Sunderland
City Council

SCRUTINY COMMITTEE

AGENDA

Meeting to be held in the Civic Centre (Committee Room No. 1) on Thursday, 16th April, 2015 at 5.30 p.m.

Membership

Cllrs, Davison, Howe, T. Martin, David Snowdon, Dianne Snowdon, Waller and N. Wright

Co-opted Members - Ms A. Blakey, Ms R. Elliott, Ms. H. Harper and Mr S. Williamson

ITEM		PAGE
1.	**Apologies for Absence**	-
2.	**Minutes of the last Ordinary Meeting of the Committee held on 12th March, 2015** (copy attached).	1
3.	**Declarations of Interest (including Whipping Declarations)**	-
	Part A – Cabinet Referrals and Responses	
	No items	
	Part B – Scrutiny Business	
4.	**Children and Young People's Community Services Update** Report of the Head of Scrutiny and Area Arrangements (copy attached).	9

For Further information and assistance, please contact:David Noon Principal Governance Services Officer   Tel: 561 1008
                    Email: david.noon@sunderland.gov.uk

Part C – Scrutiny Lead Member Update

Part D – Health Substantial Variations to Service

No items

Part E –CCFA/Members Items/Petitions

No items

E. WAUGH,
Head of Law and Governance,
Civic Centre,
SUNDERLAND.

8th April, 2015.

At a meeting of the **SCRUTINY COMMITTEE** held in the **CIVIC CENTRE SUNDERLAND** on **THURSDAY, 12th MARCH, 2015 at 5.30 p.m.**

Present:-

Councillor N. Wright in the Chair

Councillors Davison, Howe, T. Martin, David Snowdon and Dianne Snowdon together with Mrs Blakey and Mr. Williamson.

Apologies for Absence

Apologies for absence were submitted to the meeting on behalf of Councillor Waller.

Minutes of the last Meeting of the Committee held on 12th February, 2015

1.   RESOLVED that the minutes of the last ordinary meeting of the Scrutiny Committee held on 12th February, 2015 (copy circulated), be confirmed and signed as a correct record subject to the deletion of Councillors David and Dianne Snowdon from the list of members submitting apologies for absence.

Declarations of Interest (including Whipping Declarations)

There were no declarations of Interest made.

Public Health Wellness & Culture Scrutiny Panel Referral: Substance Misuse Treatment Services

The Lead Scrutiny Member for Public Health, Wellness and Culture submitted a report (copy circulated) which provided Members with the findings of the Public Health, Wellness and Culture Scrutiny Panel on an item commissioned by the Committee in relation to the Sunderland Substance Misuse Treatment Service.

(For copy report – see original minutes)

Karen Brown, Scrutiny Officer introduced the report highlighting the discussions undertaken by the Panel and the conclusions reached. Members' attention was drawn to appendix 2 of the report which detailed the Panel's findings to the Committee. With regard to the performance monitoring aspect of the report, Ms Brown advised that the second paragraph of the section (page 20 of the agenda papers) had been amended as follows.

'Providers are required to report to the commissioner any death of an individual known to services. At this point in time, there is no evidence of a correlation between the change in services and an increase in deaths. Commissioners undertake an annual audit in relation to drug related deaths

accessing records in the coroner's office. This is a more reliable data source and will be scrutinised to identify any links or trends.'

Graham King, Head of Integrated Commissioning then addressed the Committee to place the issue in context and describe the journey undertaken by the Authority from the re commissioning of the substance misuse service in August 2013, the commissioning of a review in May 2014, the rapid assessment of the Sunderland Adult Drug and Alcohol Treatment system between December 2014 and January 2015, through to the first meeting of the Substance Misuse Improvement Board held on 12th February, 2015.

Gillian Gibson, Consultant in Public Health, then drew Members' attention to the Cabinet report attached as appendix1 which had been approved by the Cabinet at its meeting held the previous day. The report had outlined a forward plan for the delivery of the substance misuse treatment and prevention services and had sought approval to commence the procurement of various elements of the service. Ms Gibson added that it was envisaged that the Service would be in place as soon as possible after September 2015.

The Chairman then welcomed and introduced John Liddell, Health Improvement Manager from Public Health England together with Beverley Oliver, Public Health England's Health and Wellbeing Programme Lead who proceeded to brief the Committee on their role in undertaking the rapid assessment of the Sunderland Adult Drug and Alcohol Treatment System. Copies of the findings from the Rapid Assessment were table for the information of Members.

The Chairman thanked the speakers for their presentations and then provided the Committee with the opportunity to ask questions on what they had heard and on the reports in front of them.

Councillor Tom Martin referred to page 21 of the agenda papers and the recommendation from Public Health England that an independent mediator was commissioned to work on relationship issues between agencies; and asked whether this recommendation had been implemented. Mrs Gibson confirmed that the Independent Mediator had been appointed and that the meetings with providers had started that week.

Councillor Davison referred to the interim arrangements that had been established and asked Mrs Gibson if she was satisfied. Mrs Gibson replied that she was. A range of alternatives had been considered however they would have resulted in clients being unable to access the structured treatment services currently available to them. The interim arrangements would allow this treatment to continue

Councillor Howe expressed his concern that the problems identified had existed for two years before they had been brought before the Scrutiny Committee and that it had taken the intervention of Councillor Kay to ensure this had happened. Likewise the Chairman stated that she had been dismayed that the overview and scrutiny function of the Authority had been left in the dark about the issue. She stated that where concerns were raised about the performance of any Council function, the matter must not be left in the ownership of a single Officer or Councillor. Mr King acknowledged that the issue had been brought to the Committee a lot later than it should have been. He believed that this would be addressed through the Panel recommendations in that the Substance Misuse Improvement Board would include a

Scrutiny Committee member and that there would be quarterly reports to the Committee on the performance of the new service. Mr King advised that there had been no deliberate attempt to hide the issue from the Scrutiny Committee.

Councillor Davison asked whether the 30% budget cut had contributed to the decline in performance levels of the service. She also asked whether there was any evidence that the payment by results system worked? Mr King advised that there was no correlation between cost and performance it was more to do with the way partnerships had worked within the pathway. Ben Seale, Public Health Commissioning Manager informed members that payment by results had been applied to a number of performance indicators such as Hepatitis B immunisation and the alcohol pathway and had worked well in these cases. The Chairman stated that she remained to be convinced. From her point of view payment by results appeared to be more of a mechanism to punish rather than one that drove the delivery of good practice. Mr. Seale replied that its main benefit was that it sharpened the providers focus on the delivery of outcomes. Councillor David Snowdon stated that with regard to payment by results, providers were incentivised to deal with the easiest of cases as a priority to get their 'numbers up' while the more difficult time consuming cases were pushed to one side.

Councillor Davison stated that mention had been made of a decrease in the waiting time to access the service and asked what this currently was. The Committee was advised that the waiting time was within 5 days from the date of referral.

Mr. Williamson stated that was he disappointed to see that there were recommendations concerning recognition of the customer voice when he would have hoped that it was already embedded in the process. There was a lot to be gained from speaking to the customer and he supported the recommendation for a clear plan of how the customers' voice was to be heard and fed back to the senior level.

The Chairman asked Mrs Gibson and Mr Seale to ensure a greater emphasis was placed on the voice of the service user. Mr Williamson added that the service users at the point of delivery were of particular importance.

Councillor Copeland in the capacity of an observer stated that she was shocked that officers had sat on the problem for two years. The Chairman interjected and stated that there was no suggestion that officers had sat on the issue. It was clear that steps had been taken to address the problem but concern centred on the amount of time taken before the Committee was informed of the issue. It was the role of the Committee to be a critical friend and therefore it wanted and needed to be informed. When major issues arose the question was always asked as to why it hadn't been scrutinised more closely and it was the scrutiny function upon which the spotlight always fell.

There being no further questions, the Chairman thanked the officers from the City Council and Public Health England for their attendance. In addition she also thanked Councillor Kay for bring the issue to the Committee's attention and Councillor Howe and the Public Health, Wellness and Culture Scrutiny Panel for their investigation of the matter.

2.   RESOLVED that:-

i) A member of the Scrutiny Committee be appointed to sit on the Substance Misuse Improvement Board;

ii) The performance of the new Substance Misuse Service be reported to the Scrutiny Committee on a quarterly basis and that in the interim an information report be submitted as soon as possible on the progress made;

iii) Representatives of the service providers be invited to attend a meeting of the Committee in due course;

iv) Measures be taken to ensure the roles and relationships between the Sunderland Safer Partnership Board and Scrutiny are clarified and understood by all involved including the development of a Communications Plan;

v) Investigations be made into the potential adaptation of the Health Protocol as a template for use with internal services and that progress made in this regard be reported to the Committee in due course.

