

HEALTHY BOROUGH WITH STRONG COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE

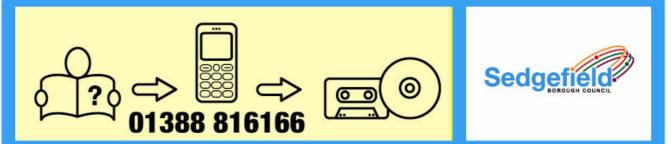
Tuesday,

15 April 2008

10.00 a.m.

Council Chamber, Council Offices, Spennymoor

AGENDA and REPORTS



This document is also available in other languages, large print and audio format upon request

(Arabic) العربية

إذا أردت المعلومات بلغة أخرى أو بطريقة أخرى، نرجو أن تطلب ذلك منا.

বাংলা **(Bengali)**

যদি আপনি এই ডকুমেন্ট অন্য ভাষায় বা ফরমেটে চান, তাহলে দয়া করে আমাদেরকে বলুন।

(中文(繁體字)) (Cantonese) 如欲索取以另一語文印製或另一格式製作的資料,請與我們聯絡。

हिन्दी (Hindi)

यदि आपको सूचना किसी अन्य भाषा या अन्य रूप में चाहिये तो कृपया हमसे कहे

polski **(Polish)** Jeżeli chcieliby Państwo uzyskać informacje w innym języku lub w innym formacie, prosimy dać nam znać.

_{ਪੰਜਾਬੀ} **(Punjabi)** ਜੇ ਇਹ ਜਾਣਕਾਰੀ ਤੁਹਾਨੂੰ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਜਾਂ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ ਚਾਹੀਦੀ, ਤਾਂ ਇਹ ਸਾਥੋਂ ਮੰਗ ਲਓ।

Español **(Spanish)** Póngase en contacto con nosotros si desea recibir información en otro idioma o formato.

(Urdu) اردو اگرآ ب کومعلومات کسی دیگرزبان یا دیگرشکل میں درکارہوں تو برائے مہر بانی ہم سے پوچھتے۔

Tuesday, 15 April 2008

AGENDA

1. APOLOGIES

2. DECLARATIONS OF INTEREST

To notify the Chairman of any items that appear later in the agenda in which you may have an interest.

3. MINUTES

To confirm as a correct record the Minutes of the meeting held on 26th February 2008. (Pages 1 - 6)

4. CHOICE BASED LETTINGS - SUB REGIONAL AND BOROUGH UPDATE

Ian Brown, Head of Housing Management will attend the meeting to give a presentation in relation to Choice Based Lettings – Sub Regional and Borough update. (Pages 7 - 10)

5. HOUSING DEPARTMENT SERVICE IMPROVEMENT PLAN

To consider the attached report. (Pages 11 - 24)

6. CCTV ARRANGEMENTS WITHIN THE BOROUGH - PROGRESS UPDATE

Dennis Scarr, Head of Community Services, will attend the meeting to give a presentation in relation to CCTV arrangements within the Borough – progress update.

7. OVERVIEW AND SCRUTINY REVIEW GROUP - STREETSAFE REVIEW -PROGRESS UPDATE

To consider the attached Action Plan detailing progress against recommendations from the Overview and Scrutiny Review of the Streetsafe Initiative.

(Pages 25 - 28)

8. DURHAM COUNTY COUNCIL HEALTH SCRUTINY SUB COMMITTEE

To consider the minutes of the meeting held on 7th January 2008. (Pages 29 - 40)

9. WORK PROGRAMME

To consider the attached report of the Chairman of the Committee. (Pages 41 - 44)

10. ANY OTHER ITEMS WHICH THE CHAIRMAN DECIDES ARE URGENT

Members are respectfully requested to give the Chief Executive notice of items they would wish to raise under the heading not later than 12 noon on the day preceding the meeting, in order that consultation may take place with the Chairman who will determine whether the item will be accepted.

B. Allen Chief Executive

Council Offices SPENNYMOOR 7th April 2008

Councillor J.E. Higgin (Chairman) Councillor Mrs. P. Crathorne (Vice Chairman)

Councillors W.M. Blenkinsopp, Mrs. D. Bowman, J. Burton, Mrs. S. Haigh, Mrs. H.J. Hutchinson, Mrs. E.M. Paylor, K. Thompson, T. Ward, J. Wayman J.P and Mrs E. M. Wood.

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Item 3

SEDGEFIELD BOROUGH COUNCIL

HEALTHY BOROUGH WITH STRONG COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE

Council Chamber, Council Offices, Spennymoor	Tuesday, 26 February 2008	Time: 10.00 a.m.
Present:	Councillor J.E. Higgin (Chairman) and	
	Councillors W.M. Blenkinsopp, Mrs. P. Crathorr T. Ward and Mrs E. M. Wood	ie, K. Thompson,
In Attendance	Councillors A. Gray, D.M. Hancock, T. Hogan, M B. Lamb, Mrs. E. Maddison, B.M. Ord and A. Sr	
Invited to Attend	Councillor Mrs. B. Graham	
Tenant Representative	Mrs. M. Thomson	
Apologies:	Councillors Mrs. D. Bowman, J. Burton, Mrs. S. Mrs. H.J. Hutchinson and Mrs. E.M. Paylor	Haigh,

H&S.31/07 DECLARATIONS OF INTEREST

No declarations of interest were received.

H&S.32/07 MINUTES

The Minutes of the meetings the meetings held on 15th January, 2008 and 23rd January, 2008 were confirmed as correct records and signed by the Chairman.

H&S.33/07 INSPECTION OF HIGH RISK FOOD PREMISES - PERFORMANCE UPDATE – FEBRUARY 2008

Consideration was given to a report of the Head of Environmental Services (for copy see file of Minutes) in relation to the above.

The Committee was reminded that at its meeting on 27th November, 2007 the Committee had expressed concern that Performance Indicator CPH04 – Percentage of High Risk Food Premises Inspections that should and were carried out – was performing below the target set for 2007/08. The purpose of the report was to provide an explanation for the current performance levels.

It was noted that high risk food premises were classified into three groups and dependent upon classification were visited on either a six monthly, twelve monthly or eighteen monthly basis. The largest group of high risk premises within the Borough fell within the category which were to be visited on an eighteen monthly basis. This year the largest number within this group were due for inspection within the first three quarters of the programme.

It was explained that the reason for the performance at the end of Quarter 2 could be attributed to imbalance in the number of inspections required falling within the first half of the year together with additional demands such as the Health Act 2006 and the impact which this had had on the workload of the Food Safety Team and also staffing issues.

Although performance in the first two quarters was lower than usual the programme was now back on track and performing at 98%. With fewer numbers of premises to inspect in Quarter 4, it was anticipated that the 100% target would be achieved by the end of the financial year.

With regard to staffing issues, resources were being managed between the Health and Safety Team and the Food Safety Team to ensure that targets were met.

During discussion of this item a query was raised regarding legislation in respect of mobile food premises and whether new legislation was anticipated. It was explained that no new legislation was going through Parliament in relation to food safety for mobile food vans. However, the Food Standards Agency was changing its regulations/guidance in relation to such premises.

Members of the Committee expressed their appreciation to the Team for the work that had been undertaken.

AGREED : That the Committee acknowledges the progress made towards Performance Indicator CPH04 and meeting the inspection target of 100%.

H&S.34/07 PROGRESS TOWARDS HOUSING PERFORMANCE INDICATORS BV212 AND CPS08

Following discussions at the meeting of the Committee held on 6th November, 2007 when concern was expressed regarding Performance Indicators relating to the average time taken to relet local authority housing and the satisfaction with the condition of new let properties a presentation was given in relation to progress towards Best Value Performance Indicators BV212 and CPS08 dealing with those issues.

Ian Brown, Head of Housing Management, Bob Scougall, Head of Housing Property Services and Janice Wayman, Service Improvement Manager, were present at the meeting to outline progress and respond to queries.

