

OVERVIEW AND SCRUTINY COMMITTEE (SBDC)

Meeting - 19 June 2018

Present: M Bradford (Chairman)
P Bastiman, M Bezzant, T Egleton, M Lewis, D Saunders and
P Kelly

Also Present:

Apologies for absence: D Dhillon

55. MINUTES

The minutes of the Overview and Scrutiny Committee held on 19 March 2018 were approved and signed by the Chairman of the Committee.

56. DECLARATIONS OF INTEREST

There were no declarations of interest.

57. VIABILITY ASSESSMENTS

Members of the Overview and Scrutiny Committee received a report which set out the current arrangements on viability assessments. It also anticipated future arrangements as the updated National Planning Policy Framework (NPPF) was introduced later this year. Viability was an important part of the planning system. The existing NPPF identifies that development proposals should be capable of implementation and that local planning authorities should not impose significant burdens that would cause the proposal to become unviable.

Several larger developments in recent years have been accompanied by viability assessments. In their different ways these assessments have identified unusual site or development costs and how these costs impact on the ability of the scheme concerned to meet the usual developer contributions. Where appropriate, the Council engages specialist consultants to assess and challenge the viability assessments submitted by the developer. The District Valuer has traditionally been the Council's consultant on such matters. In certain specialist cases the Council will use planning consultants to test the cases being put forward by developers.

The emerging updates to the NPPF highlight the importance of viability in the planning process. The emerging updates to the NPPF bring a sharp focus to delivery in general and to the delivery of housing in particular. This has been compounded by the recent High Court judgment on the Parkhurst Road Limited case (London Borough of Islington) which provides greater comfort for local planning authorities on the importance of developers pursuing policy-compliant schemes.

A Member made reference to a development in his area where planning permission has been approved subject to a condition that affordable housing was made available. However, this was an expensive road in the area and it was unlikely that any families would be able to afford to live there. In response to this Members noted that once the updated NPPF has been published, a further report would be submitted to this Committee.

RESOLVED that the report be noted and that a further report be submitted to the Overview and Scrutiny Committee once the updated NPPF had been published.

58. **REFRESHED JOINT BUSINESS PLAN 2018-2020**

Members received the refreshed Joint Business Plan 2018-2019 at Appendix 1 of the report. Members expressed their thanks to the Performance and Policy Officer for the new user friendly presentation of the business plan.

RECOMMENDED to Cabinet that the refreshed Joint Business Plan be approved.

59. **2017/18 END OF YEAR PERFORMANCE REPORT**

The Committee received a report outlining the annual performance of Council services against pre-agreed performance indicators (PIs) and service objectives for Quarter 4 (end of year 2017-18).

The Quarter 4 Priority and Corporate PIs were at Appendices A and B respectively. Members noted that priority PI relating to household waste sent for reuse, recycling and composting was slightly under the target of 53% at 52.7%. Further, that some of the long-term absence cases detailed at 4.2.1 had been resolved. Through the survey feedback, it is apparent that the Licensing team were working hard to provide good customer service. However, as the response level to the survey was low officers would do more to publicise the survey the following year. Availability of ICT systems to staff was under target because of issues with vWorkspace, however these issues have now been resolved.

The Committee were advised that following the previous meeting it was being proposed that Members would receive the performance reports informally prior to committees to ensure that they received the figures in a more timely manner.

Members were pleased to note the new format of the Annual Report at Appendix C of the report.

During discussion the following points were raised:-

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- A Member referred to the Homelessness performance indicators and was pleased to see that there were now regular updates to this Committee following the recommendations made by the Task and Finish Group.
- In the Annual Report information had been provided on the 3,542 tonnes of garden waste collected in Chiltern and Wycombe and this would be amended to refer to South Bucks.
- Reference was then made to the development at Pinewood which was the highest business ratepayer in the Districts.
- A Member commented that it was difficult to control long term sickness absence but this was being managed by managers, with support from HR and occupational health. Another Member commented that there were higher sickness levels in the public sector than the private sector. The Director of Resources reported that comparative figures with other Councils of similar size were presented to the Joint Staffing Committee for consideration. A suggestion was made to revisit the sickness policy. The Director of Resources stated that the current policy was fit for purpose but that they were working with Managers to ensure that the policy was enforced effectively, for example training was being provided on this area. Another Member made reference to the health and wellbeing of staff and the importance of analysing this through the staff survey. The Director of Resources reported that manager training was also in place for this area and recent mental health sessions had been held for all staff which had been organised through MIND. A Member suggested that it would be helpful to have a further discussion on this area including what improvements were being made since the new process had been implemented and more detail on the sickness management policy.