Safer Sunderland Annual Report 2013/14

The Lead Policy Officer for Community Safety submitted a report (copy circulated), which highlighted for Members' information, some of the Safer Sunderland Partnership's key achievements in delivering it's priorities during 2013-14.

(For copy report – see original minutes).

Councillor H. Trueman, Deputy Leader, introduced the report following which Stuart Douglass, Lead Policy Officer for Community Safety, outlined the progress made in tackling priority issues such as domestic violence, anti-social behaviour, improving the safety and feelings of high risk victims and vulnerable groups, re offending, cohesion and safeguarding.

Councillor T. Martin referred to the 10% increase in shoplifting and asked if the current economic situation was to blame. Councillor Trueman and Mr Douglass advised that there was no evidence that the downturn in the economy and the changes to the benefits system had driven desperate people to steal. It was thought however that 'professional' shoplifters were turning towards everyday items rather than higher end goods because the state of the economy had created a 'demand' for these essential products.

In response to an enquiry from Mrs Blakely regarding the misuse of legal highs and alcohol and the links to child sexual exploitation, Mr Douglass replied that there was no evidence of any occurrence in Sunderland. The links however were acknowledged and operation sanctuary had found such evidence in relation to offences committed in the west end of Newcastle.

Mr. Williamson having sought assurances that measures were in place to prevent a 'Sheffield' style situation were despite data and trends being available they were ignored, Mr Douglass advised that Sunderland had robust intelligence sharing meetings in place involving key Council and Health officers and Chaired by Northumbria Police. There was also a strong strategic approach led by the Sunderland Safeguarding Board. Councillor Trueman advised that Vera Baird, Crime Commissioner, had advised at Panel meetings that data existed however he was not sure as to the extent to which it could be shared. He advised that he would seek clarification from Ms Baird. The Chairman advised that this was vital. She stated that we were all aware of our responsibilities but 'did not know what we did not know.'

The Committee needed to find ways in which it could become better informed. In this regard she would be meeting with Neil Revely, Executive Director of People Services and Colin Morris, the new Chair of the Sunderland Safeguarding Board.

There being no further questions, the Chairman thanked Councillor Trueman and Mr. Douglass for their attendance and it was:-

3.   RESOLVED that the report be received and noted.

Health and Social Care Integration and the Better Care Fund.

The Chief Officer, Sunderland Clinical Commissioning Group (CCG) and Executive Director of People Services submitted a report (copy circulated) which presented the Committee with an update in relation to the vision for the integration of health and social care in the city via the mechanism of the Better Care Fund.

(For copy report – see original minutes).

Members were informed that the fund was intended to be a catalyst to improve services and achieve value for money through organisations agreeing a joint vision of how integrated care would improve outcomes for local people and achieve efficiencies. The fund would be allocated to local areas where it would be put into pooled budgets under joint governance between CCGs and local authorities. A condition of accessing the money was that CCGs and local authorities must jointly agree plans for how the money would be spent. In Sunderland agreement had been reached to pool the council's adult social care budget and all out of hospital spend from the CCG to create an overall BCF totalling £158m.

The vision aimed to ensure that local people had easy and appropriate access to health and social care solutions which were easy to use and avoided duplication. Work would be undertaken with citizens, patients, and carers, as well as those who could support those solutions, including health and social care providers to change behaviours to ensure appropriate care, in the right place at the right time. The new system aimed to consist of truly integrated multi-agency working so that local health and social care systems worked as a whole to respond to the needs of local people.

Councillor Davison asked what would be done to improve the quality of health in Care Homes. Ian Holliday, Head of Joint Commissioning at NHS Sunderland CCG advised that traditionally once a person entered a care home, the community nurse ceased visits as it was assumed that the home would have its own nursing staff. Today this was no longer the case. The community nurse would continue to visit the patient as if he/she were still in their own home. There was a drive to encourage all the residents of a care home to register with the same GP practice.

Mr Williamson made the point that school buildings were often under used and suggested that as such they could become delivery points for health services for children who would already be on site. This would help in instances where children missed appointments because their parents were unable to take time off work or had arrived late owing to a busy schedule. The Chairman stated that this was an excellent and very valid point. Mr Holliday advised that at the moment the programme only applied to adult care however this was something that would be borne in mind if hopefully it was extend to children's services.

Chairman referred to Mr. Holliday's remark that Sunderland had been successful in the NHS's Vanguard programme and asked what this entailed. Mr Holliday advised in January 2015 the NHS had invited applicants to become 'Vanguard sites' for the new care models programme, in delivering and supporting improvement and integration of services. On 10th March Sunderland was announced as one of 29 successful applicants out of 269. Sunderland had entered under the category of 'Multispecialty Community Providers – Moving Specialist Care Out of Hospitals and into the Community.'

The Chairman having asked that Mr King and Mr Holliday take back the Committee's congratulations to their staff on achieving the award, it was:-

4.   RESOLVED that the report be received and noted and that further progress reports be submitted in due course.

Care Act Consultation Outcomes

Alan Caddick, Head of Housing Support and Community Living, presented a report (copy circulated) regarding the outcomes of the Council's recently concluded Care Act consultation exercise undertaken in support of wider Care Act implementation activity.

(For copy report – see original minutes)

Members were informed that the Care Act replaced virtually all existing Social Care law and guidance, and the Council was required to implement the Act's requirements starting from April 2015. As part of this, the consultation exercise was undertaken between 9th February and 2nd March 2015 to raise awareness of these changes, and of people's views/ concerns about any of these. A press release was issued to launch the exercise and also to help raise awareness of the Care Act amongst the wider public. The major part of the exercise consisted of the issue of just over 3,330 letters to the council's current social care customers. An 'easy read' version of the letter and Care Act Summary were developed by Sunderland People First, and were issued to just over 200 customers.

Customers that wished to pass on any views could do so in a number of ways, with the letter advising of the following:

- An e-consultation exercise on the councils Care Act Landing page.
- Via a dedicated helpline number covered by the Customer Service Network.
- Via one of 5 arranged drop in events. (One was arranged in each local area and two of the meetings were also arranged in early evening to allow more people to attend than could otherwise have been the case).

Mr Caddick informed Members that there had been a limited public response to the consultation comprising:-

- 3 individual responses on the e-consultation site
- 15 people who attended an event completed a questionnaire
- 30 calls to the customer service network

- Approximately 40 people attending the 5 events – (the majority being carers rather than people that received services themselves)

Mr Caddick and Mr Sahota (Head of Personalisation), having addressed comments and questions from members in relation to budgetary pressures, the lack of timeliness in respect of Government Guidance and consulting more specifically with the voluntary sector, the Chairman thanked them for their attendance and it was:-

5.   RESOLVED that the report be received and noted and that a further progress report be submitted in due course.

Notice of Key Decisions

The Chief Executive submitted a report (copy circulated) providing Members with an opportunity to consider those items on the Executive's Notice of Key Decisions for the 28 day period from 10th February 2015.

(For copy report – see original minutes).

The Chairman asked that Members having any issues to raise or requiring further detail on any of the items included in the notice, contact Nigel Cummings, Scrutiny Officer, for initial assistance.

6.   RESOLVED that the Notice of Key Decisions be received and noted.

Annual Work Programme 2014/15

The Chief Executive submitted a report (copy circulated) attaching for Members' information, the work programme for the Committee's work being undertaken during the 2014/15 council year.

(For copy report – see original minutes).

7.   RESOLVED that the information contained in the work programme be received and noted.

Lead Scrutiny Member Update

The Lead Scrutiny Members submitted a joint report (copy circulated) providing an update to the Scrutiny Committee regarding the work of each of the six Lead Scrutiny Members and supporting Panels.

(For copy report – see original minutes).

The Committee received an update from those Lead Scrutiny Members present on the issues that had arisen following the publication of the agenda and therefore not included in the report before the Committee.

8.   RESOLVED that the update of the Lead Scrutiny Members be received and noted.

The Chairman then closed the meeting having thanked Members and Officers for their attendance and contributions to the meeting.

(Signed)   N. WRIGHT,
             Chairman.

SCRUTINY COMMITTEE   **16 APRIL 2015**

CHILDREN AND YOUNG PEOPLE'S COMMUNITY SERVICES – UPDATE

Report of the Head of Scrutiny and Area Arrangements

1.   PURPOSE OF THE REPORT

1.1   To provide the Scrutiny Committee with an annual performance report from Northumberland Tyne and Wear NHS Foundation Trust (NTW) on Sunderland's Children and Young People's Community Services (CYPS).