It was explained that as from 1st April, the number of Performance Indicators would be very much reduced. The Housing Department had, however, decided to continue to maintain a complete set of Indicators after that time.

With regard to BV212 – Average time taken to relet local authority housing – this Indicator was calculated by the time and calendar date from the date

when the tenancy was terminated up to and including the date when the new tenancy agreement started. CPS08 – Satisfaction with Condition of New Let Properties was Measured by a representative sample from responses to a questionnaire which centred around two themes, the offer process and condition of property both internally and externally.

It was noted that in 2006/7 the target in relation to letting of void properties had been met. The current performance was that the Indicator was performing 7.5 days below target.

Details were given of the void key figures and it was noted that the number of voids as at 12th December, 2007 was 110 (1.3% of the stock). Details were given in relation to properties with demand, properties with no demand and properties to be demolished and were broken down by each of the management areas and also by value.

In relation to properties with demand, they were hitting target. Properties with no demand, mainly in sheltered housing schemes were being proactively targeted, marketed in local newspapers, incentives given in terms of decoration and other such measures.

A pilot had been undertaken in Spennymoor in relation to supported housing and there were now no voids in supported schemes in Spennymoor and there was a small waiting list. Lessons learnt from that pilot scheme would be used in other areas of the Borough.

With regard to Indicator CPS08 – Satisfaction with Condition of New Let Property – it was explained that customer satisfaction was measured using a broad range of surveys across the Housing Department the purpose of which was to measure customer views with services provided and to use the feedback to improve services. The results were used to feedback to all members of staff involved in the service.

It was noted that the service did have some significant challenges to meet in relation to Supported Housing Schemes.

Through partnership working with Mears, to streamline the process, it was anticipated that there would be an improvement of void standards and trying to reduce the turnaround time.

During discussion of this item reference was made to the standards set for cleanliness and decoration in void properties in elderly accommodation. It was explained that those properties had to meet Decent Homes Standards. To meet a high standard of decoration, there was a budget for a responsive decoration scheme. The criteria for eligibility for work being undertaken by the sponsored decoration scheme was that the tenant must be unable to carry out the work themselves and have no relatives in the near vicinity. It was hoped to work with Mears to enhance that scheme. It was also noted that decoration vouchers were given when there were issues with the colours used by previous tenants or where the condition of the property was poor.

Discussion was also held regarding bedsits and the standard for such accommodation. It was explained that some Housing Associations were remodelling such accommodation. This was, however, not an option for the Council. There was no budget in the Housing Revenue Account to remodel such accommodation. Conversion, as an option was also a non-starter because of technical issues.

Discussion was held regarding accommodation which had been adapted for disabled persons. Details were on a database and allocations were made relating to applicants needs.

Reference was also made to the shortage of two-bedroomed bungalows. It was explained that the Council was working with Housing Associations to provide specialist housing accommodation properties with degrees of accessibility.

A query was also raised regarding improvements to private housing and in particular bungalows. It was explained that disabled facilities grant was available. However, this was means tested and there was a limited funding. The funding available for adaptations to Council properties were not means tested.

AGREED : That the Committee is satisfied with progress in relation to Performance Indicators BV212 and CPS08.

H&S.35/07 PROGRESS ON PERFORMANCE INDICATORS CPH16, 18, 20 AND 22 Consideration was given to a report of the Director of Leisure Services (for copy see file of Minutes) regarding progress towards Best Value Performance Indicators CPH16, 18, 20 and 22.

The Committee was reminded that at its meeting on 27th November, 2007 concerns had been expressed with regard to the performance in Quarter 2 of Performance Indicators CPH16, 18, 20 and 22 regarding the use of Leisure Centre facilities.

It was explained that with regard to CPH16 – Representative facility used by young people under 16 – some significant variation had been shown in reported quarterly values during 2007/8. This variation was primarily due to the way in which the figures were calculated. Turnstiles had been installed at Leisure Centres and there were still some teething issues which needed to be addressed particularly in relation to group activities. The swipe card system was not in full use to record visits from groups such as school activities as they did not enter through the turnstile. Such figures had to be manually adjusted and added to the calculation. The outturn for Quarter 3 was actually around 10% above last years figure.

The Committee was informed that in respect of Performance Indicator CPH18 – Representative facility used by People aged over 60 the performance figure continued to improve though it was still marginally below target. The improvement was mainly as a result of the additional Zest for Life for Over 50s instigated across the Borough and the sustained use of the Bowling Green facilities which had augmented the Quarter 3 performance. Further improvements were expected during Quarter 4 as new programmes were launched including Armchair Aerobics at selected care homes across the Borough and pilates classes as part of the Fit for Life programme. The Committee was informed that CPH20 – Proportion of Facility Use by Disabled Persons aged under 60 years - was now performing .85% above target. As a result of consultation exercise which had been undertaken significant additions had been made to timetable programmes from September, 2007 onwards. Multi sport disability sessions at Spennymoor and Newton Aycliffe Leisure Centres had been introduced. Additionally a promotional campaign had been executed aimed at increasing the numbers participating in the Gym Buddy Scheme across all four Leisure Centres. It was noted that Durham County Council continued to use the Acapulcco Suite at Spennymoor Leisure Centre with increasing numbers of disabled clients using the facility each day.

Dealing with Performance Indicator CPH22 – Percentage of Population Living within 20 Minutes Travel Time (urban areas by walk, rural areas by car) of a range of three different facility types of which one had achieved equality assured standard – it was noted that this was performing 7.3% below target. Performance was dependent on Newton Aycliffe Leisure Centre which was scheduled to be assessed by QUEST in February 2007 and receiving approval by the end of the financial year. Should this approval be received by the end of the financial year performance would meet and exceed PI targets by the end of the year.

During discussion of this item a question was raised regarding whether the measures related to the number of people participating rather than as visitors to the facility. It was explained that all youth and sports activity at the Leisure Centre were recorded.

Reference was made to the problems which had been occurring in relation to Swipe cards and whether those problems had been resolved. It was explained that since the construction of the turnstiles approximately 95% of the issues had now been eradicated. Users of the Leisure Centre were becoming familiar with the new system.

AGREED : That the Committee acknowledge progress made towards meeting targets in Performance Indicators CPH16, 18, 20 and 22.

H&S.36/07 WORK PROGRAMME

Consideration was given to the Work Programme and an Addendum report for the Healthy Borough with Strong Communities Overview and Scrutiny Committee. (For copies see file of Minutes).

It was explained that following a workshop which had been held for Overview and Scrutiny Members on 20th February, 2008 to discuss the role of the Committees within the period leading to establishment of a new unitary Council and the options for undertaking scrutiny reviews within this period. Members had supported undertaking a state of the Borough review which would look at achievements within each of the Council's Ambitions. The review would provide a benchmark for future assessment, highlight areas for improvement and make recommendations to the new Council where appropriate.

It was being proposed that the Overview and Scrutiny Committees establish review groups to examine each of the Council's Ambitions with Healthy Borough with Strong Communities Overview and Scrutiny Committee establishing Healthy Borough Review Group and Strong Communities Review Group and Prosperous and Attractive Borough Overview and Scrutiny Committee establishing a Prosperous Borough Review Group and an Attractive Borough Review Group.

The final reports from each of those reviews would be combined to form a single state of the Borough report.

It was noted that the Strategic Leadership Overview and Scrutiny Committee would not be required to establish a review group to undertake a state of the Borough review. However, in order to ensure that all scrutiny Members had the opportunity to contribute to these important reviews, the principal to co-opt to Review Groups would be extended to allow Members to contribute to the review of their choice. The criteria for membership which would apply to ensure a balance across the Review Groups was outlined.

The Committee proposed that, for the Healthy Borough with Strong Communities Review Groups, the Chairmen be non Labour Members.

