVED** that the report be noted.

**33. PERFORMANCE REPORT QUARTER 2 2017-18**

Members of the Overview and Scrutiny Committee received a report outlining performance of council services against indicators and service objectives during Quarter 2 of 2017-18.

Members noted from the report that of the total 48 PIs, 2 were seen to be off target (of these was a priority PI) with further details of these within the two detailed performance tables accompanying the report:

- Appendix A – Priority indicators Q2 2017-18
- Appendix B – Quarterly corporate performance indicators Q2 2017-18

With regards to long term sickness absence being over target, the Committee were advised that the long term sickness absence figure should improve going forward as some of the employees who were off on long term sick have now left the Council.

**RESOLVED** that the report be noted.

**34. CDC AND SBDC WEBSITES - HOW INFORMATION IS STRUCTURED AND MANAGED**

The Committee received a report which provided an overview of how information was structured and managed on the CDC / SBDC websites.

The Committee were advised that the recent changes made to the website had not changed the structure, but had changed the appearance of pages. A lesson learned had been to carefully consider how to make users of the website aware of any forthcoming changes to appearance and structure. There were a number of key services where the website takes users into external portals over which the Council has differing levels of influence over how they are displayed and structured.

The Committee were pleased to note that there were now more tools available to the Council to monitor use of the website in order to inform future change.

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The Committee noted that the Customer Experience Programme would have a significant impact on the website in terms of how it would be structured and managed, and that was why there were discrete workstreams in the Programme dealing with the website.

**RESOLVED** that the report be noted.

**35. BUCKS HEALTH AND ADULT SOCIAL CARE SELECT COMMITTEE**

Members received the Minutes of the meetings of the Buckinghamshire County Council Health and Adult Social Care Select Committee held on 19 September and 28 November 2017.

It was **RESOLVED** that the Minutes of the Buckinghamshire County Council Health and Adult Social Care Select Committee be noted.

**36. BUCKS CHILDREN'S SOCIAL CARE AND LEARNING SELECT COMMITTEE**

Members received the Minutes of the meeting of the Buckinghamshire County Council Children's Social Care and Learning Select Committee held on 17 October and 5 December 2017.

It was **RESOLVED** that the Minutes of the Buckinghamshire County Council Children's Social Care and Learning Select Committee be noted.

**37. MEMBERS QUESTIONS AND ANSWERS**

There were no questions.

**38. WORK PROGRAMME**

The Committee considered the Overview and Scrutiny Work Programme.

It had been agreed that Sir Andrew Morris was to be invited to provide a further update to the Committee on the work of Frimley Health NHS Foundation Trust in a year's time.

**RESOLVED** that the work programme, with the addition of the invitation to Sir Andrew Morris in a year's time, be noted.

**39. ANY OTHER BUSINESS**

None.

**40. EXCLUSION OF PUBLIC**

That under Section 100(A)(4) of the Local Government Act 1972 the public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Part 1 of Schedule 12A to the Act.

41. **REVENUE BUDGET & COUNCIL TAX 2018/19 - APPENDIX D FARNHAM PARK TRUST BUDGETS 2018/19 FEES AND CHARGES**

This was considered under item 6 of the agenda.

42. **HOMELESSNESS DEBTS**

The Committee received a report on the current homelessness debt position following the recommendation of the Overview and Scrutiny Homelessness Management Task and Finish Group that a report showing the current debt position be circulated to the Resources PAG and Overview and Scrutiny Committee.

The report set out the statutory background, the Council's current debt position, including a breakdown of all the current outstanding debts and the options going forward.

The Committee noted that Appendix A showed that there were a number of debts that were unlikely to be recovered and that all of these except one, fell below the level that requires Members Authority for write off. These debts were still being chased, however if no progress on recovering was made by the end of March the debts would be written off. The Overview and Scrutiny Homelessness Management Task and Finish Group had recommended that historic debt with a zero or very low probability of recovery (before the flat rate charge) be written off to start afresh with the new process.

**RESOLVED** that the report and the debts that are likely to be written off in the current financial year be noted.

The meeting terminated at 7.47 pm

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<b>REPORT SUBJECT</b>	<i>Performance Indicator Review 2018-19</i>
<b>REPORT OF</b>	<i>Councillor Nick Naylor (SBDC)</i>
<b>RESPONSIBLE OFFICER</b>	<i>Bob Smith, Chief Executive</i>
<b>REPORT AUTHOR</b>	<i>Ani Sultan (01494 586 800)</i>
<b>WARD/S AFFECTED</b>	<i>Report applies to whole district</i>

### 1. Purpose of Report

To provide an update on the outcomes of the Performance Indicator (PI) review for 2018/2019 and to seek approval for the proposed changes to reporting.

#### **RECOMMENDATION**

Cabinet is asked to approve the changes to the Performance Indicators for each service.

### 2. Executive Summary

Overview of performance indicators (PIs) for 2018/19:

Service	Total PIs	Priority PIs	Corporate PIs	Data Only PIs
<b>Leaders</b>	4	3	0	2
<b>Resources</b>	12	4	8	0
<b>Healthy communities</b>	13	3	8	2
<b>Planning and Economic Development</b>	18	3	15	4
<b>Environment</b>	4	1	3	0
<b>Total PIs</b>	<b>56</b>	<b>14</b>	<b>34</b>	<b>8</b>

### 3. Reasons for Recommendations

- 3.1 Reviewing Performance Indicators allows each service to adjust targets, add in more relevant indicators and remove those indicators that do not provide valuable information.
- 3.2 This year, the internal consultation process has been extended to include all managers within service areas, plus other staff as appropriate, prior to sign-off from Heads of Service. This is in order to make sure that the Performance Indicators adopted include the measuring of all aspects of each service to provide only meaningful information to Management Team, Members and Officers. This also ensures that the process has been more robust than in previous years.
- 3.3 To reflect joint services, indicators are to be jointly reported where practical. Where this is not possible care has been taken to align indicators so that the data sets gathered within each Council are similar.
- 3.4 Performance Indicators are part of the Service Planning process, and serve as an important part of the Council's performance management framework as detailed in the Joint Business Plan 2016 – 2020 and link to the Councils' policy objectives.

3.5 The following appendices are attached to this report.

- **Appendix A:** SBDC Priority PIs 2018-19
  - Provides proposals for reporting priority indicators during 2018/19 with future targets.
- **Appendix B:** SBDC Corporate Indicators 2018-19
  - Provides proposals for reporting Corporate PIs during 2018/19 with future targets.
- **Appendix C:** SBDC Data Only Indicators 2018-19
  - Provides proposals for reporting Data Only PIs during 2018/19.

#### 4. Key points to note

4.1 Finance is an exception to this process as full reporting is included in the monthly budget packs for each Council, so no further PIs are deemed necessary.

4.2 Service areas will measure and monitor any remaining PIs which are useful for day to day management of the service, reporting through to PAGs/Committees where appropriate. These are departmental PIs, which are not included in the appendices. If any of these PIs indicate potential problems, these will be highlighted to Management Team and where the impact is medium to high, to the portfolio holder.

4.3 If approved, for 2018/19 there will be 14 priority PIs, 34 additional corporate PIs and 8 data only PIs – a total of 56.

4.4 Changes to PIs:

- **Leaders:** HR PIs have now become joint Chiltern and South Bucks PIs to reflect that the workforce is now under joint terms and conditions. No major changes within Communications, Policy and Performance.
- **Resources:** Targets have been increased for all Revenues and Benefits indicators, with a placeholder added within Customer Services to measure numbers of compliments received once the Customer Experience Strategy is in place.
- **Healthy Communities:** Targets for customer satisfaction at the Leisure centres have been increased, with the Beacon Centre increasing by 1% for 18/19, rising to 2% in 19/20 and 20/21 and the Evreham Centre increasing by 2% per year as these are thought to be realistic but ambitious targets. JtLI3 - Percentage of customers satisfied with the licensing service received (annual) – has a reduced target of 80%, rather than the 89% of 2017/18 to reflect that not all those who are pleased with the service fill in a survey, and that many of the issues reported by those who complete the survey are outside of the service's control e.g. IT issues, legislation etc.
  - Within Healthy Communities, a set of additional PIs have been created in response to the Homelessness Task and Finish Group, and will be reported monthly to MT and Cabinet, and quarterly to the Overview and Scrutiny Committee.
- **Planning and Economic Development:** Indicators within this Portfolio have been amended to reflect the priorities for the Exemplar Planning Service and Local Enforcement Plan.

- **Environment:** A new PI (SbWR4) has been added in to determine how many missed assisted collections are occurring each month and therefore the success of this service; SbWR2 Percentage of household waste sent for reuse, recycling and composting (cumulative) has had its target reduced from 55% to 53% to mirror national trends in plateauing recycling rates. Additionally, SbSE1 - Cumulative CO2 reduction from local authority operations from base year of 2008/09 – has been added in to align with the existing CDC PI.

**5. Consultation**

*Not Applicable*

**6. Options**

*Not applicable*

**7. Corporate Implications**

7.1 **Financial** - Performance Management assists in identifying value for money.

7.2 **Legal** – None specific to this report.

7.3 **Crime and Disorder, Environmental Issues, ICT, Partnership, Procurement, Social Inclusion, Sustainability** – reports on aspects of performance in these areas.

**Resources** – The monitoring of progress against performance targets is a useful tool to help monitor the progress the Council is making to improve council aims, improve service delivery, and deliver value for money services for residents.

**Financial** – Performance Management assists in identifying value for money.

**Legal** –None identified.

**Risks issues** – None identified

**8. Links to Council Policy Objectives**

Performance management helps to ensure that performance targets set through the service planning process are met, and that any dips in performance are identified and resolved in a timely manner.

This report links to all three of the Council’s objectives, listed below:

Objective 1 - Efficient and effective customer focused services

Objective 2 - Safe, healthy and cohesive communities

Objective 3 - Conserve the environment and promote sustainability

**9. Next Step**

Cabinet are asked to note Appendixes A and B and approve the proposed changes to the priority and corporate performance indicators.

Background Papers:	
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## Appendix A - Priority PIs 2018-19 - SBDC

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
<b>Leader's portfolio</b>							
JtHR1	Working days lost due to sickness absence	10.4	10	10	10	10	No change.
<del>JtHR14</del> JtHR12	Working days lost due to short term sickness absence (up to 20 working days)	4.5	5	5	5	5	Renamed as JtHR12.
<del>JtHR15</del> JtHR13	Working days lost due to long term sickness absence (more than 20 working days)	5.91	5	5	5	5	Renamed as JtHR13.
<b>Resources</b>							
<del>SbRB1</del> SbRB1	Speed of processing - new HB/CTB claims (cumulative)	16.6	19	18	18	18	Target reduced from 19 to 18
SbRB2	Speed of processing - changes of circumstances for HB/CTB claims (cumulative)	7.3	8	8	7.5	7.5	Future years target reduced from 8 to 7.5
SbRB3	Percentage of Council Tax collected (cumulative)	73.5%	98%	98.0%	98.5%	98.8%	Increased in future years.
SbRB4	Percentage of non-domestic rates collected (cumulative)	85.9%	98.8%	98.8%	98.9%	98.9%	Increased in future years.
<b>Healthy Communities</b>							

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
<b>SbCmSf2</b>	Percentage reduction in violent offences against a person, year on year (quarterly)	-16.6%	Data Only	Data Only	Data Only	Data Only	No change.
<b>SbHS1</b>	Number of applicants with/expecting children who have been in B & B accommodation for longer than 6 weeks (snapshot figure at end of month)	6	18	18	18	18	No change.
<b>SbHS8</b> <b>SbHS7</b>	Number of households living in temporary accommodation (snapshot at the end of the month)	63	68	68	68	68	No change to target, renamed as SbHS7
<b>Planning and Economic Development</b>							
<b>SbSD39 (P)</b>	2018 Majors quality of planning decisions – special measures 2 year & 9 month assessment period ending Dec 2017 (cumulative monthly)	0.00%	9.99%				Have been rolled forward in terms of timeframe for assessment and added to Corporate Indicators.
<b>SbSD40 (P)</b>	2018 Non-Majors quality of planning decisions – special measures 2 year & 9 month assessment period ending Dec 2017 (cumulative monthly)	1.35%	9.99%				Have been rolled forward in terms of timeframe for assessment and added to Corporate Indicators.