2.   BACKGROUND AND CURRENT POSITION

2.1   At its meeting on 13 September 2012 the Scrutiny Committee received a report detailing the outcomes of the announced inspection of Safeguarding and Looked After Children's Services in Sunderland. In discussing the report concerns   were raised in relation to the waiting times for CAMHS Tier 2 and Tier 3 support and it was agreed that the Children's Services Scrutiny Panel should be commissioned to investigate this further.

2.2   The Children's Services Scrutiny Panel, as commissioned by the Scrutiny Committee, robustly monitored and challenged officers and partners around the waiting times for access to child and adolescent mental health services. This took place over a period of 15 months and demonstrated that a number of practices and measures had been put in place to not only tackle the waiting lists but also to ensure that targets are met and service performance is enhanced.

2.3   Members of the Children's Services Scrutiny Panel acknowledged the improvement and progress made by NTW and the commitment to continued improvement through the initiation of CQUIN target incentives. The CCG, NTW and Local Authority have worked together to ensure that the newly designed service, now the CYPS Service, was fit for purpose and robust enough to ensure a consistent level of performance.

2.4   It was agreed following this detailed investigation by the Children's Services Scrutiny Panel, that future monitoring of the CYPS service be on an annual basis by the Scrutiny Committee.

2.5   A presentation is attached at **Appendix 1** provided by NTW which provides a detailed overview of the CYPS service including functions of the service, performance data and improvement plans for Members information.

3.   CONCLUSION

3.1   The information is presented to the Scrutiny Committee to provide an overview of the CYPS Service.

4. RECOMMENDATION

4.1 The Scrutiny Committee is recommended to consider and comment on the progress of the CYPS Service.

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Sunderland

Children & Young People's (CYPS) Community Services

About CYPS

- Part of NTW's Specialist Care Group

- Inpatient & Regional Services commissioned by NHS England

- Community Services commissioned by and aligned to CCGs

- All services are integrated providing support, assessment and treatment for young people with mental health problems including young people with a learning disability

- 0 – 18yrs

CAMHS - National Context

- Increasing T2 & T3 referrals

- Increasing level of acuity in referrals

- Increasing T2 & T3 case loads

- Increased waiting times across system

- High DNA Rates

- Increasing pressure on T4 Beds

**House of Commons
Health Committee**
Report & Recommendations

Children's and Adolescents' Mental Health and CAMHS

HC 342 Published on 5 November 2014 by authority of the
House of Commons London: The Stationery Office Limited
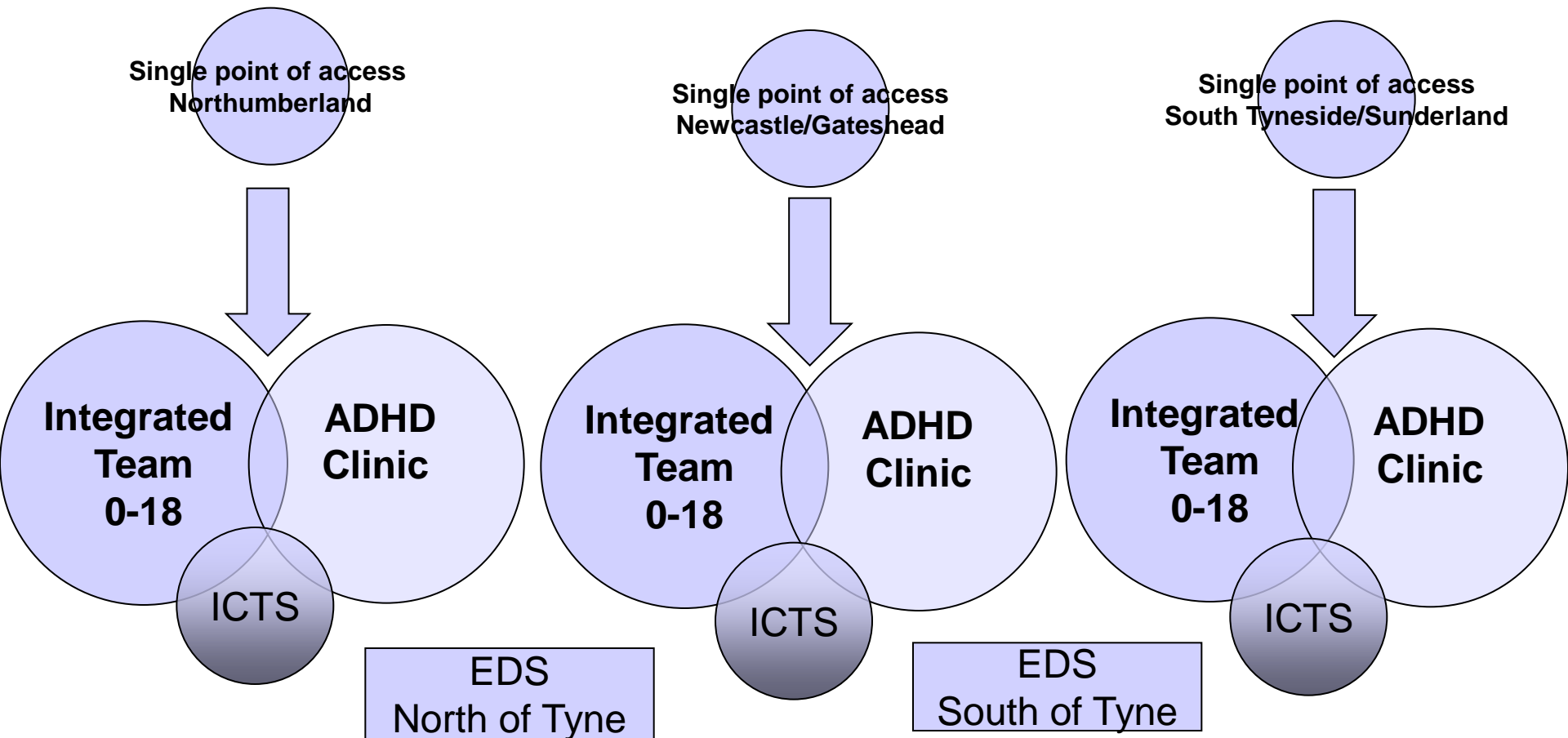
CAMHS - National Context

Future in mind
Promoting, protecting and improving our
children and young people's mental health
and wellbeing

Community CYPS Service Configuration

Single point of access
Northumberland

Single point of access
Newcastle/Gateshead

Single point of access
South Tyneside/Sunderland

Integrated Team 0-18

ADHD Clinic

ICTS

Integrated Team 0-18

ADHD Clinic

ICTS

Integrated Team 0-18

ADHD Clinic

ICTS

EDS
North of Tyne

EDS
South of Tyne

Community Service Functions

Integrated Team

Constitutes main element of the service and is made up of a multi disciplinary team of specialist mental health and learning disability staff who provide advice, support, assessment and treatment services. Care pathways have recently been re-developed in line with NICE Guidance

Attention Deficit Hyperactivity Disorder (**ADHD) Clinic**

The ADHD clinic system is designed to meet the needs of young people with a diagnosis of ADHD who are engaged in active treatment and require ongoing monitoring of their condition including medication titration, medication monitoring, physical health checks and interventions that will improve the young person's functioning based upon NICE Guidance.