AGREED : 1. That the following Review Groups be established to contribute to the State of the Borough report:-

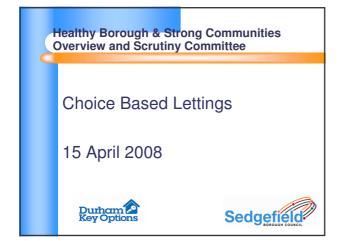
Healthy Borough Overview and Scrutiny Review Group.

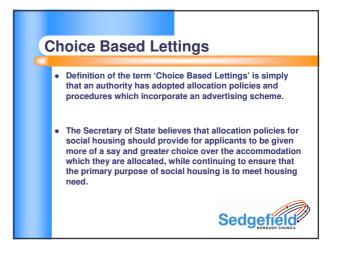
Strong Communities Overview and Scrutiny Review Group.

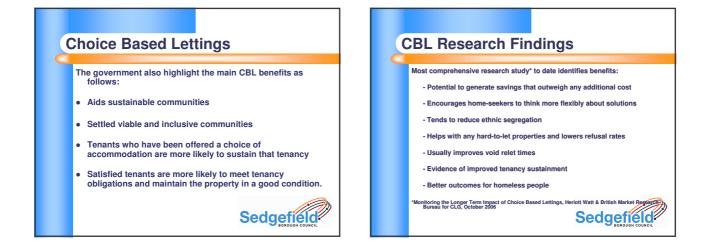
- 2. That the criteria and cooption of membership of those Review Groups as outlined in the report be approved.
- 3. That the Chairmen of those Review Groups be non-Labour Members.
- 4. That the Committee's Work Programme as amended be approved.

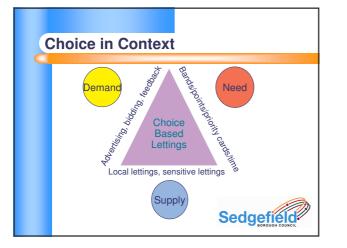
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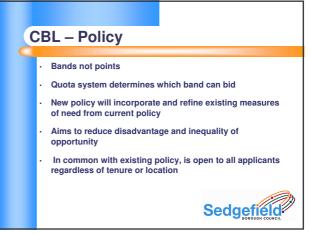




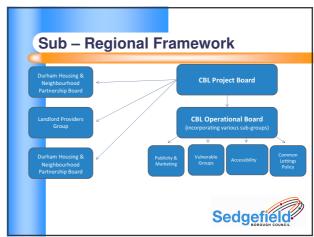


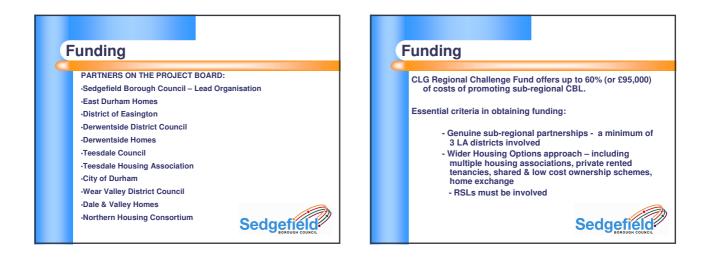












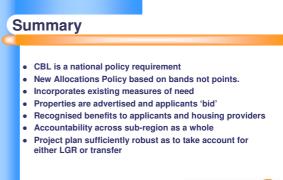




SBC Project Plan

- Develop a new allocation policy.
- Consultation events.
- Consider bidding rounds and adverts.
- Implement a new CBL software system to allow bidding.
- Change existing Orchard system.
- Consider other implications.







Item 5

REPORT TO HEALTHY BOROUGH WITH STRONG COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE

15th APRIL 2008

REPORT OF DIRECTOR OF HOUSING

Housing Services Portfolio

HOUSING DEPARTMENT SERVICE IMPROVEMENT PLAN

1. SUMMARY

- 1.1 In March 2006 Cabinet considered, and approved, a report by the Director of Housing detailing the need to produce a comprehensive Service Improvement Plan (SIP) for the housing landlord functions. Following approval of the methodology for the production of that plan officers from the Housing Department have worked with key stakeholders to review the landlord Key Lines of Enquiry (KLOE's), and develop the SIP.
- 1.2 The plan was developed along with associated costings. It covers a four-year period and requires additional funding for the first two years of £340,000, which was to be met from Housing Revenue Account reserves.
- 1.3 Cabinet approved the SIP and recommended that this committee oversee its delivery.
- 1.4 Members will recall that they considered areas of implementation against the plan at its meeting on 10th April 2007 and this report seeks to update them of progress since then.

2. RECOMMENDATION

2.1 That the report be received.

3. DETAIL

- 3.1 The Service Improvement Plan (SIP) was developed in response to the 'No' vote delivered by a tenants' ballot in respect of LSVT. A great deal has happened since then that has had a significant impact on the SIP.
- 3.2 The Council has sought and implemented a partnering arrangement for construction services and is seeking a positive result from a tenants' ballot on stock transfer.
- 3.3 Both of these events have had a significant effect on the SIP not only in terms of resources but their impact on the detail within the plan.

- 3.4 An example of this is item 1.9 of the plan (see Appendix 1) that refers to the implementation of hand-held computers for all areas of repair and maintenance. The partnering arrangement now places the means of service delivery within the hands of Mears and therefore the introduction of technological advances is for them to determine rather than ourselves, provided that the need for improvements in service quality are not compromised.
- 3.5 Also in Appendix I is an outline of those areas of the SIP impacted upon by the events outlined in 3.1 whilst Appendix 2 identifies those areas that have progressed since the last report.
- 3.6 Areas of particular note are the implementation of the Construction Industry Training Board's Construction Skills Card Scheme throughout the craft workforce together with relevant white-collar staff.
- 3.7 The development and implementation of a comprehensive training plan.
- 3.8 A complete review of the door to door rent collection service and methods for making payments has been undertaken.
- 3.9 A review of standards across all areas of the service has been undertaken to address issues such as equality & diversity and customer focus.
- 3.10 A detailed programme of works to achieve Decent Homes Standard and Asset Management Plan has been developed together with a medium term Capital Works programme for beyond 2010 and an outline programme for beyond 2015.

4. FINANCIAL IMPLICATIONS

4.1 Cabinet approved the additional expenditure identified in the SIP and authorized the use of HRA balances. Sums amounting to £70,000 have been identified for use in 2008/09.

5. CONSULTATION

5.1 Members, tenant and staff representatives have been consulted regarding the actions detailed within the KLOE's and the Service Improvement Plan.

6. OTHER MATERIAL CONSIDERATIONS

6.1 Legal Implications

There are no legal implications to be addressed as a consequence of this report.

6.2 Asset Management

The issues of Repair and Maintenance and the movement towards the Decent homes Standard contributes towards maintaining the integrity of the Council's housing stock.

6.3 Risk Management

There are no risk management issues that should be addressed as a consequence of this report

6.4 Health and Safety

There are no health and safety issues that should be addressed as a consequence of this report

6.5 Sustainability

Sustainability is not in issue in these circumstances.

6.6 Information Technology

There are no I.T. implications.

6.7 Equality and Diversity

Equality and diversity are not prejudiced in this report.

6.8 Crime and Disorder

There are no crime and disorder issues raised in this report.

6.9 Human Rights

No human rights issues are addressed in this report.

6.10 Social Inclusion

There are no implications for social inclusion raised in this report.