Appendix A

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
<b>SbSD41 (P)</b>	2019 Majors speed of planning decisions – special measures 2 year assessment period ending Sep 2018 (cumulative monthly)	86.96	60%				Have been rolled forward in terms of timeframe for assessment and added to Corporate Indicators.
<b>SbSD42 (P)</b>	2019 Non-Majors speed of planning decisions – special measures 2 year assessment period ending Sep 2018 (cumulative monthly)	91.28	70%				Have been rolled forward in terms of timeframe for assessment and added to Corporate Indicators.
<b>CdSD3</b>	Processing of planning applications: major applications processed within 13 weeks (cumulative)	81.3%	90%	90%	90%	90%	Changed from corporate to priority PI. No change to target (Government target is 60%).
<b>CdSD4</b>	Processing of planning applications: minor applications processed within 8 weeks (cumulative)	85%	85%	85%	85%	85%	Changed from corporate to priority PI. Target remains the same (Government target is 65%).
<b>CdSD5</b>	Processing of planning applications: other applications processed within 8 weeks (cumulative)	88%	85%	85%	85%	85%	Changed from corporate to priority PI. No change to target (Government target is 80%).
<b>Environment</b>							

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Appendix A

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
SbWR2	Percentage of household waste sent for reuse, recycling and composting (cumulative)	54.7%	55%	53%	53%	53%	Code changed from SbWR3 to SbWR2. Target decreased to mirror national trends in plateauing recycling rates.

**Appendix B - Corporate PIs 2018-19 - SBDC**

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
<b>Leader's Portfolio</b>							
SbHR2	Voluntary leavers as a % of workforce (extrapolated for the year)	22.1%	16%				Being replaced by a joint PI within Appendix C.
<b>Customer and Business Support</b>							
JtBS1	Availability of ICT systems to staff from 8am to 6pm (by period)	85.5%	99.5%	99.5%	99.5%	99.5%	No change.
JtBS2	Percentage of calls to ICT helpdesk resolved within agreed timescales (by period)	86.0%	95%	95%	95%	95%	No change.
SbBS1	Percentage of responses to FOI requests sent within 20 working days (by month)	NA	90%	90%	90%	90%	Changed code from SbBS3 to SbBS1
SbCS1	Number of complaints received (cumulative, quarterly)	98	80	80	80	80	No change.
SbCS2	New measure for compliments - t.b.a.	NA	TBA	TBA	TBA	TBA	Placeholder for PI for when Customer Experience Strategy is implemented
JtLD1	Client satisfaction with the shared service. Percentage satisfied or very satisfied.	6 monthly	98%	98%	98%	98%	No change.
SbLD2	Percentage of canvass forms returned	Annual	94%	94%	95%	96%	Targets increased by 1% per year, 18/19-20/21
SbLD3	Standard searches carried out within 5 working days (cumulative)	100%	100%	100%	100%	100%	No change.
<b>Healthy communities</b>							
SbCL1a	Customer satisfaction rating at the Beacon Centre.	Annual	83%	84%	86%	88%	Targets increased by 1% in 18/19, followed by 2% in 19/20 and 20/21.
SbCL1b	Customer satisfaction rating at the Evreham Centre.	Annual	80%	82%	84%	86%	Targets increased by 2% per year.

## Appendix B - SBDC Quarterly Corporate Performance Indicator Report

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
JtLI3	Percentage of customers satisfied with the licensing service received (annual)	Annual	89%	80%	80%	80%	It has become clear from the last 2 years that the current target is unachievable. It is challenging for a regulatory service to attain high levels of positive customer feedback, and though we investigate the reason for unsatisfied respondents on an individual basis and address this where possible, there are factors such as legislation which must be complied with, and the impact of other parties such as IT not being up to the standard that our customers expect, but outside of the services direct control, and not quick to fix. The lower target does not represent a change in the level of effort that that the team intends to make to improve customer service, and remains challenging to achieve. As these targets are reviewed annually it will be possible to look at the impact of the Customer Experience Strategy when Licensing have completed this process in order to consider whether this removes some of the common dissatisfaction with our systems and contacting us.
JtLI5	Percentages of licences received and issued/renewed within statutory or policy deadlines (cumulative).	96.1%	97%	97.0%	97.5%	98.0%	Increase of 0.5% per year from 18/19-20/21
SEH2	Percentage of food hygiene inspections of category A – D food businesses achieved against the inspections due by quarter	86.2%	91%	91%	91%	91%	Changed from "Percentage of food premises (risk rating A to C) that are broadly compliant (snapshot quarterly)." The target has been reduced to 91% from 93% as this is seen by the Head of Service to be a target that is achievable yet still stretching.
SbHS2	Number of affordable homes delivered by (i) new build (ii) vacancies generated by local authority scheme (iii) acquisition of existing properties for social housing (cumulative)	26	22	22	22	22	No change.
SbHS3	Average Length of stay in B & B temporary accommodation for all households (snapshot at end of period)	13.00	22	22	22	22	No change.
SbHS4	Number of private sector dwellings vacant for more than 6 months and returned to occupation following local authority intervention	Annual	15	15	15	15	No change.

Appendix B - SBDC Quarterly Corporate Performance Indicator Report

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
<b>Planning and Economic Development</b>							
JtBC1	Applications checked within 10 working days (cumulative)	94.3%	92%	92%	92%	92%	No change.
JtBC2	Customer satisfaction with the building control service. (cumulative)	95.6%	92%	92%	92%	92%	No change.
SbPED1	Percentage of planning applicants who are satisfied or very satisfied with the planning service	90.3%	80%	85%	85%	85%	Code changed from SbSD7 to SbSD1. Target increased to 85%.
SbPED2	Planning appeals allowed (cumulative)	29.4%	35%	35%	35%	35%	Code changed from SbSD8 to SbSD2
SbSD10	Processing of planning applications: minor applications- (cumulative)	85.1%	85%				Moved to Priority Indicators
SbSD11	Processing of planning applications: other applications- (cumulative)	88.4%	85%				Moved to Priority Indicators
SbPED8	Percentage of new enforcement cases where an initial site visit or closure of the case for a Priority A case is undertaken within 5 working days as set out in the Local Enforcement Plan (cumulative, monthly)	NEW PI	NEW PI	70%	85%	85%	As this is a new working model, these are stretching targets for how the service is to be delivered. Due to number of projects being delivered corporately and within the planning service, and the need to report against these, the targets have been staged to allow delivery within resources allocated.
SbPED9	Percentage of new enforcement cases where an initial site visit or closure of the case for a Priority B is undertaken within 10 working days as set out in the Local Enforcement Plan (cumulative, monthly)	NEW PI	NEW PI	70%	80%	85%	As this is a new working model, these are stretching targets for how the service is to be delivered. Due to number of projects being delivered corporately and within the planning service, and the need to report against these, the targets have been staged to allow delivery within resources allocated.

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Appendix B - SBDC Quarterly Corporate Performance Indicator Report

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
SbPED10	Percentage of new enforcement cases where an initial site visit or closure of the case for a Priority C is undertaken within 10 working days as set out in the Local Enforcement Plan (cumulative, monthly)	NEW PI	NEW PI	70%	80%	85%	As this is a new working model, these are stretching targets for how the service is to be delivered. Due to number of projects being delivered corporately and within the planning service, and the need to report against these, the targets have been staged to allow delivery within resources allocated.
SbPED41	2019 Majors speed of planning decisions - special measures 2 year assessment period ending Sep 2018 (cumulative monthly)	87%	60%	60%	60%	60%	No change. These are added in throughout the year as assessment periods become live.
SbPED42	2019 Non-Majors speed of planning decisions - special measures 2 year assessment period ending Sep 2018 (cumulative monthly)	91.2%	70%	70%	70%	70%	No change. These are added in throughout the year as assessment periods become live.
SbPED43	2019 Majors quality of planning decisions - special measures 2 year & 9 month assessment period ending Dec 2018 (cumulative monthly)	0%	9.99%	9.99%	9.99%	9.99%	No change. These are added in throughout the year as assessment periods become live.
SbPED44	2019 Non-Majors quality of planning decisions - special measures 2 year & 9 month assessment period ending Dec 2018 (cumulative monthly)	0.98%	9.99%	9.99%	9.99%	9.99%	No change. These are added in throughout the year as assessment periods become live.
SbPED45	2020 Majors speed of planning decisions – special measures 2 year assessment period ending Sep 19 (cumulative, monthly)	100%	60%	60%	60%	60%	No change. These are added in throughout the year as assessment periods become live.
SbPED46	2020 Non-Majors speed of planning decisions – special measures 2 year assessment ending September 2019 (cumulative, monthly)	94.5%	70%	70%	70%	70%	No change. These are added in throughout the year as assessment periods become live.



Appendix B - SBDC Quarterly Corporate Performance Indicator Report

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
SbPED47	2020 Majors quality of planning decisions – special measures 2 year and 9 month assessment period ending December 2019 (cumulative, monthly)	4.55%	9.99%	9.99%	9.99%	9.99%	No change. These are added in throughout the year as assessment periods become live.
SbPED48	2020 Non-Majors quality of planning decisions – special measures 2 year and 9 month assessment period ending December 2019 (cumulative, monthly)	0.94%	9.99%	9.99%	9.99%	9.99%	No change. These are added in throughout the year as assessment periods become live.
<b>Environment</b>							
SbWR1	Household refuse collections, number of containers missed per month (calculated by P&C team on weekly basis)	78	100	100	100	100	No change.
SbWR4	No of missed assisted containers (monthly)	NEW PI	NEW PI	20	20	20	New PI to measure success of assisted collections.
SbSE1	Cumulative CO2 reduction from local authority operations from base year of 2008/09	NEW PI	NEW PI	12%	12%	12%	Has been added in to align with CDC.

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**Appendix C - Data Only PIs - SBDC**

Code	Title	Latest Results - Q3 2017/18	Target 2017/18 (YTD)	Target 2018/19	Target 2019/20	Target 2020/21	Comments
<b>Leader's Portfolio</b>							
<b>SbCP1 (C)</b>	Number of unique visitors to the main website (monthly by period and annual)	63,542	Data Only	Data Only	Data Only	Data Only	No change.
<b>JtHR2</b>	Voluntary leavers as a percentage of workforce (cumulative for year).	NEW PI	NEW PI	Data Only	Data Only	Data Only	Replaces individual Chiltern and South Bucks PIs.
<b>Healthy Communities</b>							
<b>SbCmSf1 (C)</b>	Percentage reduction in burglaries from dwelling, rolling year on year (quarterly)	0%	Data Only	Data Only	Data Only	Data Only	No change.
<b>SbCmSf2</b>	Percentage reduction in violent offences against a person, year on year (quarterly)	-16.6%	Data Only	Data Only	Data Only	Data Only	No change.
<b>Planning and Economic Development</b>							
<b>JtENF1(C)</b>	Number of new enforcement cases received (monthly)	NEW PI	NEW PI	Data Only	Data Only	Data Only	New enforcement corporate PI.