(Team covers Sunderland & South Tyneside)

Community Service Functions

Intensive Care & Treatment Service (ICTS)

The team provide additional input for children and young people with significant and complex mental health need that require more intensive treatment programmes over a short period of time i.e where there is a mental health crisis. This service is delivered in collaboration with the Integrated Team and often prevents the need for a young person to be admitted to hospital. *(Team covers Sunderland & South Tyneside)*

Eating Disorder Intensive Community Treatment (EDT)

This service provides intensive community-based assessment, intervention and management services for young people with eating disorders. Services are delivered in partnership with the CYPS integrated team and other multi-agency partners to reduce the need for hospital admissions to regional eating disorder beds by providing high quality outcome focused care closer to home.
*(Team covers Sunderland, South Tyneside and Gateshead)*

Sunderland CYPS HUB & Clinic
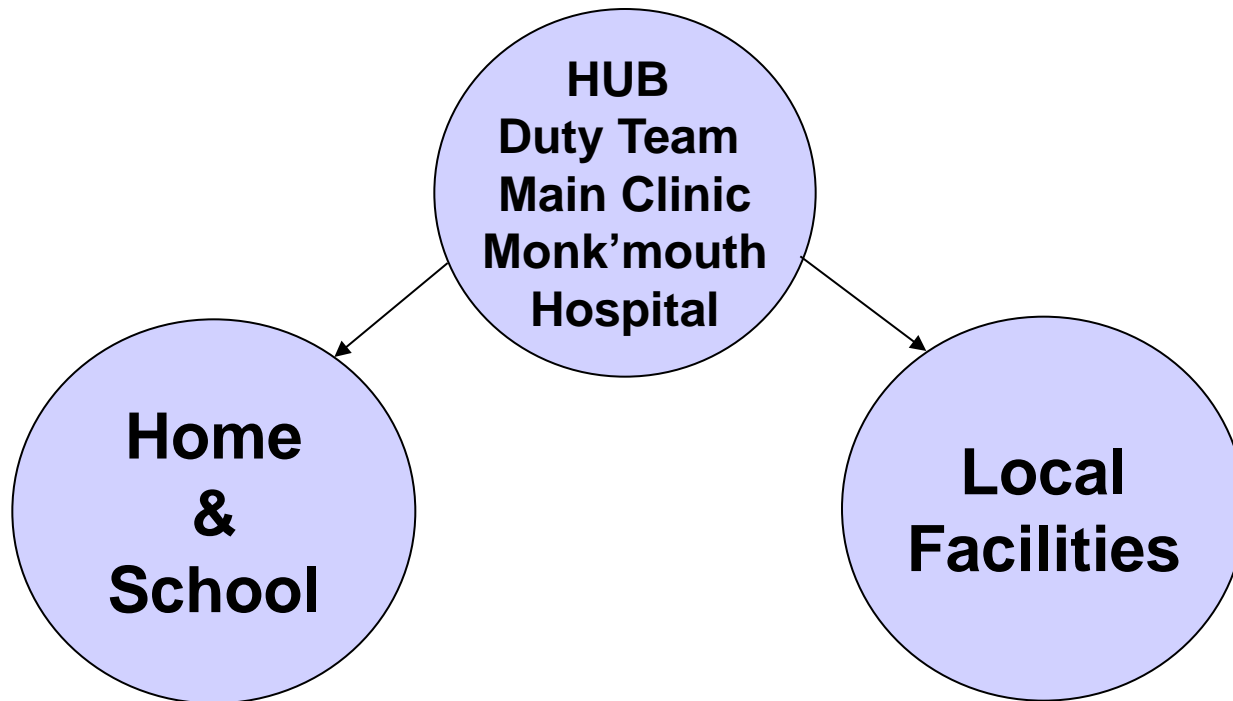
- Monkwearmouth Hospital is the administrative HUB and main clinic serving the area
- Lots of appointments take place in schools and young people's homes
- Currently looking to secure additional local clinic facilities

Sunderland CYPS Activity

Sunderland CCG - Total Referrals

Sunderland CCG - Total Discharges
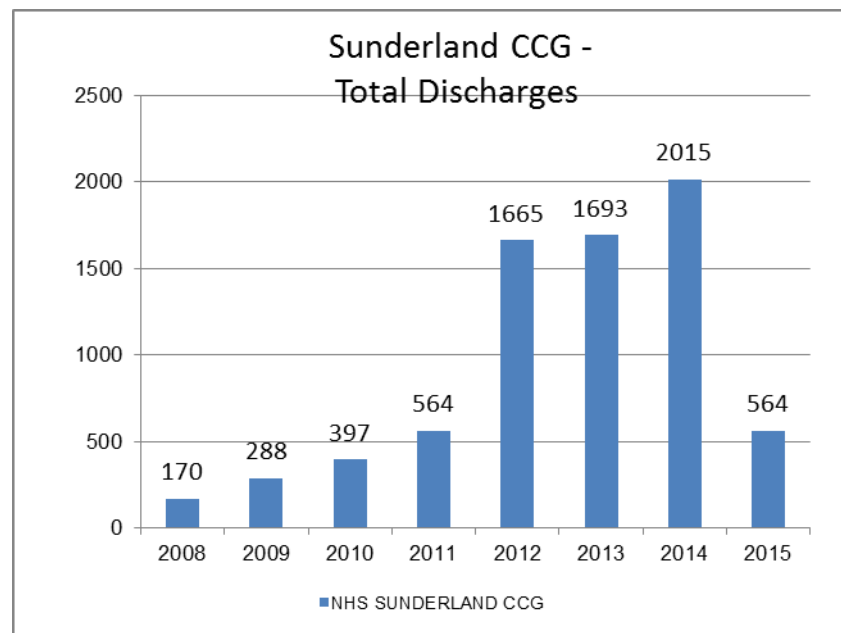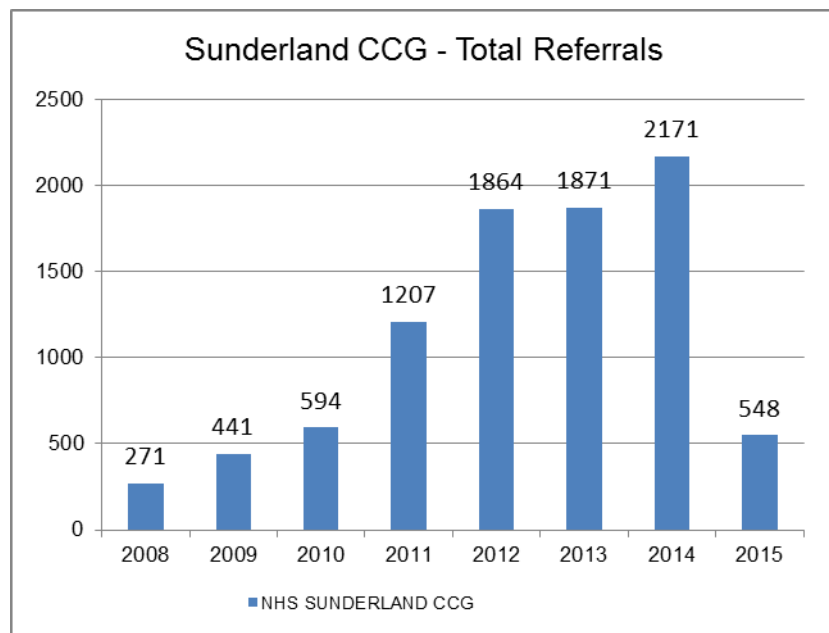
Sunderland's rate of referral increased significantly between 2011 - 2014
Referrals in 2015 are set to increase further with discharge rates
remaining steady over 2012 & 2013 and increasing over 2014
Newcastle 2014 = 1,508