Contact Officer: Telephone Number: E-mail address: Martin Smith 01388 816166 Ext. 4421 msmith@sedgefield.gov.uk

Wards:	All Wards
Key Decision Validation:	Yes

Background Papers: Not applicable

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HOUSING DEPARTMENT REVISED SERVICE IMPROVEMENT PLAN

Outstanding Issues

04/04/2008

SIP REF	ACTION	COMPLETIO N DATE	LEAD/ Support	UPDATES
			STOCK TRANSFER	~
1.2	Establish consultative forum to involve tenants in discussions on improvements to properties and repairs priorities	Summer '08	BOB SCOUGALL/ Service Managers/ J Wayman	Part of LSVT Process
2.2	Write a Tenant Empowerment Strategy.	Autumn '08	SYLVIA DODSWORTH/ IAN BROWN	Part of LSVT Process
2.3	Review Tenants Compact and produce Thematic Compacts e.g. estate, sheltered housing	Autumn '08	TBC	Part of LSVT Process
4.14	Carry out a review of the voids policy and standards.			
4.15	Develop procedural guidance and checklists for staff	Autumn '08	JANICE WAYMAN	Part of LSVT process Property Services Workstream
4.16	Develop tenants information pack which identifies our standards			
5.11	Review departmental complaints procedure and link to corporate policy	Autumn '08	ANGELA SMURTHWAITE	Part of LSVT registration process
5.14	Develop induction for new tenants including a checklist for LEO's. Introduce welcome gift pack	Autumn '08	JANICE WAYMAN/ Area Housing Managers	Part of LSVT process Property Services Workstream
6.11	Evaluate and implement Service Charges Module within Orchard	Autumn '08	ELAINE GARBUTT	Part of LSVT process.
		£42,	£42,500 allocated for actions	tions

04/04/2008

jwayman

04/04/2008

UPDATES	STOCK TRANSFER AND PARTNERING ARRANGEMENTS	Part of LSVT Process and Partnering Contract	Part of LSVT and Partnering process	ctions
LEAD/ Support	R AND PARTNERI	TBC	TBC	£20,000 allocated to actions
COMPLETION DATE	OCK TRANSFEF	Autumn '08	Spring'09	£2(
ACTION	STC	Develop a Customer Involvement and Consultation Strategy including: - incentives - customer satisfaction - mystery shopping - communications exchange - have your say days - annual tenants conference	Audit performance information needs and benchmark with 3* like for like authorities who have market tested their housing services - own - regionally - nationally	
SIP REF		2.1	5.2	

04/04/2008

UPDATES	S	Part of Partnering Contract	
LEAD	PARTNERING ARRANGEMENTS	ROBERT SCOUGALL/ Janice Wayman Mick Davies	
COMPLETION DATE	PARTNERI	To be deleted	
ACTION		Evaluate and implement hand held computers for all areas of repairs and maintenance	
SIP REF		1.9	

SIP REF	ACTION	COMPLETION DATE	LEAD	UPDATES
			GENERAL	
1.3	Develop standardised information packs for capital schemes detailing step by step process	30/5/08	TEAM LEADERS	Extension requested
1.11	Carry out an options study on the future of sheltered housing schemes.	31/3/08	lan Brown	Report received from consultants and agreed. Report to be presented to Cabinet
2.4	Develop closer links with local schools, LEA's, youth workers etc.	Spring'09	SYLVIA DODSWORTH	Currently developing an initial list of contacts so that the Department can engage with young people on specific local issues and projects
2.5	Establish IT access & support for all Resident Associations & Groups.	Spring'09	SYLVIA DODSWORTH	No progress to date. Meeting required with tenants to establish needs
6.7	Investigate partnership arrangements and training for independent mediation service	Summer '08	TBC	Meeting held with UNITE mediation services on 16/5/06 to explore arrangements for mediation and costings Undergo Supervision training then sign off
6.9	Introduce Choice Based Lettings in partnership with other organisations.	31/12/09	COLIN STEEL/ Janice Hall/	Progressing as part of County wide partnership
7.3	Draft a leaflet for each area including information on local amenities.	31/12/09	ANGELA SMURTHWAITE	Is this still relevant, should we have a Borough directory ready for CBL (poss chapter for handbook)
7.6	Develop induction pack for young people wanting to apply for Council Housing	3112/09	KAREN TOWNSEND	Passed to Housing Management

Appendix 2

UPDATES	NEEDS	COMPLETE	COMPLETE	COMPLETE		COMPLETE Draft guidance complete Training will take place during Jan – March 2007	Surveys established and in progress. Additional resource employed COMPLETE	COMPLETE SOR complete, further consultation with staff to carried out and review to be carried out annually	COMPLETE	COMPLETE
	REQUIREMENTS WITH OTHERS, TO MEET LOCAL NEEDS				BY 31 DECEMBER 2010	Dr. Training will tal	Surveys established and	SOR complete, further co to t		
LEAD/ Support	JIREMENTS WITH	COLIN STEEL	COLIN STEEL/ Martin Smith/ Bob Scougall	IAN BROWN	OMES STANDARD	MICK DAVIES	KEITH REEVE/ Mick Davies	PHIL HUMBLE/ Mick Davies/ Janice Wayman	KEITH REEVE/ Mick Davies	KEITH REEVE/ Mick Davies
COMPLETION DATE		30/11/06	31/7/06	31/1/08	ETS DECENT H	31/5/06	30/6/06	31/3/06	31/7/07	31/10/07
ACTION	1. PLANNING THE COUNCIL SERVICE AND INVESTMENT	Review operational hours across all service areas to meet service user requirements	Develop workforce plan within Housing Department	Carry out an options study on the future of sheltered housing schemes.	ENSURE ALL COUNCIL HOUSING STOCK MEETS DECENT HOMES STANDARD BY 31 DECEMBER 2010	Develop clear guidance manual on DHS for staff and tenants	Develop surveys to collect data and establish programme to carry out surveys to maintain statutory requirements	Review SOR and duplicate job (practically complete) cards and link to DHS	Develop a detailed programme of works to achieve Decent Homes Standard and Asset Management Plan	Develop medium term Capital Works programme for beyond 31/12/2010 and outline programme for beyond 31/12/2015
SIP REF	1. PLAN	1.1	1.10	1.11	3. ENSL	3.1	3.2	3.4	3.5	3.6

4. PRO	4. PROVIDE A PROMPT, EFFICIENT, EFFECTIVE MAINTER	MAINTENANC	E SERVICE THAT C	NANCE SERVICE THAT COMPLIES WITH OUT LEGAL OBLIGATIONS
4.5	Implement system to manage asbestos in all Council owned properties	31/12/06	MICK DAVIES	COMPLETE
4.6	Develop and implement programme to carry out surveys to identify location and condition of asbestos	30/4/06	BOB SCOUGALL	COMPLETE
4.7	Review existing gas servicing policy for all properties in housing portfolio and provide new heating appliance policy	30/9/06	LAWRIE ORD/ Business Development	COMPLETE
4.8	Publicise heating appliance policy and review safety leaflets.	2010140	JANICE	COMPLETE
4.9	Develop quarterly safety campaign on heating appliances	10/0/10	WAYMAN	COMPLETE
4.10	Develop planned maintenance module on Orchard to record servicing of appliances. Ensure one off boilers and capital works transfer into programme	30/6/06	MICK DAVIES/ Elaine Garbutt	COMPLETE

5. ACH	5. ACHIEVE CONTINUOUS IMPROVEMENT IN THE DEL		IVERY OF COUNCIL HOUSING SERVICE	SING SERVICE
5.1	Develop a Value For Money Strategy for the Housing Service	30/6/06	BOB SCOUGALL/ Colin Steel	COMPLETE Work incorporated into Corporate Working Group chaired by CEO. Report on procurement went to Cabinet in March 2006
5.3	Carry out Value for Money exercise of repairs and call out service	30/4/06	BOB SCOUGALL	COMPLETE Part of Procurement strategy which includes Market Testing. Report went to Cabinet in March 2006
5.4	Examine VFM issues and partnering within Repairs & Maintenance, Call Out and DPA Services, explore procurement options for service delivery	31/3/07	LAWRIE ORD	COMPLETE As per 5.3
5.12	Develop process for logging calls from tenants (including call backs)	31/7/06	ANGELA SMURTHWAITE	COMPLETE Comments procedure complete and training carried out Call logging linked to CRM system
5.13	Review Tenants Handbook and include diagnostic pictures	31/7/06	JANICE WAYMAN	COMPLETE
5.15	Develop and implement a comprehensive/structured training and development programme for all staff and the means for delivery	30/3/07	JANICE WAYMAN	Training Plan COMPLETE. Ongoing process of updating.
5.16	Collect baseline data relating to qualifications, references and other training	31/7/06		COMPLETE Questionnaire sent out to all staff to collate information on current qualifications and skills
5.17	Evaluate Construction Skills Card Scheme for relevant staff	31/7/06	DAVE SAYERS	COMPLETE 40 employees have now been for health and safety test
5.18	Establish process for monitoring/evaluating the completion of EDP's	31/7/06	JANICE WAYMAN	COMPLETE Database established by R O'kane to monitor progress