<b>JtENF2 (C)</b>	Number of closed cases (monthly)	NEW PI	NEW PI	Data Only	Data Only	Data Only	New enforcement corporate PI.
<b>JtENF3 (C)</b>	Number of PCNs (or S330s) issued (monthly)	NEW PI	NEW PI	Data Only	Data Only	Data Only	New enforcement corporate PI.
<b>JtENF4 (C)</b>	Number of notices served (monthly)	NEW PI	NEW PI	Data Only	Data Only	Data Only	New enforcement corporate PI.

<b>REPORT SUBJECT:</b>	<i>South Bucks District Council Performance Report Q3 2017-18</i>
<b>REPORT OF:</b>	<i>Leader of the Council – Councillor Nick Naylor</i>
<b>RESPONSIBLE OFFICER</b>	<i>Chief Executive – Bob Smith</i>
<b>REPORT AUTHOR</b>	<i>Ani Sultan (01494 586 800)</i>
<b>WARD(S) AFFECTED</b>	<i>Report applies to whole district</i>

### 1. Purpose of Report

This report outlines the annual performance of Council services against pre-agreed performance indicators and service objectives for Quarter 3 of 2017-18.

#### RECOMMENDATION

Cabinet is asked to note the performance reports.

### 2. Executive Summary

Overview of **Quarter 3 2017-18** performance indicators (PIs) against targets across the Council:

Portfolio	No of PIs	PI on target □	PI slightly below target □	PI off target □	Unknown	Data only	Not reported this quarter/not used
<b>Leader's</b>	5	1	1	2	0	1	0
<b>Customer Services and Business Support</b>	7	1	2	2	1	0	1
<b>Healthy communities</b>	12	5	1	0	0	1	5
<b>Planning and Economic development</b>	16	14	0	0	2	0	0
<b>Environment</b>	2	2	0	0	0	0	0
<b>Resources</b>	4	4	0	0	0	0	0
<b>Total PIs</b>	<b>46</b>	<b>27</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>6</b>

\*Please note, this table does not include Appendix C - Additional Homelessness Performance Indicators (Task and Finish Group Recommendations)

### 3. Reasons for Recommendations

3.1. This report details factual performance against pre-agreed targets.

3.2. Management Team, Cabinet, Resources Overview & Services Overview Committees receive regular updates detailing progress towards service plan objectives, performance targets and strategic risks, in line with our Performance and Improvement Framework.

3.3. Three detailed performance tables accompany this report:

- **Appendix A – Priority PIs Quarter 3 2017-18**
- **Appendix B – Corporate PIs Quarter 3 2017-18**
- **Appendix C - Additional Homelessness PIs Quarter 3 2017-18 (Task and Finish Group Recommendations)**

#### 4. Key points to note:

- 4.1. Of the 3 unknown PIs: two fall within the Planning and Economic Development Portfolio, relating to enforcement. Further to the establishment of a joint planning service, changes to ways of working have resulted in warping of enforcement stats, leading to the figures being hard to obtain and not having meaning to them anymore. As such it is not possible to collate these, and the introduction of more pertinent indicators will be occurring via the 2018/19 Performance Indicator Review. The final unknown indicator relates to FOI queries, and is reported in arrears.
- 4.2. Of the four off-target PIs, one was a priority PI:
- 4.2.1. **Leaders:** The priority PI relating to long term sickness absence was over the target of 5, at 5.9. As always, long-term absence (comprised of 5 employees) is being managed by managers, with HR support and alongside occupational health.
  - 4.2.2. **Planning and Economic Development:** The priority PIs are on target for this portfolio, with performance above the target set – please see paragraph 4.1 above for explanation of PIs not reported.
  - 4.2.3. **Customer Services and Business Support:** JtBS1 – availability of ICT systems to staff from 8am to 6pm was under target of 99.5% at 85.5%. There have been two major issues over the last quarter that have had an effect on this PI: IT Infrastructure equipment from the old server room was moved to the new Comms Room. Although most of the equipment was moved in December there were problems with the internal routing of the IT systems and access, causing network disruption until the equipment was reconfigured. Coupled with this there have been problems with the servers supporting the vWorkspace desktop environment, starting mid-December, with the problem worsening and leading to the whole environment crashing a couple of times over the week before Christmas. Business Support has been working with engineers from Microsoft, Dell, Quest (company supporting the VDi software vWorkspace) and Fordway (company who designed the shared network) and the work is still ongoing. These issues have obviously had an impact with the result of this PI. Since mid-February, vWorkspace has stabilised, which should mean that the figures for quarter 4 should be closer to target. SbCS1 – number of complaints received is above the annual target of 80, at 98 – there is no particular pattern to these complaints.
  - 4.2.4. **Healthy Communities:** SbEH2, percentage of food premises that are broadly compliant is slightly under the target of 91% at 86.2%. This is due to being just a snapshot in time – over time, some businesses will improve whilst others may decline; the intention is always to improve business ratings. The figure also includes new businesses which have not had a previous intervention and so would not have benefitted from officer advice or guidance. This figure includes new businesses which have not had a previous intervention and so would not have benefitted from officer advice or guidance. Further to comments within previous committees, Environmental Health are aiming to set up a service to provide businesses with the opportunity to have the option of a paid-for advisory service prior to any inspection to help improve hygiene rating.
  - 4.2.5. **Environment:** All PIs are on-target for this portfolio.
  - 4.2.6. **Resources:** All PIs are on target for this portfolio.

**5. Consultation**

Not applicable.

**6. Options**

Not applicable.

**7. Corporate Implications**

7.1 Financial - Performance Management assists in identifying value for money.

7.2 Legal – None specific to this report.

7.3 Crime and Disorder, Environmental Issues, ICT, Partnership, Procurement, Social Inclusion, Sustainability – reports on aspects of performance in these areas.

**8. Links to Council Policy Objectives**

Performance management helps to ensure that performance targets set through the service planning process are met, and that any dips in performance are identified and resolved in a timely manner.

This report links to all three of the Council’s objectives, listed below:

Objective 1 - Efficient and effective customer focused services

Objective 2 - Safe, healthy and cohesive communities

Objective 3 - Conserve the environment and promote sustainability

**9. Next Step**

Once approved, this report and appendices will be published on the website.

<b>Background Papers:</b>	N/A
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Appendix A - Priority PIs 2017-18 - SBDC

Code	Title	Annual Target 16/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Traffic Light	Target 2017/18 (YTD)	Latest Note
<b>Leader's portfolio</b>																	
JtHR1	Working days lost due to sickness absence	12	8.1	9.7	9.8	10.7	11.1	11.0	10.8	10.7	10.4					10	<p>These figures are taken from iTrent, which holds absence data. Absence figures are now reported on as joint figures rather than split between Councils.</p> <p>208 working days lost for December + 2,199.50 working days lost for April - November = 2,407.50 days.</p> <p>2,407.50 / 308.46 (average FTE figure) = 7.80 / 9 x 12 = 10.4 average working days lost to sickness absence (cumulative).</p> <p>These figures relate to absence days from 44 employees</p>
JtHR14	Working days lost due to short term sickness absence (upto 20 working days)	New PI	5.1	4.6	4.1	4.4	4.4	4.5	4.4	4.5	4.5					5	<p>These figures are taken from iTrent, which holds absence data. Absence figures are now reported on as joint figures rather than split between Councils.</p> <p>107 working days lost for December + 935 working days lost for April - November = 1,042 days.</p> <p>1,042 / 308.46 (average FTE figure) = 3.38 / 9 x 12 = 4.5 average working days lost to short term sickness absence (cumulative).</p> <p>The figures related to absence from 39 employees</p>
JtHR15	Working days lost due to long term sickness absence (more than 20 working days)	New PI	3	5.04	5.72	6.27	6.72	6.5	6.39	6.12	5.91					5	<p>These figures are taken from iTrent, which holds absence data. Absence figures are now reported on as joint figures rather than split between Councils.</p> <p>101 working days lost for December + 1,264.50 working days lost for April - November = 1,365.50 days.</p> <p>1,365.50 / 308.46 (average FTE figure) = 4.43 / 9 x 12 = 5.9 average working days lost to long term sickness absence (cumulative).</p> <p>This absence relates to 5 employees</p>
<b>Resources</b>																	
SbRB1	Speed of processing - new HB/CTB claims (cumulative)	19	16.6	16.3	17.0	16.7	17.0	16.7	16.2	16.6	16.6					19	On target.

Appendix A

Code	Title	Annual Target 16/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Traffic Light	Target 2017/18 (YTD)	Latest Note	
SbRB2	Speed of processing - changes of circumstances for HB/CTB claims (cumulative)	8	7.4	7.0	7.4	7.4	7.2	7.2	7.2	7.3	7.3				☑	8	On target.	
SbRB3	Percentage of Council Tax collected (cumulative)	98.00%	11.5%	21.0%	30.2%	39.4%	48.5%	57.7%	66.9%	76.1%	73.5%				☑	98%	On target.	
SbRB4	Percentage of non-domestic rates collected (cumulative)	98.80%	11.7%	21.5%	30.5%	39.3%	48.4%	57.8%	67.8%	76.3%	85.9%				☑	98.80%	On target.	
<b>Healthy Communities</b>																		
SbCmSf 2	Percentage reduction in violent offences against a person, year on year (quarterly)	Data Only			-10.9%			-0.1%			-16.6%				Data Only	Data Only	South Bucks saw an increase of 16.6% when compared to the same period the previous year. 683 offences compared to 586 in the same period.	
Page 34	SbHS1	Number of applicants with/expecting children who have been in B & B accommodation for longer than 6 weeks (snapshot figure at end of month)	0	11	8	5	6	7	4	8	9	6				☑	18	Of this total (i) one household has been deemed intentionally homeless and is subject to County Court appeal (ii) two households have been deemed intentionally homeless and are currently being reviewed (iii) one household was due to be referred to another authority but enquiries have now established local connection (iv) one household is due to move on to one of GX Police Houses and (v) one household is awaiting move on to alternative self-contained TA.
	SbHS8	Number of households living in temporary accommodation (snapshot at the end of the month)	30	71	66	64	61	64	63	68	66	63				☑	68	The demand for TA in South Bucks remains high due to level of homelessness applications and limited availability of suitable move-on accommodation.
<b>Planning and Economic Development</b>																		
SbSD39 (P)	2018 Majors quality of planning decisions - special measures 2 year & 9 month assessment period ending Dec 2017 (cumulative monthly)	9.99%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%				☑	9.99%	This calculation is based on the number of major appeals lost between 1/4/15 - 31/12/17 on major applications decided between 1/4/15 - 31/3/17 (0/35) Please note denominator is now fixed as we have reached 31/3/17.	
SbSD40 (P)	2018 Non-Majors quality of planning decisions - special measures 2 year & 9 month assessment period ending Dec 2017 (cumulative monthly)	9.99%	0.88%	0.92%	1.08%	1.23%	1.23%	1.23%	1.31%	1.35%	1.35%				☑	9.99%	This calculation is based on the number of non-major appeals lost between 1/4/15 - 31/12/17 on non-major applications decided between 1/4/15 - 31/3/17 (35/2599). Please note, the figure is fixed now as we have reached the two relevant dates.	

