

SEDGEFIELD BOROUGH COUNCIL

HEALTHY BOROUGH WITH STRONG COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE

Sedgefield Borough Council
Council Chamber,
Council Offices

Tuesday,
11 September 2007

Time: 10.00 a.m.

Present: Councillor J.E. Higgin (Chairman) and

Councillors W.M. Blenkinsopp, Mrs. D. Bowman, Mrs. P. Crathorne,
Mrs. S. Haigh, K. Thompson, T. Ward and Mrs E. M. Wood

Mrs. M. Thompson

**Present
with
Chairmans
Consent:**

Mrs. K. Conroy

**In
Attendance:** Councillors D. Farry, P. Gittins J.P., A. Gray, Mrs. J. Gray, B. Haigh,
T. Hogan and Mrs. I. Jackson

Apologies: Councillors J. Burton, Mrs. H.J. Hutchinson, Mrs. E.M. Paylor and
J. Wayman J.P

H&S.7/07 DECLARATIONS OF INTEREST

Members had no interests to declare.

H&S.8/07 MINUTES

The Minutes of the meeting held on 26th June, 2007 were confirmed as a correct record and signed by the Chairman. (For copy see file of Minutes).

H&S.9/07 FORMAL CONSULTATION ON TEES, ESK AND WEAR VALLEYS NHS TRUST PLANS TO BECOME A NHS FOUNDATION TRUST

The Committee was informed that Tees, Esk and Wear Valleys NHS Trust was undergoing formal consultation on their plans to apply to become an NHS Foundation Trust by April 2008. The formal consultation period ran from 9 July to 29 September 2007. The Trust had invited the Council to comment on their plans. D Kerr, Project Manager for the Trust, was in attendance at the meeting to give a presentation on the Trust's proposals, and respond to Members questions. The purpose of the item was to enable the Committee to consider the proposals and respond a number of questions included in the consultation document in order to assist the Cabinet formulate a formal response to the consultation exercise.

Tees, Esk and Wear Valleys NHS Trust provided a range of mental health, learning disability and substance misuse services for the 1.4 million people living in County Durham, the Tees Valley and North East Yorkshire. The Trust employed 5,000 staff, who work from over 100 sites as well as directly into local people's homes and held an annual budget of over £200 million to provide services.

The consultation document entitled 'Making a Difference Together' outlined the Trust's plans to apply to become an NHS Foundation Trust by April 2008. (For copy see file of Minutes). The Trust was not consulting on becoming a Foundation Trust (FT), as that was Government Policy, but were seeking views on their plans for the future and their proposals on how they intended operated as a Foundation Trust.

D Kerr explained that the Trust was committed to involving service users, carers and staff in planning and developing services and that becoming an FT would provide a new way of involving local people in what it did.

The Trust proposed to establish a membership that properly represented the communities they served and would make sure that everyone had an equal opportunity to contribute. The Trust would look for ways to recruit members from any underrepresented groups or areas of the trust.

The Trust provided services for many people who felt excluded from society because of their health problems or the stigma attached to them and therefore it was proposed that membership should be as inclusive as possible. All members would be asked to sign up to an agreed code of conduct. Members would be grouped into constituencies. Two elected categories of membership was proposed – public and staff. People could only be members of one constituency at a time.

Public Membership

The Trust aimed to reduce the stigma attached to the services they provided, and the people they supported, and proposed not to isolate service users and carers into separate membership categories. Instead they wanted to integrate them into their public membership. The Trust did not want to differentiate between people who already used their services and those who may need their support in the future.

It was therefore proposed that the public constituency be open to anyone aged 14 or over who lived in the area. An alternative would be to have separate constituencies for service users and carers.

Members would be grouped depending on where they live eg Durham, North East Yorkshire, or Middlesbrough. Seven public constituencies were proposed, each one would be represented by governors on the Council of Governors, with one governor per 50,000 of population.

Staff Membership

The Trust wanted their staff to be fully involved in the FT to influence how services developed in the future. It was therefore proposed that all staff automatically become members. They would have the right to opt out if they did not want to be members. If they decided to opt out of the staff constituency they could still be members of the public constituency if they lived in the area the trust serves.

It was also proposed that this constituency included staff who were not directly employed by them, but work closely with them and make a significant contribution to our services, including social care staff working in integrated teams and external contractors such as some catering and cleaning staff.

The staff constituency would be sub-divided into eight groups or classes, and each class would elect representatives to sit on the Council of Governors.

Council of Governors

To ensure a wide representation a total of 54 governors was proposed. The Trust proposed that a Council of Governors be established rather than a Board of Governors. The title 'Council of Governors' better reflected the wide representation of organisations and groups that would make up the body.

The Council of Governors would have the following roles:

- *Guardianship* – making sure the trust complies with the terms of its authorisation by Monitor, the independent FT regulator, and that corporate objectives are met,
- *Advisory* – acting as a channel for the flow of information to and from the membership,
- *Strategic* – advising on the future strategic direction of the trust.

The Council of Governors would be made up of elected representatives of the members, and people appointed by local partner organisations.