6. PROV	PROVIDE A PROMPT, EFFICIENT AND EFFECTIVE HOUSING MANAGEMENT SERVICE	TIVE HOUSIN	IG MANAGEMENT (SERVICE
6.1	Develop a policy & procedure for the administration of garage sites.	31/12/06	MIKE MCGOWAN.	COMPLETE Policy still awaiting agreement and implementation
6.8	Develop a formal nomination agreement and process to share data with RSL's in the Borough.	31/10/06	JANICE HALL	Complete
6.10	Review door to door rent collection service and investigate/expand methods for making payments via smart cards	30/4/07	TBC	Review complete still looking at All Pay
7. M <i>J</i>	AINTAIN HIGH STANDARDS OF CUSTON	ER CARE AN	D SATISFACTION V	7. MAINTAIN HIGH STANDARDS OF CUSTOMER CARE AND SATISFACTION WHILST ACHIEVING VALUE FOR MONEY ON COUNCIL HOUSING
7.1	Review Service Standards across all areas of the service to address issues such as equality & diversity and customer focus	31/3/07	IAN BROWN/JANICE WAYMAN	COMPLETE
7.2	Establish process to monitor and evaluate Corporate image/PPE/uniforms and I.D. badges including external contractors	30/06/07	ANGELA SMURTHWAITE	COMPLETE
7.5	Implement a rolling programme of equality & diversity training for all relevant staff.	31/7/06	TBC	COMPLETE Training has commenced within the Department, and this action is linked to 5.15

		Cabinet Re:	net Response	Implementation	n
Revi	Review Recommendations	Agreed?	Comments	Respons ibility	Timescale
1.	That the Council formally support the StreetSafe initiative.	Agreed	The StreetSafe initiative contributes directly to Sedgefield Borough Council's corporate objectives relating to promoting safer neighbourhoods.	Glyn Hall	Complete
Ň	That SBC's contribution and commitment to StreetSafe be endorsed.	Agreed	The Environment and Community Safety budget for 2005/06, which contributes to the StreetSafe agenda, totalled £814,000. Involvement in StreetSafe initiatives and lead role in co-ordinating work of Crime & Disorder Reduction Partnership confirms strategic relevance of service.	Glyn Hall (Service Director and Chair of C&DRP)	Complete

OVERVIEW AND SCRUTINY REVIEW GROUP REPORT - STREETSAFE

CABINET RESPONSE AND ACTION PLAN

		Cabinet Res	let Response	Implementation	no
Rev	Review Recommendations	Agreed?	Comments	Respons ibility	Timescale
ю [.]	That SBC develop its own Community Safety Strategy, taking into account its 'Section 17' responsibilities for crime and disorder and anti-social behaviour.	Agreed	A Performance Review of Community Safety will be undertaken in 2006, which will contribute to the development of a Section 17 Strategy for Sedgefield Borough Council. <i>This review is not yet complete as following discussions with the Audit Commission its scope has been extended and will involve dedicated Audit Commission input. Review will now be complete summer of 2007.</i>	D.Scarr	Sept. 2006 August 2007
			Further work on the preparation of a Borough Council Strategy has been postponed as it has been absorbed within the LGR Workstream for Community Safety under the new county Durham Unitary Authority.		April,2008
4	That SBC considers ways to ensure sustainable funding is allocated to achieve the objectives of the scheme.	Agreed	Mainstreaming of all Neighbourhood Warden posts has taken place. Continue emphasis on partnership working.	D.Scarr	Complete Ongoing
ى ئ	That the Council continues to support and actively promote a partnership approach to meeting our shared aims around crime and disorder and anti- social behaviour.	Agreed	Sedgefield Borough Council should continue to play a leading strategic role in the Crime and Disorder Reduction Partnership.	Glyn Hall (Chair of C&DRP) See comment on 3 above	Ongoing

		Cabinet Res	net Response	Implementation	uo
Rev	Review Recommendations	Agreed?	Comments	Respons ibility	Timescale
٥	That local targets be developed by the StreetSafe Partnership, which are consistent with national targets, in order to measure success and effectiveness.	Agreed	Work is being undertaken on development of workable definitions and recording practices around anti-social behaviour. National Incident Recording Standards for recording ASB have now been set. All partners Nationally, County and at District Levels will be using the same standards. This will enable us to define what our problems truly are and how often and where they are accruing. The Intervention and Disciplinary system for Juveniles has already adopted these recording standards and is working well. The final and most important development will be the implementation of the (CRM) Customer Relations Management system within Sedgefield.	H. Dent	Sept, 2006 July 2007
			Anti Social Behaviour recording is scheduled to go live with the CRM in mid 2008 this will assist in understanding the overall problem and will enable more effective targeting. It is however, likely that because of the more sophisticated method of recording incidents, that the reported events will significantly increase.		April, 2008

		Cabinet Res	net Response	Implementation	n
Rev	Review Recommendations	Agreed?	Comments	Respons ibility	Timescale
7.	That the Area Forum Review Group be requested to consider how Area Forums could be used as a means to raise awareness of the StreetSafe initiative and help engage with local communities in order to support its aims.	Agreed	The Area Forum Review Group gave consideration to this recommendation within its final report.	D.Anderson	Complete

Item 8

Item No 1

DURHAM COUNTY COUNCIL

At a Meeting of the Health Scrutiny Sub-Committee held at the County Hall, Durham on Monday 7 January 2008 at 10.00 a.m.

COUNCILLOR N WADE in the Chair.

Durham County Council Councillors J Armstrong, Bell, Chaplow, Davies, Priestley and Stradling

Chester le Street District Council Councillor Harrison

Sedgefield Borough Council Councillor A Gray

Teesdale District Council Councillor Cooke

Wear Valley District Council Councillor Todd

Other Members

Councillor Barker, C Carr, R Carr, G Gray, Mason, Nicholls and Shuttleworth

Apologies for absence were received from Councillors G Armstrong, Crathorne, E Foster, Lavin and J Clark

A1 Minutes

The Minutes of the meeting held on 1 October 2007 were agreed as a correct record and signed by the Chairman.

A2 Declarations of Interest

There were no declarations of interest.

A3 Service Direction of Tees Esk and Wear Valleys NHS Trust

The Sub Committee received a presentation from Harry Cronin, Director of Nursing and Sharon Pickett Director of Planning and Performance of the Tees Esk and Wear Valley NHS Trust on the key issues facing the Trust (for copy see file).

The service strategy is part of the 5 year integrated business plan and sets out the impacts on the workforce and on how the Trust's estates are used. To inform the plan environmental analysis was undertaken and this looked at the policy context, the demographic context and the market context. The purpose of the analysis was to identify where the Trust as a provider of specialist mental D:\moderngov\Data\AgendaltemDocs\8\2\8\Al00016828\healthscrutiny0701080.doc

health services could best use its skills and where the Trust could work with other specialist providers such as the voluntary sector. It is important to note the intentions of the PCT as they commission the services. In terms of demographics, it is known that that in the ten years to 2003 the UK population has risen by 3.5%. In the north east region the population fell by 2.2% and in Durham the population fell by 2.8%. In terms of the services provided by the Trust there will be a significant change in the number of older people in the region. In County Durham in 2004 7.68% of the population were over the age of 65. This is expected to rise to 12.5% by 2029. The number of those over the age of 75 will also increase significantly. Another issue for consideration is the increase in the number adults affected by learning disabilities. This has occurred following an increase in the survival rate of premature babies and the fact adults with learning disabilities are living longer.