Appendix A

Code	Title	Annual Target 16/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Traffic Light	Target 2017/18 (YTD)	Latest Note
<b>SbSD41 (P)</b>	2019 Majors speed of planning decisions - special measures 2 year assessment period ending Sep 2018 (cumulative monthly)	50%	100.00%	88.89%	90.00%	90.91%	84.62%	81.25%	84.21%	86.36%	86.96					60%	This is a measure of our performance on major applications for the two year period 1/10/16 - 30/9/18 and is this is therefore 15 months through the 24 month period (20/23)
<b>SbSD42 (P)</b>	2019 Non-Majors speed of planning decisions - special measures 2 year assessment period ending Sep 2018 (cumulative monthly)	65%	96.63%	96.27%	96.04%	95.23%	94.79%	94.64%	94.00%	93.00%	91.28					70%	This is a measure of our performance on non-major applications for the two year period 1/10/16 - 30/9/18 and is this is therefore 15 months through the 24 month period (1424/1560)

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**Appendix B - SBDC Quarterly Corporate Performance Indicator Report**




Note: Excludes Priority Performance Indicators - see Appendix A

Code	Title	Annual Target 16/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Traffic Light	Target 2017/18 (YTD)	Latest Note
<b>Leader's Portfolio</b>																	
SbCP1 (C)	Number of unique visitors to the main website (by period)	data only	27359	31799	42615	38,497	35,478	60,001	77,168	66,211	63,542				Data Only	Data Only	Data only.
SbHR2 (C)	Voluntary leavers as a % of workforce (extrapolated for the year)	16%			3%			9.2%			22.1%				<span style="color: red;">⊗</span>	16%	1 leaver in quarter one, extrapolated this estimates 4 leavers for the year / 132 average headcount * 100 = 3.03%. This information is taken from reports run on iTrent.
<b>Customer and Business Support</b>																	
JtBS1 (C)	Availability of ICT systems to staff from 8am to 6pm (by period)	99.50%			100.0%			99.7%			85.5%				<span style="color: red;">⊗</span>	99.50%	<p>There have been two major issues over the last quarter that have had an effect on this PI.</p> <p>All IT Infrastructure equipment from the old server room in Caps1 was moved to the new Comms Room in Caps2. The bulk of the equipment was moved in December but there were problems with the internal routing of the IT systems and access. This caused network disruption until the equipment was reconfigured.</p> <p>Coupled with this there have been problems with the servers supporting the vWorkspace desktop environment. The problems started mid-December with desktops freezing but the week before Christmas the problem got worse with the whole environment crashing a couple of times over the week. We've been working with engineers from Microsoft, Dell, Quest (company supporting the VDi software vWorkspace) and Fordway (company who designed the shared network) and the work is still ongoing. These issues have obviously had an impact with the result of this PI.</p>

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Appendix B

Code	Title	Annual Target 16/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Traffic Light	Target 2017/18 (YTD)	Latest Note
JtBS2 (C)	Percentage of calls to ICT helpdesk resolved within agreed timescales (by period)	95%			92.6%			94.5%			86.0%					95%	There have been several factors impacting on the result of this PI.  BS resource has been deployed to support the Accommodation Programme. A key part of this was the move of IT equipment from Caps 1 to Caps 2. A lot of work has been happening to prepare for the migration from the current telecomms contractor to the new one. Most of the work is being done out of hours. Resource has been concentrated on the vWorkspace project to accelerate the move of officers to using this way of working. Sickness levels have increased due to flu
SbBS3 (C)	Percentage of responses to FOI requests sent within 20 working days (by month)	90%	71%	94%	93%	88%	96%	100%	100%	95%					<b>NA</b>	90%	Awaiting December's data.
Page 38 SbCS1 (C)	Number of complaints received (cumulative, quarterly)	80			38			69			98					80 per annum	Total for 3rd quarter = 29 ( October - 14, November - 5, December - 10)
SbLD2 (C)	Percentage of canvass forms returned	90%						annual PI								94%	Reported annually.
SbLD3 (C)	Standard searches carried out within 5 working days (cumulative)	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	On target
JtLD1 (C)	Client satisfaction with the shared service. Percentage satisfied or very satisfied.	96%			6 monthly			97.00%			6 monthly					98%	Reported 6 monthly.
<b>Healthy communities</b>																	
SbCL1a (C)	Customer satisfaction rating at the Beacon Centre.	82%						annual PI								83%	Reported annually.
SbCL1b (C)	Customer satisfaction rating at the Evreham Centre.	78%						annual PI								80%	Reported annually.
JtLI3 (C)	Percentage of customers satisfied with the licensing service received (annual)	89%						annual PI								89%	Reported annually.
JtLI5 (C)	Percentages of licences received and issued/renewed within statutory or policy deadlines (cumulative)	97%			99.6%			99.6%			96.1%					97%	On target

Code	Title	Annual Target 16/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Traffic Light	Target 2017/18 (YTD)	Latest Note
SbCmSf1 (C)	Percentage reduction in burglaries from dwelling, rolling year on year (quarterly)	data only			0%			0%			0%				Data Only	Data Only	There were 206 burglaries between 1st April and 31st December 2017 in South Bucks District. We are unable to compare this to the previous year because the way in which burglaries are recorded changed in April 2017.
SbEH2 (C)	Percentage of food premises (risk rating A to C) that are broadly compliant (snapshot quarterly)	90%			86.9%			86%			86.2%					91%	This figure includes new businesses which have not had a previous intervention and so would not have benefitted from officer advice or guidance. This is being addressed as part of service improvement. Further to comments within previous committees, Environmental Health are aiming to set up a service to provide businesses with the opportunity to have the option of a paid-for advisory service prior to any inspection to help improve hygiene rating.
SbHS2 (C)	Number of affordable homes delivered by (i) new build (ii) vacancies generated by local authority scheme (iii) acquisition of existing properties for social housing (cumulative)	22 (5.5)			12			24			26					22	Total comprises (i) 12 new build units by Hightown and 12 new build units by Housing Solutions (ii) 0 and (iii) 0
SbHS3i (C)	Average Length of stay in B & B temporary accommodation for all households (snapshot at end of period)	10			21			14.00			13.00					22	Total applicants who left B&B temporary accommodation during quarter 15 applicants stayed a total of 1424 nights = average 94.9 nights  Broken down into:  Singles/couples without children 10 applicants stayed a total of 1202 days = average 120.2 nights  Families with/expecting children 5 families stayed a total of 222 days = average 44.4 nights

Code	Title	Annual Target 16/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Traffic Light	Target 2017/18 (YTD)	Latest Note
SbHS4 (C)	Number of private sector dwellings vacant for more than 6 months and returned to occupation following local authority intervention	15						annual PI							●	15	Reported annually.
<b>Planning and Economic Development</b>																	
JtBC1 (C)	Applications checked within 10 working days (cumulative)	92%	100.0%	99.2%	94.6%	95.6%	95.9%	95.7%	94.0%	96.0%	94.3%				✓	92%	On target
JtBC4 (C)	Customer satisfaction with the building control service. (cumulative)	92%	87.5%	84.6%	92.9%	93.6%	93.3%	93.8%	94.6%	95.4%	95.6%				✓	92%	On target
SbSD7 (C)	Percentage of planning applicants who are satisfied or very satisfied with the planning service	80%	84.7%	89.3%	91.9%	89.1%	89.3%	89.5%	89.8%	90.3%	90.3%				✓	80%	On target
SbSD8 (C)	Planning appeals allowed.	35%	0.0%	14.3%	29.4%	34.8%	32.0%	34.6%	41.9%	37.8%	29.4%				✓	35%	On target
SbSD10 (C)	Processing of planning applications: minor applications (cumulative)	90%	92.3%	91.8%	92.0%	91.0%	89.0%	90.0%	88.4%	87.1%	85.1%				✓	85%	On target
SbSD11 (C)	Processing of planning applications: other applications (cumulative)	90%	96.0%	95.5%	95.4%	93.6%	93.8%	93.4%	92.8%	91.2%	88.4%				✓	85%	On target
SbSD12 (C)	Percentage of new enforcement allegations where an initial site visit is undertaken within 20 days (the timescales set out in the Enforcement Policy and Procedure) (snapshot)	70%													NA	80%	Unable to collate figures further to the new ways of joint working within the planning service. Please see accompanying report, paragraph 4.1 for further detail.
SbSD33 (C)	Percentage of new enforcement cases where an initial site visit for a high-priority case is undertaken within the timescale (3 working days) set out in the enforcement and monitoring policy (Cumulative, monthly)	98%													NA	98%	Unable to collate figures further to the new ways of joint working within the planning service. Please see accompanying report, paragraph 4.1 for further detail.
SbSD41 (C)	2019 Majors speed of planning decisions - special measures 2 year assessment period ending Sep 2018 (cumulative monthly)	60%	100.0%	88.9%	90.0%	90.9%	84.6%	81.3%	84.2%	86.4%	87%				✓	60%	On target



Code	Title	Annual Target 16/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Traffic Light	Target 2017/18 (YTD)	Latest Note
SbSD42 (C)	2019 Non-Majors speed of planning decisions - special measures 2 year assessment period ending Sep 2018 (cumulative monthly)	70%	96.6%	96.3%	96.0%	95.2%	94.8%	94.6%	94%	93%	91.2%				☑	70%	On target
SbSD43 (C)	2019 Majors quality of planning decisions - special measures 2 year & 9 month assessment period ending Dec 2018 (cumulative monthly)	9.99%	0%	0%	0%	0%	0%	0%	0%	0%	0%				☑	9.99%	On target
SbSD44 (C)	2019 Non-Majors quality of planning decisions - special measures 2 year & 9 month assessment period ending Dec 2018 (cumulative monthly)	9.99%	0.42%	0.46%	0.67%	0.86%	0.80%	0.82%	0.97%	0.97%	0.98%				☑	9.99%	On target
<b>Environment</b>																	
WR1 (C)	Household refuse collections, number of containers missed per month (calculated by P&C team on weekly basis)	100	100	89	163	97	71	89	112	76	78				☑	100	On target
WR3 (C)	Percentage of household waste sent for reuse, recycling and composting (cumulative)	53%	53.4%	53.8%	58.8%	55.5%	55.6%	55.2%	55.2%	55.3%	54.7%				☑	55%	On target

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Appendix C - SBDC - Additional Homelessness Performance Indicators (Task and Finish Group Recommendations)

No.	Performance Indicator	Description	Target	Period	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Notes
1	Average time to issue decision on homelessness application	Average time for applications that were decided during the month (Period from date of application to date of decision) - Working days	33 working days	Monthly	36	40	20	63	50	Following homelessness application, applicant was subsequently successful in bid for social housing tenancy via Bucks Home Choice. Homelessness application was hold pending outcome of Bucks Home Choice bid. "Not homeless" decision then issued when applicant took up new tenancy."
2	% of applications decided within 33 working days	% of total applications decided during the month which had a decision issued within 33 working days of original application date	80%	Monthly	70%	57%	83%	13%	0%	Following homelessness application, applicant was subsequently successful in bid for social housing tenancy via Bucks Home Choice. Homelessness application was hold pending outcome of Bucks Home Choice bid. "Not homeless" decision then issued when applicant took up new tenancy
3	Total Number of homelessness case decisions	Total Number of decision issued on homelessness applications during month	N/A	Monthly		7	6	8	1	Lower than previous months due to 1) staff sickness absence and 2) number of complex investigations
4	Number of homelessness cases accepted for main housing duty	Number of decisions issued on homelessness applications during month where SBDC accepted main housing duty	N/A	Monthly		4	4	5	0	One application determined, resident deemed not homeless.
5	% of Homelessness Applicants who had a local connection to South Bucks	% of Total Number of Decisions issued on homelessness applications where applicant had a local connection to South Bucks	N/A	Monthly		85%	66%	75%	100%	One application with local connection
6	% of Homelessness Applicants who had rent arrears on former tenancy	% of Total Number of Decisions issued on homelessness applications where applicant had lost housing due to rent arrears	N/A	Monthly		14%	0%	13%	0%	NA
	% of Homelessness Applicants with multi-agency involvement	% of Total Number of Decisions issued on homelessness applications where external agencies working with applicant	N/A	Monthly		42%	83%	38%	100%	One applicant with multi-agency involvement
8	Average length of stay in temporary accommodation	Average overall length of time spent in temporary accommodation for those applicants whose TA placements ended during month (weeks) - (Where applicant has stayed in more than one TA placement then the overall total stay across all placements is recorded)	N/A	Monthly			29 weeks	17 weeks	31 weeks	This was the average for 12 placements that ended in January. Average was inflated by one lengthy TA placement which ended during month following county court appeal. For remaining 11 placements the average stay was 26 weeks.