Governors would not be responsible for the day to day running of the trust, but would, in the first year approve the trust's chairman and non-executive directors, and in subsequent years appoint people to these important posts.

It was proposed that the Council of Governors include elected Governors and Non-Elected Governors as follows:

Elected Governors

28 Public governors based on population, with one governor per 50,000 people:

- County Durham (10)
- Darlington (2)
- Hartlepool (2)
- Stockton (4)
- Middlesbrough (3)
- Redcar & Cleveland (3)
- North East Yorkshire (4)

9 staff governors, one for each of the following classes:

- Older people's mental health services
- Children and young people's services
- Learning disability services
- Forensic services
- Corporate support services
- Medical staff
- Nursing staff
- Adult mental Health
- Substance misuse

Public and staff places on the Council of Governors would be filled by an election process where all members vote for their preferred representative. Elections would be by secret ballot arranged by an independent organisation. Elected governors would usually be appointed for a term of up to three years.

Non-Elected governors

It was proposed that 17 Non-Elected Governors be appointed by the following key partners:

- County Durham Primary Care Trust (PCT) and
- Darlington PCT
- PCTs from across Teesside
- North Yorkshire and York PCT
- North East Mental Health and Learning Disability
- Commissioning Directorate
- Durham County Council
- Darlington Borough Council
- Hartlepool Borough Council
- Stockton Borough Council
- Middlesbrough Borough Council
- Redcar & Cleveland Borough Council
- North Yorkshire County Council

- University of Teesside
- Durham University
- Local acute NHS trusts
- Local prisons
- The local voluntary sector.

The Trust wanted to encourage people from all the communities they served to be involved as a member or governor, however there were legal restrictions that needed to be taken into account. Although it was proposed that people 14 years and over could become members, legally elected governors must be at least 16 years old. In addition, people who have been declared bankrupt or received a prison sentence of three months or more in the past five years are not eligible for election.

Members and governors were not paid, but governors would be entitled to receive expenses in connection with attending meetings in line with carrying out duties as a governor.

Following the presentation and questions D Kerr and the Cabinet Member left the meeting to allow the Committee to deliberate on its recommendations.

In relation to the appointment of non-elected governors, the Committee suggested that the Police Authorities that covered the Trust's area should be included as key partners.

- RECOMMENDED :*
1. *That the proposed age limit for membership be agreed.*
 2. *The proposed membership categories be agreed.*
 3. *The integration of service users and carers into the public constituency to promote inclusion and tackle stigma be agreed.*
 4. *That the Trust's staff should be able to opt out of membership rather than opt in.*
 5. *That the proposed categories for staff membership be agreed.*
 6. *That the Trust should have a Council rather than a Board of Governors.*
 7. *That the proposed structure of the Council of Governors be agreed.*
 8. *That the proposed number of public and staff members on the Council of Governors be agreed.*

9. *That in addition to the key partner organisations identified in the consultation document, relevant Police Authorities should be represented on the Council of Governors.*

H&S.10/07 CHOICE BASED LETTINGS

I. Brown, Head of Housing Management and M. Ferguson, Area Housing Manager attended the meeting to give a presentation detailing the requirements for the Council to implement Choice Based Lettings. (For copy see file of Minutes).

The Committee was given an outline of Choice Based Lettings and were informed that it was a national policy requirement, to be implemented by 2010. The presentation detailed how Choice Based Lettings and Sub-Regional Choice Based Lettings worked including the procedure available for homeseekers. The current position of the scheme was provided, detailing dates for when the consultation on the draft Choice Based Lettings Statutory Guidance had been issued. It was pointed out that the finalised guidance had not yet been issued.

The benefits of adopting the scheme were pointed out detailing performance and cost, transparency and funding. The challenges were then outlined for introducing and implementing the scheme.

Concerns were raised regarding funding and the cost to local residents together with the possibility that they could be disadvantaged when bidding for a property as a result of people moving into the area. It was explained that all homeseekers would be required to complete the same application form and points would be awarded for meeting certain criteria.

It was pointed out that the Residents Association had visited Middlesbrough Council where the scheme had been successfully implemented.

It was suggested that the Committee be updated on the progress of implementing the scheme in six months time.

- RECOMMENDED :**
1. *That the information outlined in the presentation be noted.*
 2. *That the Committee receive an update on the progress of implementing Choice Based Lettings in six months time.*

H&S.11/07 DURHAM COUNTY COUNCIL HEALTH SCRUTINY SUB COMMITTEE

That the Minutes of the meeting held on 2nd April and 27th April, 2007 be noted. (For copy see file of Minutes).

H&S.12/07 WORK PROGRAMME

Consideration was given to a report of the Chairman of the Committee setting out the Committee's Work Programme for consideration and review. (For copy see file of Minutes).

Members of the Committee were informed that a workshop would be arranged with all Overview and Scrutiny Members to discuss the reorganisation of Local Government and to identify future review topics in line with priorities within the Council's Corporate Plan.

AGREED: That the Work Programme be noted.