In terms of national policy a number of issues are impacting on the Trust. This includes an increase in the number of providers in the market. This is part of putting the patient at the centre by providing more choice and improved quality of care. This is currently being addressed by the PCT.

The local commissioning framework/strategy is being developed by a specialist group. There are two phases in the development of the model:

- Phase 1 the review of primary care mental health services, the review of CAMHS tier 4 services (specialist inpatient children and adolescent beds) and the review of the commissioning of day care services learning disability campus facilities. A set of priorities will be identified and this will help develop the direction of travel.
- Phase 2 services for older people's personality disorder and perinatal services

Each service has developed what they see as the key direction of travel for the next five years. There are common themes to each of the plans. The plans are about how the Trust will use its expertise and skills for users and carers. It is also about how the drive continues to ensure that as many of the services as possible are provided in the community. Therefore when a patient goes into hospital it will be when they are very ill. Services will be based as locally as possible.

Within the plans there are proposals for expansion, these include eating disorders, children's learning disability forensic services and older people's forensics etc. There are also areas identified where the Trust intends to withdraw from when there are other providers to fill the gap. The Trust recognises that it is not always the best provider of some services and this has started in areas such substance misuse. Also within the plans are proposals about how to use the workforce and the estate to ensure that there is best value.

In the longer term the PCT are likely to want other providers, though the Trust will continue to have a role until such time as other providers are identified.

There is a significant growth in community services and this will see the development of new teams. The Trust will be able to expand into alcohol and prison if required by commissioners.

In terms of day services the Trust needs to shift provision to more intensive day services so that they provide an alternative to inpatient care. The Trust also wants to look at other areas of inpatient care such as the length of stay and to reduce reliance on inpatient beds.

Rehabilitation is similar to day services in that commissioners will want other providers in the market to allow the Trust to use their capacity on more specialist services.

Overall there will be improvements in the quality of care and services and improved environment in hospitals with improvements to services in the community with better local provision.

In response to a question about withdrawal from some areas, it was explained that any changes to services will be subject to consultation with the commissioners of services.

Concern was expressed about moving vulnerable people out of hospitals into the community with the possibility that there could be high turnover of support staff leading to distress for the people concerned. It was explained that community services will be enhanced to ensure that there is a more comprehensive community service. In addition as part of the Lanchester Road project, a crisis team will be established to support people with learning disabilities outside of normal working hours.

Information was sought on the effect that the proposed changes would have on staff. It was explained that the workforce was one of the key components of the business plan. Dedicated resources will need to be provided to ensure that staff is trained as they move away from traditional roles.

Resolved:

That the presentation be noted.

A4 Matters Arising

The Head of Overview and Scrutiny informed the Sub Committee that the Department of Health had sent a national team to County Durham in relation to action on health inequalities. The Chairman and the Head of Overview and Scrutiny had met with the inspection team on two separate occasions. A report has been produced which is being considered by the PCT. Some of the issues identified were about leadership and engagement. In relation to the Sub Committee the inspection team have said there are excellent Overview and Scrutiny committee arrangements with member involvement at all levels and that the committee is proactive in involvement and in following up issues. The report will be more fully shared with the Sub Committee when the PCT have had the opportunity to fully consider the report.

With reference to item A2 Your Health, Your Choice Our Commitment, David Gallagher Assistant Director Planning and Health Improvement County Durham PCT informed the Sub Committee that in relation to the 'Big Conversation' five events have been held and a further three events will take place in January. A separate event for learning disabilities is expected to take place by the end of January. The next series of events will commence in March.

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With reference to item A6 Shotley Bridge Community Hospital: Update, David Gallagher Assistant Director Planning and Health Improvement County Durham PCT informed the Sub Committee that discussions are ongoing between County Durham PCT and County Durham and Darlington Foundation Trust about the transfer of the ownership of the hospital. Transfer of the ownership will help progress work on the use of the hospital facilities. It was confirmed that that County Council are represented on the Steering Group. It was also confirmed that Members will be invited to stakeholder events.

With reference to item A9 Joint Appointment of a Health Scrutiny Liaison Post, David Gallagher Assistant Director Planning and Health Improvement County Durham PCT informed the Sub Committee that the post is being advertised next week with the closing date for applications being at the end of the month.

A5 Overview of the Planned/Elective Care Project

The Sub Committee received a presentation from Carole Langrick, Director of Strategic Service Development, North Tees and Hartlepool NHS Foundation Trust and Programme Director for 'Momentum Pathways to Healthcare' (for copy see file).

It was explained that following thirteen years of service reviews on the configuration of hospital services, the Reconfiguration Panel had recommended that the existing hospitals be replaced with a new hospital which is accessible to the people of Hartlepool, Stockton, Easington and Sedgefield. The project is likely to last seven years. Formal consultation will take place during June to September of this year including the establishment of a Joint Overview and Scrutiny Committee. This will also include the location and the facilities to be included in the hospital. The project is expected to be concluded by 2014.

Initial site identification has been completed and assessment and evaluation particularly on the planning and transport implications of the sites is to be undertaken. Discussions are taking place with local authorities on the transport implications.

The building blocks of the broad configuration of the health system will be based around:

- Home
- Health Centres/Surgeries
- Diagnostic & Treatment Centres
- Acute Hospital

The aim of this configuration is to avoid attendance at hospital where possible.

The highlights of the philosophy for elective care are as follows:

- Better communication
- No wasted journeys
- Individualised care
- Common assessments and protocols
- Hospital stay only as long as necessary
- Follow up aftercare in the community

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- Increased awareness of care pathways
- Good access

In terms of the evaluation of possible locations for the new hospital the following emerging findings have been identified:

- The majority of patients who need to use the hospital should have the shortest possible distance to travel
- There should be sufficient land available to accommodate any future expansion in services or need for car parking
- There should be the potential to provide adequate transport links and infrastructure to surrounding communities, particularly for patients and staff using public transport
- That the impact upon local residents in both the development and operation of the site is minimised
- Overall value for money

In addition to the formal consultation and the evaluation of sites the outline business case need to be developed.

Members sought clarification on the future use of the existing hospital sites. It was explained that it is intended to vacate both sites but no final decision has yet been taken.

Resolved:

1. That the presentation be noted.

2. That the County Council be represented on the Joint Overview and Scrutiny Committee examining the proposals for a new hospital on Teesside.

A6 Ambulance Contact Centre Review

The Sub Committee received a presentation from Mark Cotton, Head of Communications, North East Ambulance Service NHS Trust about the review of Ambulance Contact Centres (for copy see file).

The North East Ambulance Service (NEAS) provides a service from the Scottish Borders to North Yorkshire. At present the main contact centre is based at the headquarters in Newcastle. In the event of a failure, a back up service is provided from the NHS call centre in Longbenton.

In 2006 there was a merger of Ambulance Trusts and the Teesside area of the former Tees and North Yorkshire Trust was merged with NEAS who took over responsibility for a control centre. At present 40% of calls for the Teesside area are dealt with by the Newcastle contact centre.

At the beginning of 2007 the Department of Health commissioned a report looking at the emergency resilience of Ambulance Trusts. One of the recommendations was that each Trust should have two independent contact centres but which are capable of working together. Arising from this NEAS commissioned a report to examine the implications of the Department of Health report. The key issue is resilience and continuity and in terms of civil contingencies NEAS felt that that present arrangements are not acceptable.

During 2007 NEAS began consultations with stakeholders which included NHS organisations, PPI Forums and Overview and Scrutiny Committees. Arising from the consultation was a requirement for effective call handling. There was concern in the south of the area over the perceived lack of local knowledge. It was recognised however that contact centres do not have to be located in a particular area.