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**Buckinghamshire County Council**  
**Select Committee**  
 Health and Adult Social Care

# Minutes

## *HEALTH AND ADULT SOCIAL CARE SELECT COMMITTEE*

Minutes from the meeting held on Tuesday 30 January 2018, in Mezzanine Room 1, County Hall, Aylesbury, commencing at 10.06 am and concluding at 12.19 pm.

This meeting was webcast. To review the detailed discussions that took place, please see the webcast which can be found at <http://www.buckscc.public-i.tv/>  
 The webcasts are retained on this website for 6 months. Recordings of any previous meetings beyond this can be requested (contact: [democracy@buckscc.gov.uk](mailto:democracy@buckscc.gov.uk))

### **MEMBERS PRESENT**

#### **Buckinghamshire County Council**

Mr B Roberts (In the Chair)  
 Mr R Bagge, Mrs B Gibbs, Mr M Hussain and Mr D Martin

#### **District Councils**

Ms T Jervis	Healthwatch Bucks
Mr A Green	Wycombe District Council
Ms S Jenkins	Aylesbury Vale District Council
Mrs M Aston	

#### **Members in Attendance**

Mr N Brown  
 Lin Hazell

#### **Others in Attendance**

Mrs E Wheaton, Committee and Governance Advisor  
 Dr J O'Grady, Director of Public Health  
 Ms J Bowie, Director of Joint Commissioning  
 Ms M Foster, Commissioning Manager, CCG  
 Ms S Taylor, Committee Assistant



**South Bucks**  
District Council



## **1 APOLOGIES FOR ABSENCE / CHANGES IN MEMBERSHIP**

Apologies had been received from:

- Mr B Bendyshe-Brown
- Ms L Clarke OBE
- Mr C Etholen
- Mr S Lambert
- Julia Wassell
- Ms J Cook
- Dr W Matthews

## **2 DECLARATIONS OF INTEREST**

Ms M Aston declared an interest as she was Chairman of the Executive Committee of Abbeyfield Residential Home in Haddenham.

## **3 MINUTES**

The minutes of the meeting held on 28 November 2017 were agreed as an accurate record and signed by the Chairman.

## **4 PUBLIC QUESTIONS**

There were no public questions.

The Chairman referred to the response the Select Committee had received from the CCGs regarding the question raised by District Councillor Robin Stuchbury on the proposed changes to GP provision in Buckingham at the last meeting. The Members had received a copy of the letter by email and a copy of the response would be attached to the minutes of this meeting. Ms L Patten would provide an update in May.

## **5 CABINET MEMBER QUESTION TIME**

Lin Hazell, Cabinet Member for Health and Wellbeing, reported that the budget was under constant focus. In December, £2.8 million had been released from the contingency fund reducing the year end overspend forecast to £1.3 million. Since then the department had found £700,000 of efficiencies resulting in a projected overspend of approximately £700,000. The Cabinet Member acknowledged that demand fluctuated and the budget situation was volatile. More controls would be put in place and a more robust transformation programme had been devised which would be closely monitored through weekly meetings.

The following questions/points were raised:

- In response to a question on how well the service had coped under the recent winter pressures, L Hazell informed the Committee that the number of Delayed Transfers of Care (DToC) had been good. However, some of the Hospitals outside of the county, with patients from Buckinghamshire, were struggling. The Buckinghamshire County Council (BCC) Adult Social Care service had also been doing well, particularly the Re-ablement service, which provided packages to enable people to live independently in their homes after leaving hospital. L Hazell offered to provide an update report if required. The Chairman added that Buckinghamshire Healthcare Trust (BHT) had planned well and coped better than some other areas. A lot of A & E staff had been off sick which had increased the pressure but the situation was improving.
- A member of the Committee asked what was being done to help people in their 60's become more resilient as the care packages provided now were not sustainable in

the future. L Hazell explained that the Adult Social Care Service was working with Public Health and was confident that changes would be seen.

It was asked whether L Hazell could provide assurance that domiciliary care providers would not undertake the practice of “clipping”, i.e. reducing the time spent with the client. L Hazell had not heard of the term and had not received any feedback that this was happening and agreed to find out.

Ms J Bowie, Director of Joint Commissioning, had provided the following update after the meeting.

#### Post Meeting Note

*Locally, BCC referred to a practice called “call cramming” and work had been taking place with our providers to stop this occurring. BCC commissioned domiciliary care with our main providers on a time and task basis with allocated hours for this work. The actual hours of care delivered were reconciled with the commissioned hours over 4 week periods. Any complaints received that visits had been significantly shorter than planned were investigated. Care workers were generally paid for the hours of care they delivered so there was no personal incentive to shorten the visit times.*

- L Hazell did not know how many older people were readmitted to hospital and agreed to report back. Ms Bowie had provided the following update after the meeting.

Post meeting note:

*Readmissions to hospital after 30 days stopped being routinely monitored nearly 5 years ago so there were no current national comparisons of rates. However local Buckinghamshire system figures showed a slight upward trend.*

<i>Financial Year</i>	<i>Re-admissions</i>
2014/15	1,551
2015/16	1,589
2016/17	2,229
2017/18 YTD	1,821

*The number of readmissions for 2017-18 was for year end to date but if the number reported in Q4 of this year was consistent with Q4 averages from previous years the full year outturn for 2017/18 would be slightly higher than 2016/17*

- It was confirmed that partnership work with the Clinical Commissioning Groups (CCGs) was integral to cope with the extra demand due to the forecasted increase in the population.
- Work was continuing on the provision of respite care.
- L Hazell agreed that care homes were closing in some cases due to lack of funding and that it was a national issue. Prices had been checked and found to be competitive with other authorities. People were placed in care homes outside of the county on occasion if need be. Families were always consulted in order to deliver their needs wherever possible.

## 6 CHAIRMAN'S UPDATE

The Chairman updated that following the last meeting, he had assigned a RAG status to the recommendations made in the Adults with learning disabilities inquiry and met with the officers to raise some of the concerns about some of the recommendations. An update had

been attached under the information item.

Following discussions at the last meeting, the Chairman advised he had also assigned a RAG status to the recommendations in the Hospital Discharge Inquiry and this had also been attached under the information item.

#### **Forthcoming events:**

- There would be a BHT Board meeting in Aylesbury on 31 January 2018. Mr N Dardis, Chief Executive of BHT, would be leaving on 16 March due to a move to Frimley Park Hospital and Mr N Macdonald would be taking over as interim Chief Executive.
- Evidence gathering for the Child Obesity Inquiry would start on 6 February 2018. A private briefing was taking place after the HASC meeting today with the Inquiry Group and members of the Public Health team.

### **7 COMMITTEE UPDATE**

Committee members provided the following updates:

- Mr M Hussain had recently visited the dementia tour bus in High Wycombe. The process was two hours in total and he had spent five minutes on the bus wearing headphones, glasses and special shoes to enable him to experience how someone with dementia felt; Mr Hussain said he found it extremely enlightening.
- Ms T Jervis, Healthwatch Bucks, updated that Healthwatch Bucks would be attending all the BHT engagement events on community hubs. The Chairman asked that the information be circulated to the Committee Members.

**Action: Ms Wheaton**

### **8 PUBLIC HEALTH**

The Chairman welcomed Mr N Brown, Cabinet Member for Community Engagement and Public Health and Dr J O'Grady, Director of Public Health.

Mr Brown declared an interest as his daughter was a nurse at Frimley Park Hospital and confirmed the nurses were working extra shifts to cope with the winter pressures.

Mr Brown reported that the Public Health team was leading the work stream on the social care transformation plan. Mr Brown stressed the importance of engaging with older people before their situation became a crisis. The Public Health team were very involved in prevention and the prevention at scale pilot to try to keep people healthy for longer.

Dr O'Grady provided a brief overview of the presentation in the agenda pack and made the following points:

- A core value for Public Health was to improve the wellbeing of the population and narrow the gap in healthy life expectancy between different residents in the community.
- 25% of health was due to health care received, the rest was due to wider determinants of health.
- What happens before you were born affected your life as a child and an adult. It affected education prospects, health and chances of success. Public Health worked across the life course and looked for opportunities everywhere to improve people's health and wellbeing.



The following comments were made in response to questions from the Committee.

- In response to a query on how people were helped to maintain their wellbeing and resilience, Dr O’Grady replied that the main drivers for health were the environment, personal resilience, good mental wellbeing and physical health. The critical group was the 40-65 year olds. If someone was healthy in mid-life there was an increased chance of ageing without frailty and dementia. Dr O’Grady advised that NHS Health checks were available for everyone eligible in that age range (a person was eligible if they did not already have a condition such as high blood pressure or diabetes as they would already be being looked after). The rate of take up for the NHS Health checks was approximately 45-48% which was similar to other counties. The GP surgeries called people in on a five year rolling basis and Health checks were also available in outreach services. There was also the lifestyle service which provided a range of services such as smoking cessation and weight management.
- Public Health was one of 15 local authorities taking part in a national pilot called “Prevention at Scale”. The aim was to get the message out to people in the community.
- Dr O’Grady agreed it was important to maintain the activity groups and make them sustainable as they were often in areas where they were most needed.
- Teaching school children about healthy eating and ensuring healthy options were available at food outlets would help prevent childhood obesity. Mr Brown added that the High Wycombe foodbank wanted to include fresh food but realised they would have to teach cooking and that was now in place.
- Public Health England was responsible for working with the government to lobby food manufacturers to produce healthier food.
- Some local authorities had managed to limit the density and proximity of fast food outlets but it tended to be a voluntary code.
- Dr O’Grady was asked to explain about the work Public Health was undertaking with the district councils and other health partners.
  - There was a Healthy Communities Partnership (HCP) which consisted of members from each of the district councils, the NHS and Public Health. The HCP sat under the Health and Wellbeing Board (HWB) which had a wide representation of organisations.
  - A lot of work had taken place with the District Councils on the physical activity strategy.
  - A themed workshop on health and wellbeing had taken place with Public Health, the Clinical Commissioning Groups, District Councils and Youth Services.
  - The District Councils were also on the steering group of the community organising project in High Wycombe.
  - The next Director of Public Health Annual Report would be on how we build health and wellbeing into the built and natural environments.
  - Dr O’Grady offered to take representatives from HASC to visit the Bicester healthy new town along with the district council representatives on the HWB. The Chairman said it was essential that HASC was represented.