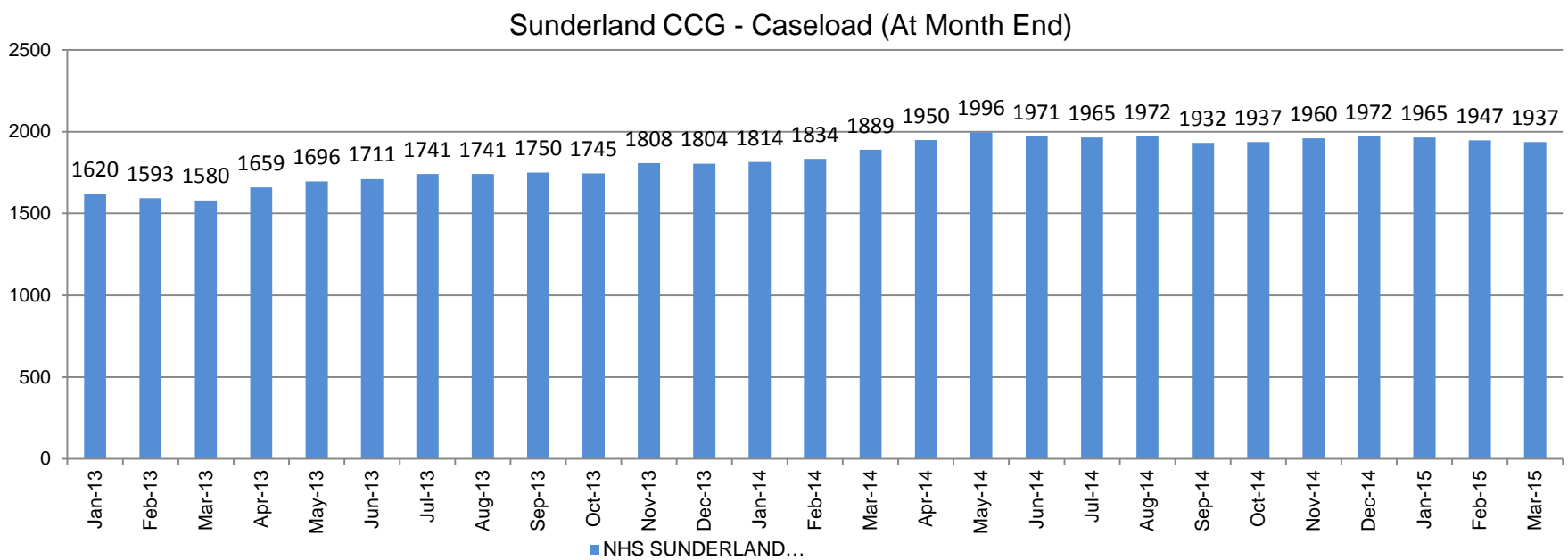# Sunderland CYPS Activity

Worksheet 6 (KPI 2.1) - CYPS Services Users - Received Referral Source:	Northumberland	Newcastle North & East	Newcastle West	Gateshead	South Tyneside	Sunderland
Adult Mental Health Services	1%			0%		0%
Child Health	1%		0%			
Children and Family Services (SM F)	2%			1%		
Children's Mental Health Services (SM F)	2%					
Children's Mental Health Services	3%					
Crisis Team	0%	0%	1%	1%	0%	1%
Education	**6%**	11%	9%	5%	4%	1%
Family Member	1%	0%	1%	3%	7%	5%
GP	**42%**	**57%**	**43%**	**46%**	**49%**	**42%**
Health Visitor	1%				1%	1%
Hospital (SM F)	0%	2%	1%	1%	2%	0%
Other	**8%**	**27%**	**30%**	**22%**	**10%**	**25%**
Paediatrician	**8%**	2%	9%	13%	8%	**13%**
Parent / Carer	0%			0%	1%	1%
Primary Health Care	4%					
School Health Advisor	**10%**		0%			
School Nurse (SM F)	3%			1%	4%	3%
Self Referral	1%	2%	3%	0%	0%	
Social Services	**8%**	0%	3%	3%	12%	**7%**
Targeted Youth Support (SM F)	1%					
Youth Offending Team	0%		0%		3%	4%	1%

Sunderland CYPS Activity

Sunderland CCG - Caseload (At Month End)

Bar chart values (NHS SUNDERLAND...):

Month	Value
Jan-13	1620
Feb-13	1593
Mar-13	1580
Apr-13	1659
May-13	1696
Jun-13	1711
Jul-13	1741
Aug-13	1741
Sep-13	1750
Oct-13	1745
Nov-13	1808
Dec-13	1804
Jan-14	1814
Feb-14	1834
Mar-14	1889
Apr-14	1950
May-14	1996
Jun-14	1971
Jul-14	1965
Aug-14	1972
Sep-14	1932
Oct-14	1937
Nov-14	1960
Dec-14	1972
Jan-15	1965
Feb-15	1947
Mar-15	1937

Sunderland's caseload has steadily increased since January 2013
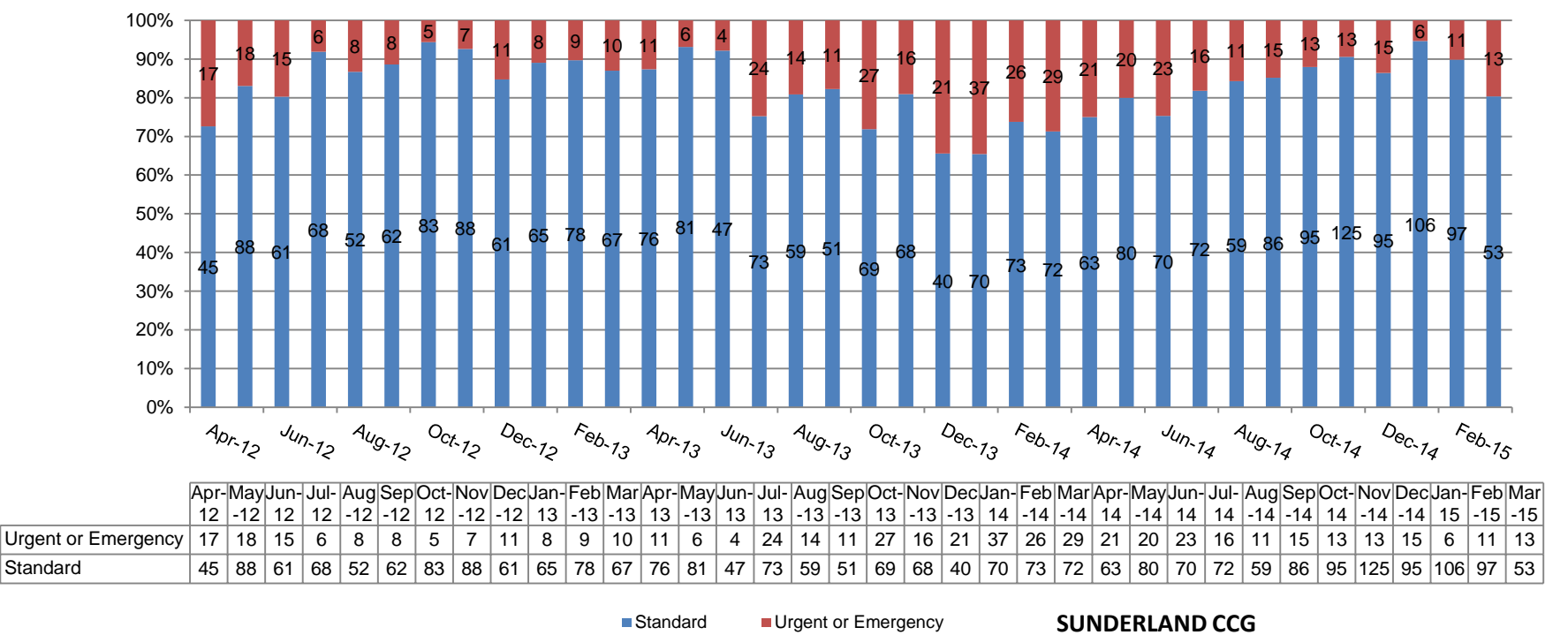With the overall caseload in 2014 levelling out between 1,937 – 1,996

Sunderland CYPS Activity

Worksheet 8 (KPI 2.3) - CYPS Services Users - Age Group as at 30.06.14	South Tyneside	Sunderland	Gateshead	Newcastle West	Newcastle North & East	Northumberland
CYPS (AMS) Service Users Aged 5 and Under	8.1%	**6.7%**	6.7%	4.9%	5.4%	5.7%
CYPS (AMS) Service Users Aged 6-13yrs	56.2%	**53.4%**	58.9%	55.8%	54.1%	55.4%
CYPS (AMS) Service Users Aged 14-16yrs	28.0%	**29.6%**	26.8%	28.3%	29.2%	28.4%
CYPS (AMS) Service Users Aged 17-18yrs	7.3%	**10.1%**	7.4%	10.4%	10.8%	9.9%
CYPS (AMS) Service Users Aged 19 and Over	0.4%	**0.3%**	0.2%	0.6%	0.5%	0.7%
Total	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

Worksheet 9 (KPI 2.4) - CYPS Services Users - Gender as at 30.06.14	South Tyneside	Sunderland	Gateshead	Newcastle West	Newcastle North & East	Northumbl'd
F	35.3%	**40.1%**	33.3%	34.0%	35.2%	33.7%
M	64.7%	**59.9%**	66.7%	66.0%	64.8%	66.3%
Total	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

The modal age of service users has changed slightly
in this quarter, with a decreasing
trend in the 14-16 category and increases in the 6-13 category
this will be monitored over the coming months.