A number of different options were considered and these included:

- Single contact centre High Risk
- Single contact centre and a standby
- Single contact centre plus a standby plus a stop gap facility (current option)
- Two independent contact centres
- Three or more independent contact centres

The preferred option of NEAS is for two independent contact centres which would ensure that the secondary centre was up and running immediately should the primary centre fail.

The primary centre will be located in Newcastle and therefore the issue is to decide where the secondary centre should be located. Fourteen different locations were examined taking into account the following criteria:

- Business continuity
- Distance from Newcastle
- Redeploying staff
- Logistical ease
- Recruitment & retention
- Value for money

The first choice location for the secondary contact centre was in Hebburn which was arrived at after evaluating all fourteen sites against the above criteria. All 999 calls for the NEAS area will be dealt with at the Newcastle centre. The Hebburn centre will deal with urgent and GP calls together with an overlap of 999 calls. This will help the service meet the new Department of Health target of answering all 999 calls within 5 seconds. It will also enable staff to be introduced to the environment of answering 999 calls in a more structured way.

Concerns were expressed about the loss of local knowledge in the Teesside area together with concerns about the future of the Teesside staff. Recent statistics have demonstrated that following the centralisation of call handling by NEAS has improved response times and there has been a significant increase in the number of patients arriving at hospital alive during the period 2001 to 2007. Cleveland Police Authority also raised concerns about the loss of co-located control room. The Home Office have issued a report advising that the co-location of emergency services call handling is not desirable because of the different types of calls that are received.

NEAS believe that their proposals will improve resilience, provide an uninterrupted 999 service, improve passenger transport service provision and reduce risk.

A series of consultation meetings have taken place from October 2007 to the present date and any comments can be made until 11 January. An approach has been made by Cleveland Police to expand the Teesside ambulance control room facilities at the Police headquarters. The proposal will be fully considered. The Trust Board will be making a decision during 2008.

Assurance was sought that the closure of the Teesside control room would not marginalise the local population. The Sub Committee were advised that the centralisation of several control rooms had lead to improved response times. Sites on Teesside were considered as possible locations but none matched the criteria as well as the Hebburn site.

Resolved:

That the Sub Committee supports the NEAS preferred choice of one contact centre in Newcastle and the other based at Hebburn, South Tyneside.

A7 Rural Ambulance Services - Update

The Sub Committee received an update on the current position of ambulance services in Weardale and Teesdale from Mark Cotton Head of Communications of North East Ambulance Service.

It was explained that the evaluation and assessment of the first year's service is ongoing. The Community Monitoring Group which is chaired by County Durham PCT and comprises representatives of NEAS, the Durham Dales locality group and the NEAS PPI Forum has met on a quarterly basis. Representatives of the locality group have been invited to NEAS headquarters to visit the control room to see how calls are handled. The data from the first year's operation has not yet been analysed. When this work has been completed it will be reported to the Monitoring Group and following this meeting will be reported to the Joint Health Scrutiny Sub Committee as soon as possible.

The Community Paramedics have been working with local GP's and Community Hospitals. Integration has been much faster in the Weardale area where there is only one GP practice. Services are continuing to develop with the paramedics carrying out home visits with GP's, assisting with administering flu jabs at GP practices. They have also been working with respiratory and community nurses and undergoing chronic obstructive pulmonary disease training in order carry out welfare checks on patients with that condition.

Concern was expressed that the local ambulance for the Weardale area was attending calls outside of the dales area. It was explained that NEAS will direct the nearest ambulance to respond to a request for help.

Resolved:

1. That the report be noted.

2. That the Sub Committee receives a report on the evaluation and assessment of the first year of operation of the revised ambulance services in Weardale and Teesdale.

A8 'Seizing the Future' – County Durham and Darlington Foundation Trust Review

The Sub Committee received a presentation from Stephen Eames, Chief Executive, County Durham and Darlington NHS Foundation Trust about the Trust's programme of change.

'Seizing the Future' is a programme of change aimed at developing the Trust's strategic direction for the next five years. It will be supported by a major clinical service review which will include:

- An examination of current services
- An assessment of how these services adhere to best practice in clinical outcomes
- A review of achievement of national standards across all services
- The development of future service options

At the end of the review it is expected it will deliver:

- A five-year strategic plan
- A compelling clinical vision
- Agreed high quality clinical standards and outcomes for the future
- A decision on the way forward for our hospitals over the next five years

The Trust is undertaking this review as it is five years since the service review carried out by Professor Darzi. The Trust needs to look forward to the next five years and consider where the Trust needs to be in 2012, considering:

- What will services look like?
- How do we get there?

There are a number of key national policies which impact on the Trust's hospitals. These are:

- Patient choice patients now have a choice of where they have their treatment. This can be their local hospital, or it could be another trust outside County Durham and Darlington, or in the independent sector
- Payment by Results hospitals are now only paid for the patients they see. So if patients choose to go elsewhere, then hospitals in County Durham and Darlington do not receive income
- Increased competition from private hospitals under choice, a patient must have the option of using an independent sector hospital, as well as options in the NHS

- Practice Based Commissioning GPs now have a much stronger role in deciding where patients are treated. Many GPs are keen to develop services in their own practices, or across a number of practices.
- Shift of some of Trust's activity to Primary Care settings in the future, more services will be delivered in primary care and community settings, and where possible, in a patient's own home – avoiding admission to hospital altogether
- 18 week patient journey by the end of 2008, all patients must have their outpatient appointment, and tests, and have been admitted, or begun their treatment within 18 weeks of referral by their GP.
- Reduction in time spent in hospital by patients primary care trusts have targets to reduce the number of days that patients stay in hospital. National data shows that patients have a longer length of stay in County Durham and Darlington, compared with similar hospitals.

It is expected that these policies will mean a fall in the numbers of patients needing treatment in district general hospitals and therefore a reduction in the Trust's income.

Seizing the Future will be in three main phases, with a challenging timescale. The first phase will be the Scoping study - The review timescale demands for the initial scoping study phase to be completed by January 2008. This phase will include:

- Defining the scope of the review which will include assessing the key issues involved, understanding the views and opinions of staff, deciding the lead roles for the review process and developing the review project plan.
- Discussions with key stakeholders stakeholder mapping to ensure maximum coverage and determining ways in which they can be engaged.
- Developing a stakeholder engagement website
- Initial analysis of the impact of providing more care as close to homes as possible

The national review led by Lord Darzi will set a framework for the NHS in the future and the Trust review will carry out an initial assessment of its implications for the Trust. The Trust will try to create a joined approach in the process taking account of the Darzi review, the DCC Health Improvement Strategy and the PCT Big Conversation.

Members of the Sub Committee requested that the views of users of local hospitals are taken into account when undertaking the review. In addition it was felt that communication with local communities was not effective and local people were not always sure about what was being proposed.

The Head of Overview and Scrutiny informed the Sub Committee that the key issues for scrutiny were early engagement and the provision of safe, accessible and quality services which are value for money.

Resolved;

That the presentation be noted.

A9 Local Involvement Networks - Update

The Sub Committee received an update on the progress being made in the development of the County Durham Local Involvement Network (LINk) from Gerald Tompkins, Head of Social Inclusion (for copy of newsletter see file).

The closing date for tenders for the Host organisation closes on 25th January and it is hoped to appoint a host from 1 March 2008. The County Council has been notified that it will receive an allocation of approximately £250,000 for the development of the LINk. The funding will be part of the area based grant and is not ring fenced. Therefore the LAA Board will need to agree the funding to commission the LINk.

Resolved:

That the report be noted.

A10 Urgent Care Review - Update

The Sub Committee received a presentation from Bernice Malloy, Senior Acute Care Pathways Development Manager, County Durham PCT about the review of all urgent care services.