**Action: Dr O’Grady**
- The key challenges facing Public Health were:
  - To help communities to be healthy.
  - There would be less money available for an ageing population who was not

- ageing healthily.
- Mental health and wellbeing in a very changing world; national campaigns would be needed.
- In response to a question about how to measure the success in changing lifestyle, Dr O’Grady made the following points:
  - A risk factor in low birth weight babies was smoking in pregnancy which could be easily monitored. A prematurity clinic had been set up to prevent early births and children were measured in early years to check their development.
  - There were national surveys on physical activity with 2,000 people in Buckinghamshire included in the sample.
  - Admissions to hospital relating to self-harm and alcohol related conditions were being studied.
  - Smoking cessation was a non-mandatory service but was cheap to run and there had been very good quit rates.
  - The weight management service was another non-mandatory service but was very effective.
  - The lifestyle services had been halved in order to protect mandatory services such as substance misuse and sexual health services.
  - 80% of the Public Health budget was spent on mandatory services and 20% on other non-mandatory services such as domestic violence and children’s services.
- Marketing had to be smart.

The Chairman thanked Mr Brown and Dr O’Grady for attending.

## **9 DEMENTIA SERVICES**

The Chairman welcomed L Hazell, Cabinet Member for Health and Wellbeing and Jane Bowie, Director of Joint Commissioning, Adult Social Care and Maxine Foster, Commissioning Manager, CCG.

L Hazell advised that due to increased numbers of people diagnosed with dementia, working together with the CCGs and Public Health was essential.

Ms J Bowie reiterated that there had been joint working between the CCGs and public health and social care. There was a three year dementia strategy with five key themes:

- Improved Diagnostic Pathway and Diagnostic Rate
- Dementia Awareness
- Personalised Support and Independent Living
- Pre –Crisis Support
- Young Onset Dementia

There was a joint dementia board overseeing the implementation of the strategy and looking at an all aged mental health strategy to build on the work on dementia services.

The following points were made in response to questions from the Committee:

- Ms Bowie was asked what was meant by one of the challenges being around “Changing prioritisation of the importance of an early diagnosis”. Ms Bowie said there were two aspects:
  - The residual view of what was the value if there was no cure. However, it was important to be diagnosed in order for interventions to be put in place and for family and friends to be able to make adjustments.
  - Focussing on the GP practices to improve and maintain their diagnosis rate. Work had also taken place with Oxford Health Trust to provide capacity.

- One of the barriers to early diagnosis was identifying onset of dementia in young people. For people in their 40's the condition affected a different part of their brain and it was difficult for clinicians to formally diagnose dementia. It could take up to five years for someone to receive a diagnosis of young onset dementia.
- For older people there was the stigma attached to the fear of having dementia diagnosed which could result in the loss of their driving licence and higher travel insurance costs.
- Ms Bowie confirmed the aim was for people to tell their story once but said that it was not always everyone's experience. Feedback was that professionals were not joined up in every case or shared best practice. Ms Bowie agreed this needed to be addressed and improved. There were some blockers on sharing information but there were mechanisms which could be used to overcome the blockers.
- Ms Bowie said she was happy that the adult social care assessment dovetailed with the mental health trust and a structured and legally compliant process was followed to determine when a person should have their liberty denied due to dementia.
- Ms Foster provided an explanation on why all the GP practices in Chiltern CCG were dementia friendly but not all of Aylesbury Vale CCG was dementia friendly. The difference was because there was a Quality Improvement Scheme in Chiltern CCG in 2016 to promote dementia and early diagnosis. There were currently six practices working towards becoming dementia friendly within the Aylesbury Vale CCG.
- Ms Bowie confirmed that there was an overarching strategy board with officers from adult social care and the CCGs and that data sets were routinely used to develop the work.
- Ms Bowie offered to find out the percentage of BCC staff who had received the dementia awareness training.

**Action: Ms Bowie.**

- In response to whether it would be beneficial to make a whole system presentation to the Local Area Forums (LAFs) to gain greater community involvement due to the end of the funding of the BCC project officer for Dementia Friendly Communities; Ms Bowie replied that they had looked at capacity within the Prevention Matters team and were working with the LAFs and Community Links Officers to see how support could be provided to individual areas.
- Ms Foster said there were a number of reasons for the stigmatisation of dementia:
  - There was not a word for dementia in some languages.
  - The cultural aspect was different within black, ethnic minority (BME) groups; however, those born in the UK, who were now supporting elderly parents, had a better understanding of dementia.
  - In some cultures people thought of their relative with dementia as "possessed".
  - There was a wide belief that having dementia meant you would go mad which was not the case.
- Ms Bowie added that there were dementia champions in the communities who were good examples of people with dementia living independently.
- Some memory clinics were delivered by the Alzheimer's Society and they did outreach work in the community.
- Ms Foster explained that there were two different types of memory clinic:
  - A memory support service which was county-wide and did a lot of outreach work.
  - Memory clinics which were delivered by Oxford Health.
  - The majority of dementia diagnosis' were provided by a memory clinic.
- Investment had been made for five memory clinics in GP practices across the county and these had been very successful in de-stigmatising the situation.
- L Hazell suggested inviting the Dementia Support Service to a Member briefing to help promote the dementia services.
- A tool called "DiADem" had been developed for more complex cases and was being used to diagnose patients in care homes.

- Ms Bowie said the team had projections on future numbers of dementia sufferers across the age ranges and that there were a number of strategies within Public Health to improve people's health and wellbeing and enable people to live well in the community. Public Health was working with housing to help people stay in their own homes and the Quality in Care team was making sure providers were aware of people's needs.
- In response to being asked where the budget would come from to provide for the rise in the number of dementia sufferers, Ms Bowie advised that a Green Paper was due in summer 2018 on social care. Review of resources for the health service was under consideration and any opportunities for consultation would be taken up.
- Ms Bowie agreed that some aspects of dementia could be offset if actions such as learning a new skill or keeping active were taken.
- L Hazell added that the strategies would be in place to keep the numbers down. The level of understanding and the number of people with dementia had changed dramatically over the last few years.
- The Care Quality Commission (CQC) regulated the care homes and provided the designation of whether the home was a residential, dementia or nursing home. The CQC carried out inspections to ensure care homes had performed to meet the registration standards.
- The BCC Quality in Care team provided dementia workshops to provide training to care home providers.
- BCC monitored the contracts with the providers.
- The electronic app DiADem was launched two years ago and was available for GPs to download.
- Work was taking place to overcome problems in sharing information with partners.
- The Quality in Care team monitors use of the DiADem app in care homes.
- The memory support service had carried out 140 screenings in care homes.
- Approximately 62-64% of GP practices were using the DiADem app. However, GP practices had different operating systems within a practice which made it very difficult to actually collate data from the different sources.
- Ms Bowie agreed to keep the HASC informed of the Mental Health Joint Commissioning Strategy consultation and for one of the members of HASC to be involved in the consultation.
- The POPPI database was a national database which was established about five years ago. A complex algorithm was used to produce the data which changed dependent on national research. The algorithm was brought in line with the NHS algorithm in 2016.
- Ms Bowie confirmed that respite care and support was offered to carers of people with dementia.

The Chairman thanked L Hazell, Ms Bowie and Ms Foster and for their attendance.

## **10 COMMITTEE WORK PROGRAMME**

The Chairman asked the Members to note the following items on the work programme for the meeting in March:-

- Mental Health
- Direct payments – to be confirmed

The Chairman asked for any other suggestions to be fed back to Ms Wheaton.

## **11 INFORMATION ITEMS**

The Chairman advised on the following items for information:

- **BOBW STP** – The Chairman and Ms Wheaton would be attending a meeting in Reading in March to gain an update.
- **Adults with Learning Disabilities** – update from the Service following the 12 month recommendation monitoring exercise

**Hospital Discharge** – table showing the 6 month RAG status assigned following the last meeting.

## **12 DATE AND TIME OF NEXT MEETING**

Tuesday 20 March 2018 at 10.00 am.

**CHAIRMAN**

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**Buckinghamshire County Council**  
**Select Committee**  
 Children's Social Care and Learning

# Minutes

## *CHILDREN'S SOCIAL CARE AND LEARNING SELECT COMMITTEE*

Minutes from the meeting held on Friday 2 February 2018, in Mezzanine Room 1, County Hall, Aylesbury, commencing at 10.30 am and concluding at 12.50 pm.

This meeting was webcast. To review the detailed discussions that took place, please see the webcast which can be found at <http://www.buckscc.public-i.tv/>. The webcasts are retained on this website for 6 months. Recordings of any previous meetings beyond this can be requested (contact: [democracy@buckscc.gov.uk](mailto:democracy@buckscc.gov.uk))

### **MEMBERS PRESENT**

Mrs A Cranmer (In place of Mr A Collingwood), Mr D Dhillon (Chairman), Mr M Hussain, Mr P Irwin (In place of Mrs L Sullivan), Mr S Lambert, Mrs W Mallen, Mr R Reed (In place of Mrs I Darby), Mr B Roberts, Ms J Ward (Vice-Chairman), Ms A Wight (In place of Ms K Wood) and Mr G Williams

### **CO-OPTED MEMBERS PRESENT**

### **GUESTS PRESENT**

Mrs A Dass, Mr M Farrow, Julia Wassell and Mr W Whyte

### **OFFICERS PRESENT**

Miss L Dale, Mr P Dart, Ms J Tisbury, Ms S Turnbull and Mr T Vouyioukas

### **1 APOLOGIES FOR ABSENCE**

Apologies had been received from:

- Mr A Collingwood
- Mrs I Darby
- Mrs L Sullivan



- Mrs K Wood

Substitutes present were:

- Mrs A Cranmer for Mr Collingwood
- Mr R Reed for Mrs Darby
- Mr P Irwin for Mrs Sullivan
- Mrs A Wight for Mrs Wood

## **2 DECLARATIONS OF INTEREST**

Ms A Wight declared to the Committee that she was a Member of the Corporate Parenting Panel.

Mr G Williams declared to the Committee that he was also a Member of the Corporate Parenting Panel and was present during the Cabinet meeting on 8 January 2018 as a deputy.

Ms J Ward informed the Committee that she was a Member of the Aylesbury Vale District Council.

Mr Irwin declared his work with the Waddesdon Children Centre with a devolved service.

Mr S Lambert declared that he was a former board member with the Quarrendon and Bearbrook Children's Centres and his role as District Councillor for Aylesbury Vale.

Mr D Dhillon declared his former position on the advisory board of the Farnham Common Children's Centre.

Mr R Reed declared that he was the former Chairman of the board for Denham Children's Centre.

## **3 CHAIRMAN'S INTRODUCTION**

The Chairman welcomed the public attending the meeting and those following the webcast.

The Chairman noted that, although the meeting would be held in public, it was not a public meeting and therefore there would be no questions from the public. He then went on to provide an explanation of how the committee meeting would be conducted.

## **4 VALIDITY OF THE CALL-IN**

The Chairman welcomed Ms S Turnbull, Head of Democratic Services and Deputy Monitoring Officer to the meeting.