Sunderland CYPS Referral Acuity

	Apr-12	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15
Urgent or Emergency	17	18	15	6	8	8	5	7	11	8	9	10	11	6	4	24	14	11	27	16	21	37	26	29	21	20	23	16	11	15	13	13	15	6	11	13
Standard	45	88	61	68	52	62	83	88	61	65	78	67	76	81	47	73	59	51	69	68	40	70	73	72	63	80	70	72	59	86	95	125	95	106	97	53

■ Standard   ■ Urgent or Emergency   **SUNDERLAND CCG**

Average 10 – 20 % of referrals are classed as Urgent or Emergency
Average was 20 – 30% between June 13 - June 14 which was a considerable peak and is higher than anywhere else in the trust

Sunderland CYPS DNA Rates

CCG	% DNA first appointments 1/4/14-30/6/14
Northumberland CCG	19.2%
Newcastle West CCG	28.9%
Newcastle North & East CCG	29.1%
Gateshead CCG	17.5%
South Tyneside CCG	17.3%
Sunderland CCG	**13.8%**

CCG	% DNA appointments 1/4/14-30/6/14
Northumberland CCG	14.2%
Newcastle West CCG	21.0%
Newcastle North & East CCG	17.7%
Gateshead CCG	14.9%
South Tyneside CCG	14.5%
Sunderland CCG	**17.1%**

Sunderland CYPS HoNoSCA Outcomes

CCG	Discharges in the period (patients with at least 2 attended appointments)	Effect size for discharges 1/4/14-30/6/14 where HONOSCA recorded
Overall NTW	948	0.74 medium
Northumberland CCG	296	0.89 large
Newcastle West CCG	99	0.55 medium
Newcastle North & East CCG	78	0.67 medium
Gateshead CCG	106	1.06 large
South Tyneside CCG	140	0.96 large
Sunderland CCG	**174**	**0.64 medium**

The effect size reports are based solely on those discharges in the period with HoNoSCA scores recorded on entry to the service and on discharge.

CYPS Capacity Forecast 2011 - 2016

- Increase in referral rate
- Decrease in discharge rate
- Increased caseload of up to 100% over 3 / 4 years

2011 ➔ 2016

CAPACITY   CAPACITY   CAPACITY

Referral Rate
Discharge Rate
Caseload

Northumberland, Tyne and Wear
NHS Foundation Trust
NHS
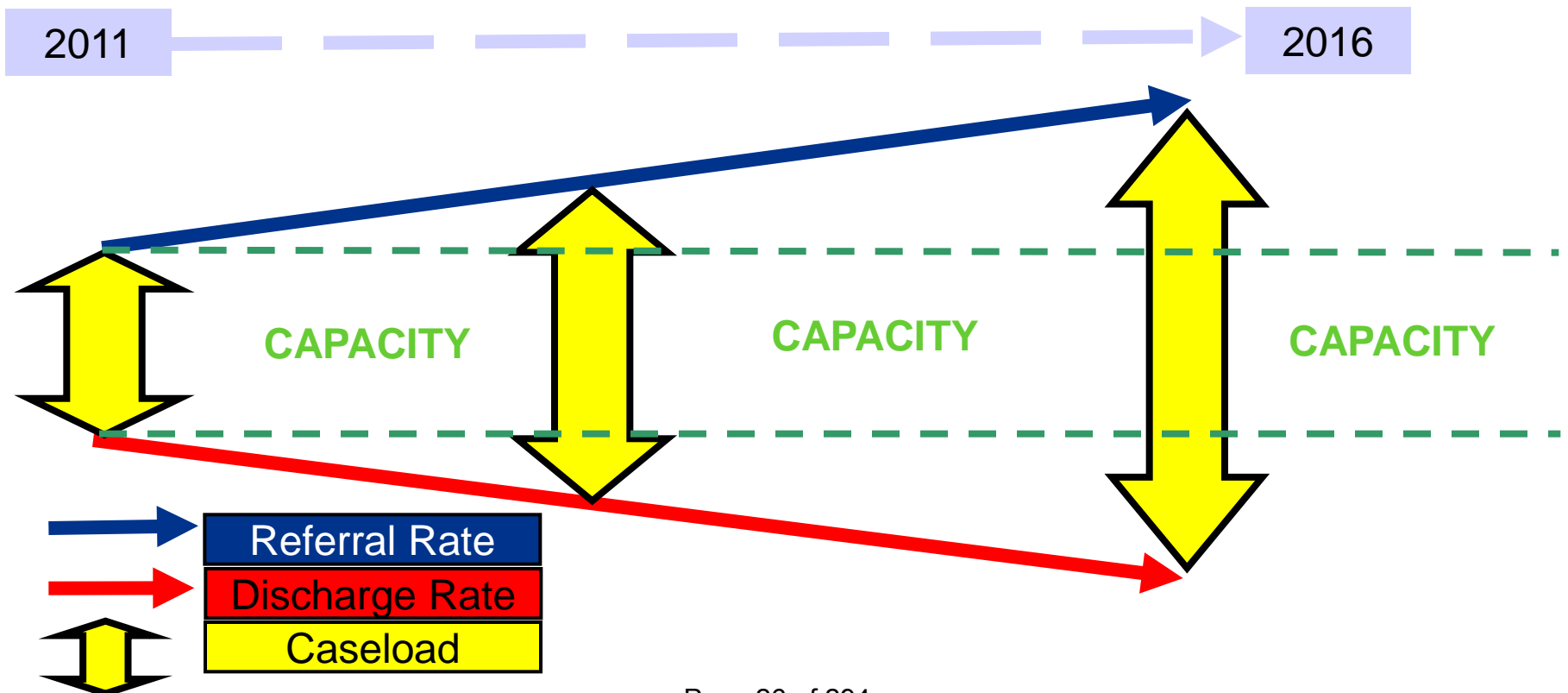
CYPS Preferred Forecast 2011 - 2016

- Continue to manage referral rate
- Increase in discharge rate by 50% per year
- Time limited treatment pathways (shorter treatment programmes)
- Maintain capacity = demand throughout years

2011 ----→ 2016

CAPACITY

CAPACITY

CAPACITY

Referral Rate

Discharge Rate
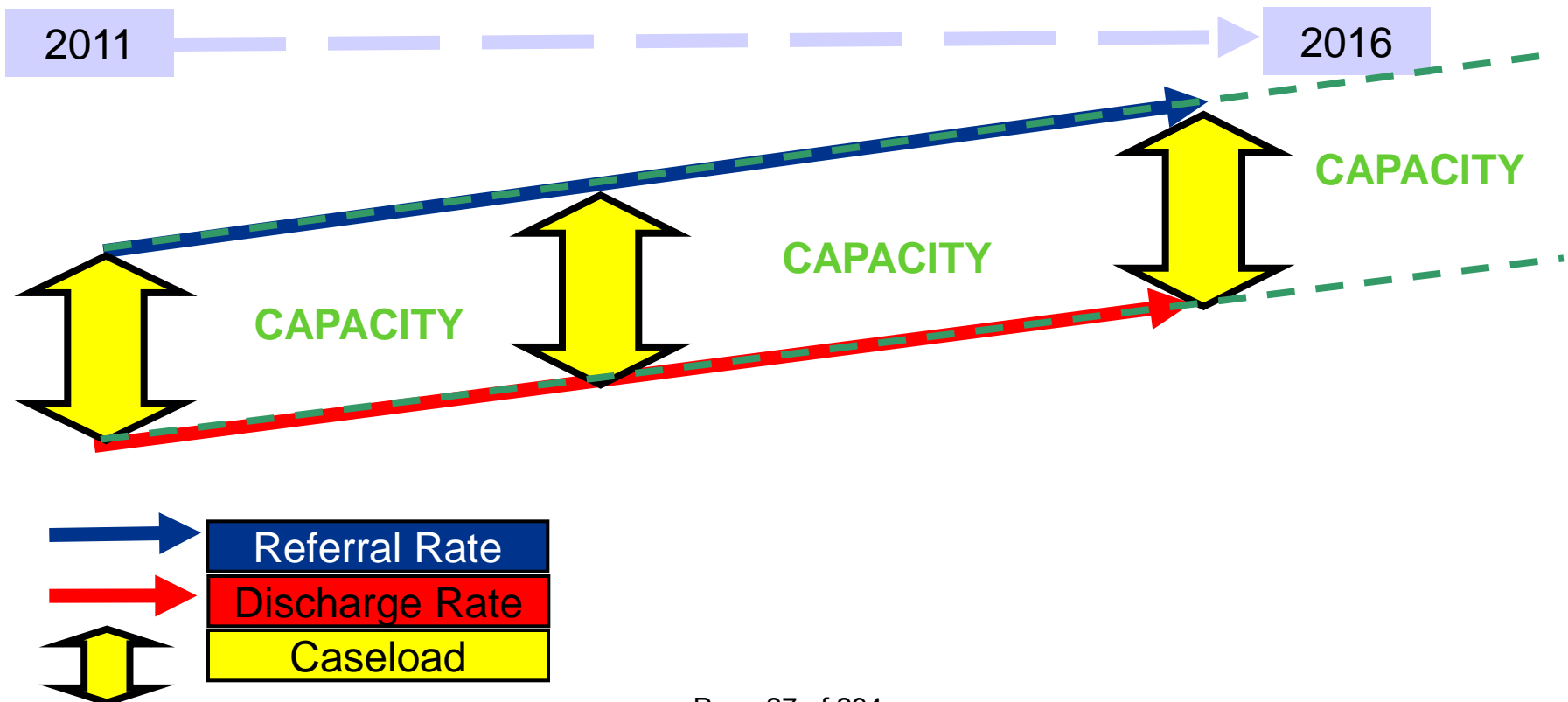
Caseload

CYPS Current Position 2015

- •Consistently high referral rate
- •Increasing discharge rate which matches referral rates
- •Still have very high caseload figures which currently outstrip capacity