RESOLVED that the performance reports be noted and that a further report be submitted to the Committee on the management of the sickness policy.

60. **OVERVIEW AND SCRUTINY TASK AND FINISH GROUP - DRAFT REPORT ON MEDIUM TERM FINANCIAL STRATEGY**

The Committee received the draft report of the Financial Strategy Task and Finish Group and suggested the following amendments :-

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The Inquiry Group was set up to review the Medium Term Financial Strategy (MTFS) in order to provide the Cabinet with the Group's views, following discussion with officers on how to bridge the funding gap currently identified by the Strategy. They considered the following elements and the basis of the assumptions underpinning them:-

The Group considered if any material expenditure pressures have been omitted and if other savings options could be explored.

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1. Cabinet should review opportunities to bring in revenue from advertising across all Council assets

Slide 8

1. Cabinet need to closely monitor the cost of homelessness as this is the most significant key cost pressure going forward. Measures are already in place to address historic issue.
2. Cabinet need to ensure that appropriate resources are put into preventing homelessness, as this avoids SBDC having to house families that are homeless in nightly paid accommodation. There needs to be clarity and responsibility for purchasing properties for this purpose outside existing arrangements with Housing Associations.
3. Cabinet need to address the volume of affordable housing stock by looking at opportunities through the Local Plan, and the housing numbers in the Plan. It will be important to ensure that they deliver appropriate numbers of affordable homes.

Slide 9

1. All non-statutory fees and charges should be reviewed annually, to ensure that they fully cover the Council's costs, and are in line with the average charge or higher from neighbouring authorities.
2. Cabinet should review the green waste fee, to see if there is scope to increase this.
3. Cabinet should consider having a single long term joint waste contract with all three District councils to obtain economies of scale - CDC currently have lower costs than SBDC because of the nature of their contract, which SBDC could benefit from in the future.
4. Actively explore scope to increase cemetery charges and burial capacity, including facilities for the non Christian communities and marketing these outside of the area and the use of Stoke Poges Memorial Gardens

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4. Cabinet should review underutilised car parks e.g Burnham as these assets could be more effectively used for the Council's objectives.
5. Cabinet should review the use of recycling facilities in car parks as this space could generate extra income. In addition removal of these facilities would reduce the amount of flytipping.

Slide 12

1. That further planning income should be identified through the Proceeds of Crime and administration of Section 106 agreements and CIL if introduced.
2. Once the Local Plan has been finally submitted, the Head of Planning should critically review the size of the planning policy team to ensure it is appropriately resourced to meet the (hopefully reduced) requirements going forward.

Slide 13

1. That Cabinet responds in writing to each of the recommendations made by the Task and Finish Group by the beginning of September to allow the response to be considered at the October meeting of the Committee.
2. One of the recommendations relates to a challenge/scrutiny session with Portfolio holders. This could be achieved by the Portfolio Holders discussing with O&S members their draft budgets that will be presented to the PAGs. Part of this process could include the extent to which they have taken on board the recommendations of this Task and Finish Group.
3. That the Joint Overview and Scrutiny Committee establish a Work Programme which could include a review of all Joint Service arrangements to clarify whether the project outcomes have been achieved and to monitor new joint working programmes e.g. Customer Experience Strategy and ICT Strategy.

Members asked that a slide be added on medium term financial projections.

RESOLVED that the report be submitted to Cabinet for consideration with the changes outlined above.

61. **PRESENTATION BY NHS CHILTERN CLINICAL COMMISSIONING GROUP**

Dr Sian Roberts, GP Dementia Lead and Maxine Foster Commissioning Manager, from Buckinghamshire Clinical Commissioning Group (CCG) (Aylesbury and Chiltern formally merged in April 2018) gave a presentation on dementia.