Ms Turnbull confirmed her advice that the call-in was valid and that Members should hear evidence from both parties.



## 5 CALL-IN REQUEST SUBMISSION

The Chairman welcomed Julia Wassell (County Councillor) who introduced her supporters and witnesses: Mr M Farrow (County Councillor), Mr M Knight (District Councillor) and Mrs A Dass (Member of the Public). The group were advised that they would have 20 minutes in which to present their case followed by questions from the Committee.

Julia Wassell opened with a presentation and made the following key points:

- There was a legal requirement for a proper consultation.
- There were three reasons why the decision process was flawed: a faulty consultation; shortcoming in the pre-scrutiny process and a failure to properly engage individual local Members.
- The consultation was misleading which lead to invalid results
  - The first phase of the consultation started on 14 July until 22 September 2017.
  - Subsequently additional information was made available to the public on 4 September 2017 because of feedback from members of the public who expressed confusion over the proposals being outlined in the original consultation document.
  - The deadline was then extended until the 16th October.
- People who responded to the first phase were then also able to respond in the second phase, therefore the final results would not reflect public opinion should voters have changed their minds as a result of the revised, additional information.
- Respondents in the first phase were not asked for their contact details so it would not have been possible to notify them of the additional information provided from 4<sup>th</sup> September.
- The additional information provided in the consultation was the first time there had been a reference to the reduction of 35 Children's Centres into 9 hubs. The initial consultation document was misleading and those who completed the first phase of the consultation should have had the information on Children's Centres on which to base their opinion.
- There should have been a question relating to how recently families had used the Children's Centre.
- The question numbers in the report did not relate to the actual questionnaire which was misleading and called the report into question.
- Page 250 of the Cabinet report from 8 January stated that access and availability was among the most important considerations but it was not clear what this referred to.
- There was a legal duty to consult when closing Children's Centres and it was not clear from the consultation that this was part of the redesign of Early Help.

Julia Wassell then handed over to her witness Ms A Dass to present her case to the Committee, the following points were made:

- Having spoken with users and staff members, Ms Dass had received feedback that the consultation document did not make it clear that the proposal was to lose services. Instead, the users and staff members believed that the 9 hubs were going to be an additional service.
- The consultation was deliberately vague, heavily biased and not clear.

- It was not explicitly clear that children's centres were under threat of closure

Julia Wassell then went on to outline the next point of her case which was the failure to properly scrutinise the decision during the meeting of the Children's Social Care and Learning Select Committee on 17 October 2017. This was also the day after the consultation ended so members were not privy to the final outcome. Ms Wassell explained that: The time frame did not allow a proper challenge from the Select Committee for the proposals.

Julia Wassell outlined how in her view the consultation had been inadequate in engaging local Members, Local Area Forums and other stakeholders. She explained that:

- In the report template for the Cabinet decision, section H entitled 'Feedback from consultation and local Members views'. The document states in bold that this particular section must be completed in full otherwise the report cannot progress for the decision to be taken.
- Section G has been deleted from the Cabinet report from 8 January 2018.
- Only three of the 19 Local Area Forums had received a briefing on the Early Help Review.
- There was no summary of local Member views and Members had not been fully briefed or fully engaged.
- Some stakeholders had shared concerns but the Cabinet Member had not responded to these fully.
- There had been no audit of the work carried out at the Buckingham Children's Centre and no mention of the hubs in phase 1.
- There had been a failure to define what the hubs would be, which caused confusion.
- Many stakeholders would be let down by the proposed closures and letters had been received from Children's Centre advisory groups, schools and Local Members expressing deep concerns about the proposed closures. These had been shared with the Cabinet Member who had responded to this.  
Other concerns raised were
- in relation to being able to deliver services in a confidential environment should the Children's Centres close; and Point 6 in the Cabinet report from 8 January 2018 analysed that one of the reasons for the rise in demand was the reduction in universal services which would call in to question what was being proposed. (*'...The reasons for these increases in demand are complex, but include demographic changes and pressures and reductions in universal services provided by the Council and other partners.'*)

Julia Wassell then handed over to Mr Farrow to present his evidence. The following points were noted:

- In light of the recent Ofsted report, more time should have been taken to consider the findings. Despite the £3.3M savings from closures which had been reported in the Early Help for Children and Families paper presented to Cabinet on 8 January 2018, the decision was short sighted and it appeared that no work had been done to explore other possible improvements in service delivery.

- A study commissioned by Oxford University showed that the outcomes for children from poorer socio-economic backgrounds were compromised when Children's Centres were closed.
- The £3m of savings the Council was aiming to achieve would lead to deterioration in outcomes for children and therefore an increase in future cost. The Local Authorities that were used as best practice examples were not comparable to Buckinghamshire. North Lincolnshire had an Ofsted rating of 'outstanding' and had retained their Children's Centres.
- No other Local Authority used a 2 stage consultation process.

Mr Farrow handed over to Mr Knight who made the following points:

- The Cabinet report stressed that resources would be prioritised in areas where there would be the greatest need. However there was no indication of what the strategy would be in order for this to happen.
- When the contract for Children's Centres changed from Bernardo's to Action for Children, Mr M Appleyard visited the Centres and spoke with parents. This has not happened with the Early Help review.
- The Children's Centres in Mr Knight's District were underfunded. One of the Centres was being run by a voluntary group. Centres had become run down with staff feeling unsupported. This was a sign that these Centres were not being run well.
- The services provided by the Children's Centres were being reduced without consultation and the Advisory Boards were not attended by the public or local Members.
- Mr Knight had heard about the Early Help Review Consultation from Julia Wassell.

Julia Wassell then summarised the case made by her group as follows:

- The consultation was flawed by the additional information provided part way through. The results therefore would be skewed. In addition to this, there had not been proper analysis on the results presented in the corresponding Cabinet report which was therefore inaccurate and misleading.
- The proposals had not been fully scrutinised or challenged and the concerns raised had not been fully addressed.
- There had been insufficient direct consultation with local County Council Members.
- There had been a lack of transparency and accountability around the financial implications.
- Areas with high levels of deprivation and pockets of deprivation had not been given sufficient attention.

The group therefore requested that the Committee consider the following actions to be undertaken by the Cabinet Member:

- The consultation to be re-run with clearer information and more input from the Children's Centres
- An audit to be completed of the Children's Centre staffing and services including outreach work.
- Further engagement to take place with Local Members and, in particular, those with Children's Centres in their district.

- Written feedback to be recorded from key stakeholders, schools, charities and service users.
- Proposals to be provided for alternative uses and re-provisioning of the buildings.

Ms Dass asked the Committee on behalf of parents to consider the request to complete the Consultation properly.

The Chairman thanked the group for their presentation and invited Members of the Select Committee to ask questions. Questions were asked on the following issues:

- Clarification on the information missing from the Cabinet report in regard to consultation responses.
- Details of local member engagement and briefings that had taken place.
- The extent to which consultation flaws would undermine the validity of the decision.
- Questions on the future of Micklefield and Disraeli Children's Centres and how these, and other centres, could be run better.
- The clarity of information to the public and whether there was confusion about the terms 'Early Help Review' and 'Family Worker Model'.
- The phasing of the consultation and approach to this.
- The number of responses to the consultation in comparison to the petition numbers.
- The safeguarding issues and need for confidential meeting space in the new proposals.
- The extent to which deprivation had been sufficiently considered.
- The nature/status of the 'hubs' and if they were service delivery points or office bases.

The Chairman thanked the group for their presentation.

Julia Wassell thanked the Committee for their time and questions.

## 6 RESPONSE TO THE CALL-IN

The Chairman welcomed Mr W Whyte (County Councillor) who introduced his supporting officers: Mr T Vouyioukas (Executive Director, Children's Services), Mr P Dart (Programme Director – Change for Children) and Ms J Tisbury (Project Manager – Early Help). The group were advised that they would have 20 minutes in which to present their case followed by questions from the Committee.

Mr Whyte made the following key points in his presentation, in response to the written call-in request made by Julia Wassell:

- **Response to point 1:**  
Research had identified the key issues that were driving demand for children's services. Using advice and guidance, such as the Early Intervention Foundation, the view that the Troubled Family Outcome Measures were appropriate had been confirmed and these measures would be an appropriate delivery method. The Early Help Strategy contained other existing measures.

- **Response to point 2:**  
The Equality Impact Assessment (EIA) was detailed and clear that the new service would provide enhanced outreach to families finding themselves in difficult situations.
- **Response to Point 4:**  
As a corporate parent the County Council had a duty to make sure that Children's Services were as effective as possible with the resources available.  
When the consultation started, Mr Whyte e-mailed all Members with details of the consultation and invited them to submit any questions.  
All Member briefings were unfortunately poorly attended.  
Members had the opportunity to present information on the Early Help Review at Local Area Forums.
- **Response to Point 5:**  
Mr Whyte reiterated that workers had the discretion to meet in a place that would be agreed by the families.
- **Response to Point 6:**  
Under the new model, families would engage with one professional rather than speaking to a number of staff at different agencies to receive support.
- **Response to Point 7:**  
From mid-October Mr Whyte authorised formal fact-finding discussions with a number of sites, including schools, to consider how the Local Authority might make better use of the Children's Centre sites and service provided.  
Cabinet report recommendation 2 was a direct result of the consultation process.
- **Response to Point 8:**  
It was acknowledged that the initial consultation document was too high-level about the proposed outcomes and this was clarified later in the second stage.  
The design of the new Early Help model would make it easier for workers to engage with families in areas of deprivation.
- **Response to Point 9:**  
The consultation responses showed the importance people place on buildings as focal points for communities. The Early Help model was not a building specific service and would make use of community facilities.  
The Cabinet decision authorised discussions over the next 6 months to explore how buildings could be re-purposed.
- **Response to Point 3:** While it was accepted that the consultation could have been clearer, it was evident from the representations received from the press and members of the public that there was an overall understanding of the proposals.

Mr Whyte confirmed that he was confident that the consultation process was robust and representative of the public's views. Mr Whyte reiterated the importance of recommendation 2 in the Cabinet report from 8 January 2018 that said that discussions would be held with key stake holders in relation to the utilisation of the Children's Centre buildings.

An in depth discussion took place regarding the work that had been done to engage the public in the consultation process, in particular with low-engagement families.

Mr Dart referred Members to page 10 of the consultation report which explained the actions taken to ensure maximum engagement. This included promotion through the Children's Centres, Buckinghamshire Family Information Service, Schools and published articles. Mr Dart went on to explain that:

- In terms of the 2 phases of the consultation and the subsequent responses, the consultation report articulated the differences between the levels of agreement. Additionally Local Government Association guidance on how local authorities consult advised about evolving the consultation if required.

An in depth discussion took place in relation to engagement with the Local Area Forums. During which it was noted that all Members were contacted and as such the Local Area Forum Chairmen would have had the opportunity to present the consultation to the Forums. It was noted that the timing of the consultation meant that the information would not have been provided to all Local Area Forums.

In response to questioning, Mr P Dart went into further detail about the Local Government Association guidance on running a good consultation and the steps taken in order to ensure compliance with this guidance.

An in depth discussion took place on the efforts that went in to ensuring that respondents at the first stage were contacted at the second stage to inform them of the new information and to encourage them to respond again.