2011 ➝ 2015

CAPACITY

CAPACITY

CAPACITY

	Referral Rate
	Discharge Rate
	Caseload
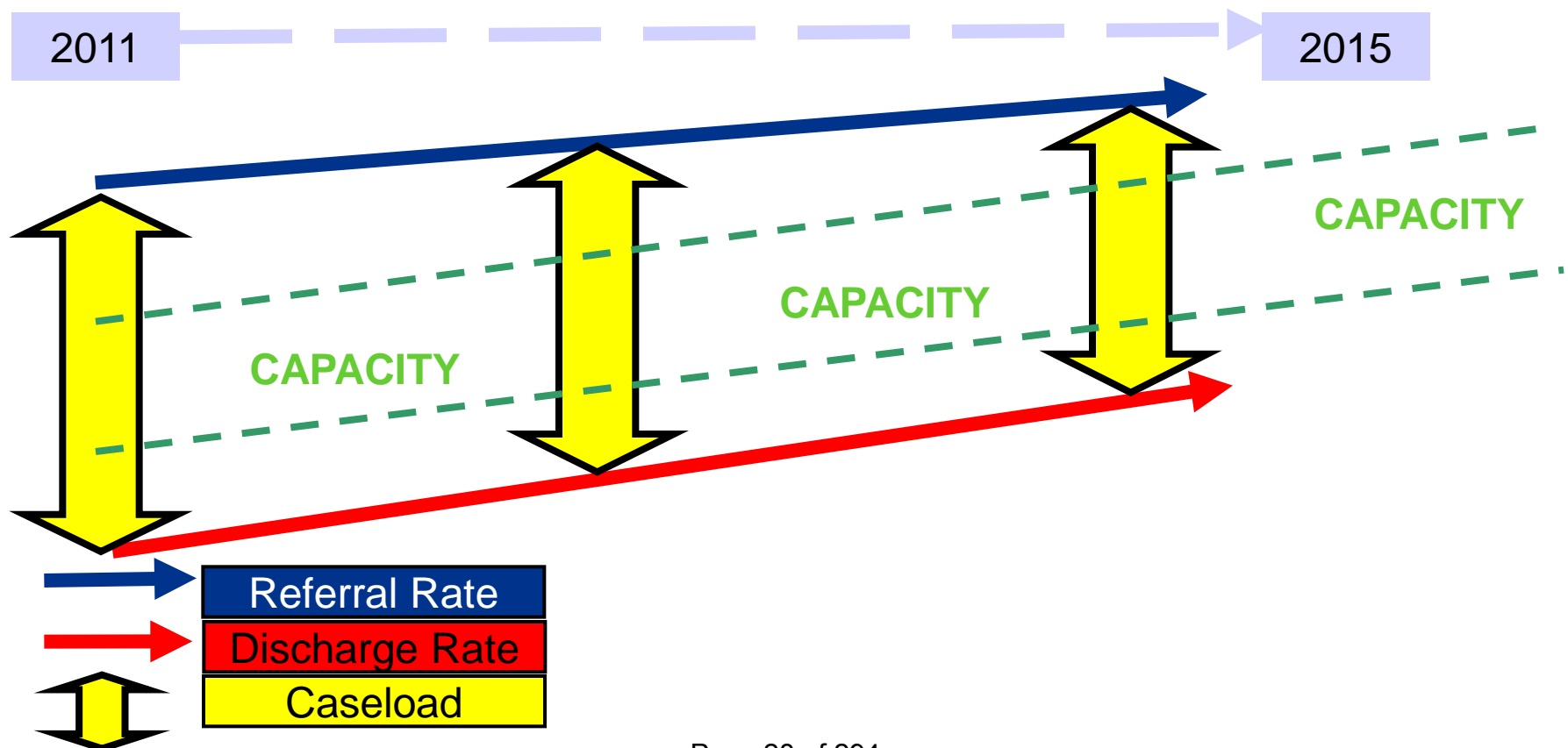
Current Improvement Plans

As from 1st October 2014 **70%** of accepted referrals were assessed and in treatment within 12 weeks of the date of referral with up to **20%** being seen urgently within 7 days

New treatment pathways have been developed in line with NICE guidance implemented as from 1st October 2014

Most episodes of treatment will be delivered within 6 to 12 sessions therefore reducing the length of stay in the service and significantly increasing throughput whilst reducing dependence upon specialist services

Continue to work with commissioners and partners on the improvement and development of the wider emotional health and wellbeing pathway for young people in Sunderland via the relevant strategic groups

Thoughts and Questions!

SCRUTINY COMMITTEE   **16 APRIL 2015**

BID ANNUAL UPDATE

Report of the Head of Scrutiny and Area Arrangements

1.   **PURPOSE OF THE REPORT**

1.1   To provide the Scrutiny Committee with a progress update on Sunderland BID – Business Improvement District.

2.   **BACKGROUND AND CURRENT POSITION**

2.1   The Skills, Economy and Regeneration Scrutiny Panel conducted a review in 2013/14 around the Diversification of the Local Economy. The review set out to examine the approach and progress being made in diversifying the local economy focusing on the software, creative industries and advanced manufacturing sectors.

2.2   As a result of the review a number of recommendations were formulated and agreed by Cabinet. One of the recommendations was around the continued communication with the Business Improvement District in relation to receiving updates on progress regarding delivery.

2.3   The presentation attached at Appendix 1 provides an overview of the BID through its first year of operation providing information on what has been delivered so far, the key projects for 2015 and the opportunities that exist to the BID and the city as a whole.

3.   **CONCLUSION**

3.1   The information is presented to the Scrutiny Committee to show the progress of Sunderland BID through its first year of operation.

4.   **RECOMMENDATION**

4.1   The Scrutiny Committee is recommended to consider and comment on the progress of Sunderland BID.
_____

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Sunderland Business Improvement District

1 Year On

Ken Dunbar
Chief Executive
7 April 2015

Sunderland
BUSINESS IMPROVEMENT DISTRICT

Background

- Successful campaign and successful ballot

- BID has an initial five year term and must work within agreed boundary

- Established the Company and Governance Arrangements

- Legal framework with necessary agreements in place

- Developed the BID brand and identity- "Experience it Here"

- Recruited team and established operating systems

- Early impact with events to create vibrancy in city centre

Sunderland
BUSINESS IMPROVEMENT DISTRICT

Bid Priorities

- BID priorities set out in the BID Business Plan- these are legally binding

- Putting the City on the Map

- A safer city centre

- A city to be Proud of

- Invigorating the evening economy

- Access all Areas

- A strong Business voice

What have we delivered so far?

Putting the City on the Map

- Summer and Autumn events and activities, including:
  - Sponsorship of Sanctuary at the Minster- great music, food and drink events
  - Stadium of Light Concerts - warm up acts
  - Vamos - building on World cup fever
  - African Festival - celebrating the arrival of the Lion King
  - Street Art projects - pavement art

- First comprehensive Events Guide

- Developed the Events Guide into VIBE Magazine working in partnership with 8 key organisations promoting vibrancy in the city

- VIBE magazine great medium to promote what is happening in the city

- Building a strong social media presence – 2,066 Facebook and 1,196 Twitter followers

Sunderland
EXPERIENCE IT HERE

A Safer City Centre

- Building a comprehensive picture of the crime and anti-social behaviour issues impacting on city centre

- Established BID Action Team to review crime challenges and develop BID led interventions

- Talking Camera project implemented in Park Lane

- New Area forums being developed which will assist in identifying crime and security issues

- Assessment of what is required to obtain Purple Flag status for Sunderland

- Work with the City Centre management group to look at licensing and other issues affecting safety in the city centre

Sunderland EXPERIENCE IT HERE

A City to be Proud Of

- Support and sponsorship of Britain and Northumbria in Bloom initiatives
  - ➢ More hanging baskets and planters