The objectives of the project are to prepare a specification for the delivery of urgent care services across County Durham and Darlington that meets patient need, provides a seamless pathway via any approved provider and delivers value for money. The outline objectives include:

- A single definition for urgent care
- Identify and address high numbers of A&E attendees why do they attend A&E
- Admission prevention strategies is there care closer to home
- Single point of contact
- Provision of appropriate information
- Access to the right person, providing advice, consistent assessment and treatment as soon as possible

Urgent Care provision covers a wide range of provision including:

- Accident & Emergency Services
- GP Practice (86 across County Durham and Darlington)
- Out of Hours Services- Both NHS & commercial
- Urgent Care Centres/Walk in Centres
- Emergency Dentistry
- Pharmacies
- North East Ambulance Service
- NHS Direct
- Mental Health/Child & Adolescent Mental Health Services
- District Nursing/Palliative Care/Intermediate Care

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• Social Care Direct

Data on unplanned activity is currently being examined and will include an analysis of hour by hour attendance and the patient pathway. There were 160,000 total unplanned attendances at A & E in County Durham and Darlington in 2006/07. Twenty percent of all attendances to A & E were to facilities outside of the County. An explanation of the current patient pathway was provided.

When the data is analysed it is likely that the following issues will be highlighted:

- Weekday mornings are the peak period
- Summer has higher numbers than the Winter
- Almost two thirds of attendances are self-referrals
- Around a 5th of patients are discharged without follow up
- Around 35% of attendances are when GP practices are open why do they not access their GP practice?
- Patients are more likely to come from areas with lower socio-economic status
- Children attend at a disproportionate level
- Children are twice as likely to attend in hours than adults but, these may be older teenage children

Examination of unplanned admissions reveals that there are high rates of unplanned admissions which are similar to the north east in general. There were 2443 emergency admissions in a 3 month period i.e. 25/30 patients per days. These were made up as follows:

- Respiratory 20%
- Coronary Heart Disease 17%
- Ear Nose & Throat 14%
- Dehydration and Gastroenterology 13%
- Convulsions and Epilepsy (fits) 9%

Rates per 1,000 population vary considerably between localities and reasons for admission. It was pointed out that patients from Easington are 54% more likely to be admitted on an unplanned basis as patients from Derwentside. Further work is needed to determine why this occurs.

Following stakeholder event a definition was arrived at for urgent care which was 'an individual's need for care that is not predicted'.

The future model of care will be based on the principles that have come from national and local drivers as well as the outcomes of the two stakeholder events held in December. The principles are that the service shall be:

- Operated 24 hours a day, every day of the year.
- Seamless for patients and shall be simpler to access.
- Delivered primarily by determinations of clinical need and not by patient demand.
- Managed in partnership between organisations as a truly integrated whole system.

An outline strategy will be launched on 11th January and this will include all stakeholders previously involved. Feedback on the strategy is to be requested D:\moderngov\Data\AgendaltemDocs\8\2\8\Al00016828\healthscrutiny0701080.doc

and a revised outline strategy will be submitted to PCT meetings following. The third stakeholder event will be held on 28th January to finalise the strategy feedback. Following this there will be consultation with all stakeholder groups such as NEAS and practice based commissioning groups to allow them to understand the implications of the changes. The strategy and specifications for contracts will then be published. There will be one point of contact for patients to access services.

Reference was made to the streamlining of crisis resolution services and it was pointed out that this is likely to have an impact when patients with mental health or substance misuse problems present themselves at A& E or at urgent care centres where staff will probably not be trained to deal with them. It was explained that this will need to be picked up in the key work streams and dealt with in the strategy.

Resolved:

That the presentation be noted.

Signed Councillor..... Chairman of the meeting held on 7 April 2008

Item 9

HEALTHY BOROUGH WITH STRONG COMMUNITITES OVERVIEW & SCRUTINY COMMITTEE

15 APRIL 2008

REPORT OF CHAIRMAN OF THE COMMITTEE

WORK PROGRAMME

SUMMARY

This report sets out the Committee's current Work Programme for consideration and review.

RECOMMENDATIONS

1. That the Committee's Work Programme be reviewed.

DETAIL

- 1. In accordance with Overview & Scrutiny Procedure Rule 8 of the Council's Constitution, Overview & Scrutiny Committees are responsible for setting their own work programme.
- 2. Each Overview & Scrutiny Committee should agree a realistic, achievable and considered work programme on the understanding that, from time to time, more urgent or immediate issues may require scrutiny. Issues may, for example, be raised by Cabinet reports, Members' constituency business or be referred to Scrutiny by Cabinet in advance of a Cabinet decision.
- 3. The current Work Programme for this Committee is appended to the report which details:-
 - Scrutiny Reviews currently being undertaken.
 - Scrutiny review topics held in reserve for future investigation.
 - A schedule of items to be considered by the Committee for the period to 31st March 2009.

4. Scrutiny Review

The Committee should aim to undertake a small number of high quality reviews that will make a real difference to the work of the Authority, rather than high numbers of reviews on more minor issues. Overview & Scrutiny Committees should normally aim to undertake two reviews concurrently. Any additional review topics that have been agreed by Members will be placed on a reserve list and as one review is completed the Committee will decide on which review should be undertaken next.

A workshop was held for Overview and Scrutiny Members on 20th February 2008 to discuss the role of the Committees within the period leading to the

establishment of a new Unitary Council in April 2009. An outcome from the workshop was that the Council's Overview and Scrutiny Committees consider undertaking a State of the Borough Review that would look at achievements within each of the Council's Ambitions. This Review would provide a benchmark for future assessment, highlight areas for improvement and, where relevant, could make appropriate recommendations to the new council.

The Council's three Overview and Scrutiny Committees have agreed to undertake a State of the Borough Review and that the following Review Groups be established to examine each of the Council's ambitions:

Committee

Review Groups

Healthy Borough with Strong Communities O&S Cttee

Prosperous and Attractive Borough O&S Cttee

- Healthy Borough Review Group
- Strong Communities Review Group
- Prosperous Borough Review Group
- Attractive Borough Review Group

The final reports from each of these reviews would be combined to form a single State of the Borough report.

5. Business for Future Meetings

The Committees Work Programme for the period leading to the establishment of a new Unitary Council in April 2009 is attached for consideration.

Members are requested to review the Committee's Work Programme and identify, where necessary, issues that they feel should be investigated by the Committee. The Work Programme will need to be carefully managed to ensure that the most important issues are considered in the limited time available.

It will not always be possible to anticipate all reports which will need to be considered by an Overview & Scrutiny Committee and therefore a flexible approach will need to be taken to work programming.

4. FINANCIAL IMPLICATIONS

None associated with this report.

5. CONSULTATION

Contact Officers:Jonathan SleeTelephone No:(01388) 816166 ext 4362Email Address:jslee@sedgefield.gov.ukWard(s):Not ward specificBackground PapersNone

HEALTHY BOROUGH WITH STRONG COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE

WORK PROGRAMME

Ongoing Reviews

State of the Borough Review

Future Reviews

The following review topics have been identified by the Committee for future review. As one review is completed Members will decide which review should be undertaken next.

ANTICIPATED ITEMS

2008/09 Municipal Year

June 2008*

• Performance Indicators – 2007/08 Year End Performance

September 2008*

- Overview and Scrutiny Review Group Report- Review of Regeneration of Older Private Sector Housing – Progress on Action Plan
- Overview and Scrutiny Review Group Report: Leisure Centre Concessionary Pricing Scheme – Progress on Action Plan

October 2008*

• Overview and Scrutiny Review Group Report Tourism within the Borough – Progress Update

November 2008*

- Healthy Borough Overview & Scrutiny Review Group Report
- Strong Communities Overview & Scrutiny Review Group Report
- Half Yearly Performance Report

January 2009*

 Overview and Scrutiny Review Group Report – The Provision of Affordable Housing – Progress on Action Plan

February 2009*

• No items identified

*Meeting dates subject to approval at Annual Council in May 2008.