It was confirmed that all recipients on the mailing list were emailed at both stages. The following points were made:

- The public's awareness and the response to the consultation in comparison with the number of signatures on the 'Save Buckinghamshire's Children's Centres' petition.
- Attendance levels at briefings and engagement in relation to the consultation.
- The best practice of at least 15 other Local Authorities was evaluated in order to achieve the best coverage from the hubs and decide on the location and the number. The initial number of 9 hubs was not definitive and Mr Whyte would be guided by officers should this require further review.

Mr T Vouyioukas informed the Committee that the Early Help models that had been evaluated as part of the compare and contrast exercise had taken into consideration statutory guidance written in April 2014 which talked about targeted interventions for families with the highest need. Although the current Children's Centres were highly regarded they were not necessarily offering a targeted service to those families who needed support the most.

The Chairman thanked Mr Whyte and his supporting officers for their presentation and response to Members' questions.

## **7 COMMITTEE DELIBERATION**

The Chairman invited Members of the Committee to share their views on the evidence which they had heard, with a view to deciding whether to reject the Call-in request or to refer the decision back to Cabinet for reconsideration.

**RESOLUTION**

**The Committee voted on whether to accept the call-in request and refer the decision back to Cabinet. The Committee by majority voted against this resolution and therefore rejected the call-in request.**

**8 DATE OF NEXT MEETING**

6 February 2018, 10.30am, Mezzanine Room 1, County Hall

**CHAIRMAN**

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**Buckinghamshire County Council**  
**Select Committee**  
Children's Social Care and Learning

# Minutes

## *CHILDREN'S SOCIAL CARE AND LEARNING SELECT COMMITTEE*

Minutes from the meeting held on Tuesday 6 February 2018, in Mezzanine Room 1, County Hall, Aylesbury, commencing at 10.31 am and concluding at 12.45 pm.

This meeting was webcast. To review the detailed discussions that took place, please see the webcast which can be found at <http://www.buckscc.public-i.tv/>  
The webcasts are retained on this website for 6 months. Recordings of any previous meetings beyond this can be requested (contact: [democracy@buckscc.gov.uk](mailto:democracy@buckscc.gov.uk))

### **MEMBERS PRESENT**

Mr A Collingwood, Mrs I Darby, Mr D Dhillon (Chairman), Mr M Hussain, Mrs W Mallen, Mr B Roberts, Mrs L Sullivan, Mr G Williams and Ms K Wood

### **CO-OPTED MEMBERS PRESENT**

Mrs M Aston and Mr M Moore

### **GUESTS PRESENT**

Mr M Appleyard and Mr W Whyte

### **OFFICERS PRESENT**

Mr J Fowler, Ms L Nankin and Mr T Vouyioukas

### **1 APOLOGIES FOR ABSENCE**

Apologies were received from Mr D Babb, Mrs J Ward and Mr S Lambert.

### **2 DECLARATIONS OF INTEREST**

There were no declarations of interest.



### **3 MINUTES**

The minutes of the last meeting of 5<sup>th</sup> December 2017 were agreed as a correct record and signed by the Chairman.

Mrs I Darby asked that the Membership of the permanent exclusions inquiry be updated following some changes to Committee Membership.

### **4 PUBLIC QUESTIONS**

A public question had been received after the deadline for this meeting, The question would be taken at the next meeting on 27<sup>th</sup> March 2018.

### **5 CHAIRMAN'S REPORT**

The Chairman informed the Committee that the first evidence gathering session for the Permanent Exclusions Inquiry had taken place and that he had been interviewed by Ofsted as part of their inspection of Children's Services.

### **6 COMMITTEE MEMBER UPDATES**

Mrs W Mallen had visited her local Children's Centre.

Mr A Collingwood had spoken to users of his local Children's Centre and was meeting with the Cabinet Member for Children's Services to discuss further.

Mrs M Aston emphasised the importance of ensuring sufficient outreach workers to support vulnerable people as part of the new Early Help service.

### **7 CABINET MEMBER QUESTION TIME**

The Chairman welcomed Mr M Appleyard, Cabinet Member for Education and Skills to the meeting.

Mr Appleyard explained the current position around the performance of the Educational Psychology Service.

Members sought clarification and assurance on the following:

- Current resourcing and recruitment of permanent staff .
- Timescales for undertaking assessments and completing Education and Health Care Plans (EHCP).
- Support for pupils prior to an assessment for an EHCP.
- Monitoring of the action plan.

In response, Mr Appleyard explained the following:

- The Service was on track to have all Special Educational Needs statements converted to Education and Health Care Plans (EHCPs) by the 31<sup>st</sup> March 2018.
- There was a backlog of 20 old educational psychology assessments required to complete new Education and Health Care Plans which would be completed by the end of April. After that, the Educational Psychology Service expected new assessments for EHCPs to be processed within the 6 week statutory timescales. There were currently sufficient staffing resources to deal with this work.
- The focus for the service was for children and young people to receive the right support early to prevent the need for an EHCP.
- Educational attainment of pupils was published by the Department for Education each year.

## 8 OFSTED INSPECTION

The Chairman welcomed Mr W Whyte, Cabinet Member for Children's Services and Mr T Vouyioukas to the meeting.

Mr Whyte and Mr Vouyioukas explained the outcome of the recent Ofsted Inspection of the Council's Children's Services.

Members asked questions and sought assurance around:

- The work of the improvement board since the last inspection in 2014.
- The findings of the inspectors' case audit work.
- The quality of case work.
- Staffing and recruitment and retention issues.
- The reasons for the apparent slow pace of improvement since 2014.
- Cases of children being left in potentially risky situations for too long.

In response Mr Vouyioukas explained that:

- The Improvement Board, working with the Council and its partners, had been satisfied that systems were in place that would show improvement in the service. However during the inspection Ofsted were concerned about a number of cases they had audited.
- Although the current judgement remained the same, Ofsted identified some improvements since the 2014 inspection.
- There was an internal process of auditing to ensure good casefile quality.
- Quality issues identified by inspectors on some casefiles related to a lack of:
  - promptness of decision making,
  - risk assessments and
  - timely and measurable interventions.

However there were also some examples identified of very good practice.

- One area of the service had higher caseloads and staff turnover than others and it was the intention to replicate good practice from elsewhere in the service to areas where there were issues.
- Of the cases that inspectors had audited, none had been identified as having the highest level of concern (requiring immediate action). Issues identified were around drift and delay. All issues identified were addressed during the inspection.
- The service would learn from the cases that Inspectors had identified issues with and use the internal quality assurance process to develop action learning sets to ensure improvement. External checking would also be used to supplement the internal quality assurance programme.
- There had been positive feedback on the service for foster carers although more in-house foster carers needed to be recruited.

Mr Whyte explained that:

- Although the overall judgement had not changed, there had been some positive changes within the service since the last inspection, although the pace of improvement was too slow.
- There had been good progress on staff recruitment and retention but it would take 6 to 12 months to see outcomes as new staff progressed.
- Occasionally agency staff had to be brought in because of a need for certain expertise and this meant that some children experienced a higher number of social workers working with them than the service would like.
- There was data available on staffing and turnover which could be shared with the Committee.

**Action: Committee and Governance Advisor**

- Children and young people were now members of the Corporate Parenting Panel which was important so that children and young people could share their views directly with the service.

## **9 VOICE OF THE CHILD AND YOUNG PERSON INQUIRY - RECOMMENDATIONS.**

The Chairman welcomed:

- Mr J Fowler, Youth Service Manager
- Ms E Dover, Youth Worker
- Robin, Guest Young Person
- Laura, Guest Young Person
- Annabelle, Guest Young Person
- Eve, Guest Young Person

Mr Fowler introduced the item and explained that a task and finish group would be set up to progress recommendation 4 further.

The young people introduced themselves and in response to Members' questions explained the following:

- The Mind Of My Own (MOMO) App was a good thing to help children and young people get their voices heard but publicity about the app and take up needed to be higher.
- The Special Educational Needs and Disabilities (SEND) Youth Forum was well attended and a good opportunity for children and young people to get their voices heard either individually or through a representative.
- A website for young people should be improved to make it easier to find information and an area where children and young people could easily find what had happened as a result of their feedback. (You Said, We Did).
- An improved website would need to be well publicised to all young people so that they could get their voice heard.
- Children and Young People were involved regularly on the interview panels when recruiting staff to Children's Services.
- There had been improvements in the service that children and young people received from GPs and Child and Adolescent Mental Health Services (CAMHS) because of work completed by the CAMHS Article 12 young people's participation group and members of the SEND Youth Forum and Youth Voice.
- The CAMHS website was a good example of what a website could look like and this had been improved after input from children and young people.
- The young people present felt that their voices were being heard and that they could identify changes that had happened as a result.

**RESOLVED: The Committee AGREED to delegate the RAG rating of the recommendations to the Chairman with the ratings being shared with the Committee and Cabinet Member after the meeting.**

## **10 PERFORMANCE REPORT - Q2 2017-18**

Mr M Appleyard, Cabinet Member for Education and Skills and Mr W Whyte, Cabinet Member for Children's Services presented their respective reports.

Mr Appleyard explained the following about the high levels of permanent exclusions:

- Projected figures were showing an expectation of fewer permanent exclusion this year than the previous year.
- It was important to address issues early to prevent permanent exclusions, which were always a last resort, and to use an holistic approach to tackle the issue.
- Examples of good practice were being shared with schools to help deal with permanent exclusions and help teachers address poor behaviour.

The Chairman explained that the Committee were doing an in depth inquiry into the issue of increased permanent exclusions.

- In response to Members questions Mr T Vouyioukas explained that performance target setting needed to take account of outcomes for children and young people.
- The educational outcomes for children looked after were not as good as the service wanted them to be, although a high percentage were attending good or outstanding schools.

## **11 COMMITTEE WORK PROGRAMME**

The Committee noted the work programme and requested that the following be considered for inclusion:

- Ofsted improvement work
- The annual educational standards report
- Issues related to home schooling

Mr Vouyioukas explained that it would be helpful for Officers to understand what outcomes the Committee were aiming to achieve from scrutinising particular work programme items.

## **12 DATE OF NEXT MEETING**

The next meeting of the Children's Social Care and Learning Select Committee was confirmed as 10:30am 27<sup>th</sup> March 2018, Mezzanine Room 1, New County Offices, Aylesbury. There would be a private pre-meeting for Members at 9:45 for a 10am start.

**CHAIRMAN**

**OVERVIEW & SCRUTINY WORK PLAN 2018-19**

Item	Annual Ad Hoc	2018			2019	
		March	June	October	January	March
Performance Indicators/Service Plans	Ad hoc					
Revenue Budget Proposals	Annual					
Capital Strategy & Capital Programme	Annual					
Treasury Management Strategy	Annual					
Chiltern and South Bucks Open Spaces Strategy	Ad hoc					
Joint Housing Strategy	Ad hoc					
Housing Developments - Viability Assessments	Ad hoc					
Report of T&F Group on MTFs	Ad hoc					
Annual Review of FoI/DP /GDPR	Annual					
Update on HS2/WRATH/Heathrow	Ad hoc					
Frimley Park Trust Update (Wexham Hospital)	Annual					
Ambulance Service	Annual					
Local Health Providers (CCG)	Annual					
Bucks Health & Adult Care Select Cmm Minutes	Every Meeting					
Bucks Children’s Social Care & Learning Select Cmm Minutes	Every Meeting					

Notes

1. All Members will receive notification of the publication of the 28 Day Forward Plans and can raise with the Chairman of O&S any items to be added to an O&S meeting agenda.
2. Budget monitoring reports will be circulated to Members of O&S Cmm in advance of Committee to allow any matters to be raised if necessary.

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