During the presentation the main points were noted by Members:-

- Dementia was defined as a decline in memory or other thinking skills severe enough to reduce a person's ability to perform everyday activities.
- There are 850,000 living with dementia and this was expected to rise to over 1 million by 2025.
- The Prime Minister challenge on dementia 2020 is to maintain a diagnosis rate of at least two thirds, increase the numbers of people receiving a dementia diagnosis within six weeks of a GP referral and improve the quality of post-diagnosis treatment and support for people with dementia and their carers.
- A dementia diagnosis will aid the understanding of care workers, family members and friends, leading to better support of the person with dementia. It can lead to more appropriate care and support, may give the person with dementia the opportunity to plan for the future and depending on the type and stage of dementia specific treatments or interventions may be available.
- 6,500 people over 65 in Bucks are probably living with dementia.
- Diagnosis can be undertaken through the Memory Clinic at Amersham Hospital, memory assessment closer to home (Denham Medical Centre) or screening in care homes.

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- A Memory Support Service was offered via Alzheimers Society. There was also support from Carers Bucks, GPs, Older Adults Community Mental Health Teams and the Dementia road map.
- There was a my life my memories project which was focusing on dementia in the different communities within the Buckinghamshire area.
- There was a mobile virtual dementia tour and living with joy workshops.

Members discussed the following points:-

- A Member referred to a local example where it was very difficult to get a referral. Another Member referred to another example and also commented that the trigger mechanism for a referral did not work. Having clarified the timescale for these issues Dr Roberts reassured Members that dementia services had changed significantly and it was much easier to get a referral. GPs now had received training on dementia diagnosis and with the help of the screening tool, the memory clinic and accessibility of services across localities this should no longer be an issue.
- In answer to a question on monitoring, Dr Roberts informed Members that the CCG commission Oxford Health Foundation Trust (OHFT) to provide Memory Assessment Services. The contract with OHFT was monitored monthly with key performance indicators (KPIs).
- They received detailed information for monitoring purposes, including on providers of services such as Older Adults Community Mental Health Teams and also looked at patient choice. Referrals were prioritised according to need but they worked towards the target of six weeks. Innovative work was being undertaken to get people to ask for help. If a patient was having difficulty in obtaining a referral they should contact their GP.
- A Member expressed concern about carers receiving information from GPs because of confidentiality. GPs were able to confirm what services had been put in place but could not disclose any personal information without the patient's consent. Reference was made to the need to obtain power of attorney in certain situations.
- In terms of the Government campaign there was recognition around the difficulties with dementia and to destigmatise the illness and raise awareness. Ideally dementia would be diagnosed and supported from an early stage – assessment was key. If patients had to be hospitalised this was undertaken locally where possible. A Member referred to the Annual Review carried out by GP surgeries and the opportunity to help identify any issues at this appointment.
- Reference was made to a project on dementia partnered by Carers Bucks which looked at the impact of their unique family intervention service on carers and families of those suffering from dementia.
- GPs in the past had felt helpless in treating dementia however there was now an education programme and support available so GPs were more confident in diagnosing dementia and referring to support services.

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- BME patients were less likely to be diagnosed as some families in different cultures were more reluctant to ask for help.
- A Member referred patients not being able to attend an appointment and there being a difficulty in rebooking appointments. There could sometimes be a disconnect between hospital and GP services and it was important that one organisation took ownership of the patient's care. Dr Roberts reassured Members that hospital appointments could be rebooked online but would clarify the rebooking of appointments with the Mental Health teams.

Members thanked Dr Roberts and Maxine Foster for attending the meeting and welcomed the excellent presentation and discussion. They asked Dr Roberts to attend a future SBDC Council meeting so that all Members could hear the presentation.

RESOLVED that the report be noted.

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

Members received the Minutes of the meeting(s) of the Buckinghamshire County Council Health and Adult Social Care Select Committee held on 20 March, 24 April and 22 May 2018

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

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

Members received the Minutes of the meeting(s) of the Buckinghamshire County Council Children's Social Care and Learning Select Committee held on 27 March and 15 May 2018.

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

64. **MEMBERS QUESTIONS AND ANSWERS**

There were no questions.

65. **WORK PROGRAMME**

The Committee considered the Overview and Scrutiny Work Programme.

RESOLVED that the Overview and Scrutiny Work Programme be agreed.

The meeting terminated at 8.10 pm