- Talking Cameras - key goal is to improve behaviours ie stop littering

- Regular photo evidence of environmental problems submitted to Council's city maintenance team - excellent response

- Encouraging landlords to develop/improve their properties wherever possible

- Working with landlords to improve use of empty properties with pop up galleries and shops
  - ➢ Caravan Gallery

Sunderland
EXPERIENCE IT HERE

Invigorating the Evening Economy

- Late night shopping and free parking after 3pm every Thursday
  - Over 50 shops open

- Entertainment every late night shopping evening

- Investment in Christmas with Advent Door competition, street entertainment and lighting the city

- Promoting Blues and Roots events

- Increased marketing and promotion of pubs and restaurants

- Business Boosters – ideas to encourage businesses to take advantage of events/shows coming to the city

Sunderland
EXPERIENCE IT HERE

Access all Areas

- Worked with Age UK's Champion's group using their Access audit on the city to encourage changes in design and street scene - Bridges Shopping Centre has made a number of adjustments to improve access for older people

- Developed street scene guidance and technical standards setting out the BIDs aspirations for the city, including signage

- Sought to influence design changes in Keel Square to make space more event ready from time of opening

- Use of BID Bulletin to advise businesses of major events (when known) and potential disruption

Sunderland EXPERIENCE IT HERE

Strong Business Voice

- Influence over key place shaping projects, such as the Investment Corridor

- Creation of BID Action Teams and move to Area Forums reflecting the key areas of the city

- Support for key initiatives such as the Intelligence hub and city wi-fi project

- Comprehensive BID database created – covering all businesses in the city centre levy and non levy payers

- BID representation on the Infrastructure group

- Working with key partners on VIBE group and City Centre Group to optimise resources

- New website created which will provide a vehicle for businesses to promote offers

Sunderland
EXPERIENCE IT HERE

Key Projects 2015

- Build evening economy and late night shopping campaign - encourage more shops to open and bars and restaurants to partake with offers

- Support and guide businesses to ensure they make the best of events coming to the city
  - use business boosters to increase the impact of events

- Support existing market provision and establish new quality markets

- Support Pride of Place projects such as Britain in Bloom and a" love your city" campaign

- Work with partners to gather better data to analyse trends and crowdsource ideas for growth

- Big Tidy event

- Improve marketing of the city through VIBE and other media platforms

- Create a city map and promote more through the BID website and social media pages

Sunderland
EXPERIENCE IT HERE

Opportunities

- Making the best of the City's great new asset - Keel Square

- Forthcoming legislative changes to support a bigger role for BIDs in place shaping agenda

- The new city centre College campus

- Vaux site – capacity to attract white collar jobs into the city

- Work with Asset Backed Vehicle – Siglion

- Use of digital technology to support business growth – apps, intelligence, and ability to connect businesses with customers in more creative ways

- The Investment Corridor

- Renewal/refurbishment of Mackies Corner

Remodelling of St Mary's Way / Livingstone Road

Sunderland
EXPERIENCE IT HERE

Opportunities contd...

- The 3/6/9 vision - link key events under a comprehensive theme across 2015 and succeeding years (Alice in Wonderland theme for 2015)

- The Tall ships event

- Fablab

- New Hotels

- A new Railway Station

Item 6

SCRUTINY COMMITTEE   16 APRIL 2015

SCRUTINY POLICY REVIEWS 2014/15

REPORT OF THE HEAD OF SCRUTINY AND AREA ARRANGEMENTS

1.   PURPOSE OF THE REPORT

1.1   To provide the Scrutiny Committee with the draft recommendations of the scrutiny policy reviews undertaken by the Lead Scrutiny Members and their supporting Panels.

2.   BACKGROUND

2.1   The scrutiny commissioning model is now in its third year. As part of the arrangements the Scrutiny Committee commissioned the Lead Scrutiny Members along with their respective scrutiny panels to undertake up to two policy reviews during 2014/15, the topics having been brought forward from discussions at the Annual Scrutiny Debate in May 2014.

2.3   Detailed evidence gathering for the policy review has taken place since June 2014, with the scrutiny panel's agreeing the content, conclusions and recommendations of the final reports at meetings in March and April 2015. The final reports are attached **(Appendix A-F) as below:**

Report	Panel	Policy Review Topic
A	Health, Housing and Adults	Tackling Loneliness and Social Isolation
B	City Services	Cemetery Regulations and the Introduction of a Medical Examiners Service
C	Responsive Services and Customer Care	i. Impact of Welfare Reform on Sunderland ii. Operation of Food Banks in Sunderland
D	Skills, Economy and Regeneration	Future Proofing of Skills
E	Public Health, Wellness and Culture	i. Strategies for the Prevention of Suicide ii. Tackling New Psychoactive Substances
F	Children's Services	Tackling Child Poverty in Sunderland

3.   POLICY REVIEWS 2013/14 – PROPOSED RECOMMENDATIONS

HHAS Scrutiny Panel

3.1   The recommendations of the *Tackling Loneliness and Social Isolation in Sunderland* Policy Review 2014/15 are:-

a)   To ensure that there is an effective launch and continued promotion of the community directory to local people, key stakeholders and providers;

b)   To explore and understand with key partners how a community connector scheme would operate in the city including issues of promotion, recruitment and training that enables anyone who wishes to take part the opportunity to do so;

c)   To look at how to develop arrangements to ensure that activities / initiatives are co-ordinated in order to minimise the potential for duplication and to provide a forum for sharing, learning and good practice;

d)   To ensure that a measure of loneliness and/or social isolation is included in the Joint Strategic Needs Assessment;

e)   To look at through integrated care the development of shared intelligence and how to ensure the use of all intelligence to help predict the softer issues within communities such as loneliness etc.;

f)   To explore the potential of an employee volunteer scheme within the council to provide opportunities for employees to volunteer their help to a local organisations, communities and projects;

g)   To explore the potential for adoption of the Campaign to End Loneliness evaluation tool on the effectiveness of interventions on loneliness once it is released.

City Services Scrutiny Panel

3.2   The recommendations of the *Cemetery Regulations and the Introduction of a Medical Examiners* Service Policy Review 2014/15 are:-

a)   That a review be undertaken into the Council's Cemetery Regulations and that this include the development of a clear overall policy statement;

b)   That the review include provisions governing kerb-sets and that the Council work retrospectively to bring up to standard;

c)   That given the sensitivity of the issues involved a consultation plan be established involving the Council website and engagement with key stakeholders;

d)   That officers investigate the possibility of establishing friends groups at older sections across the cemeteries.

e)   The Council continue to work with partners to prepare for introduction of Medical Examiners Service;

f)	That the financial implications of introducing the Medical Examiner be examined in more detail including the options for the funding of the service;

e)	That any consideration of future funding options take into account the sensitive nature of the service and likely issues of affordability

Responsive Services and Customer Care Scrutiny Panel

3.3	The recommendations of the ***Impact of Welfare Reform on Sunderland*** Policy Review 2014/15 are:-

a)	That the Council continues to work with its partners and other agencies to help to mitigate the impact and hardship resulting from welfare reform on the people of the city;

b)	That the Council continues to work with Jobcentre Plus in order to improve the clarity of information provide to claimants, particularly to prevent the unnecessary application of sanctions;

c)	That the Council and its partners continue to prepare for the introduction of Universal Credit across the city and monitor its effect on the pilot areas.

d)	That the Panel expressed its support for the continuation of the Council Tax Support at its current level during 2015/16;

e)	That the Panel supports the content and eligibility criteria suggested for the amended Crisis and Community Care Support schemes as set out in the report.

3.4	The recommendations of the ***Operation of Food Banks in Sunderland*** Policy Review 2014/15 are:-

a)	that the Council looks into the practicalities of offering to purchase freezers for those food banks who express an interest;

b)	that the Council work with the Network to help to broker discussions with those supermarkets who provide surplus food on ways of providing transport for delivery;

c)	that more research be undertaken by the Network into the number and location of food banks, luncheon clubs and subsidised food outlets in the city;

d)	that joint working continue with Jobcentre Plus to make claimants more aware of the operation of welfare benefit sanctions, short term benefit advances and the existence of emergency payments;

e)	that the Council works with the Network to help to dispel myths surrounding use of food banks.

Skills, Economy and Regeneration Scrutiny Panel

3.4 The recommendations of the *Future Proofing of Skills* Policy Review 2014/15 are:-

a) Look at measures to improve the engagement of local businesses, the health and care sector and other public employers in primary and secondary schools, such as the work currently being delivered through the Economic Leadership Board's Work Discovery Sunderland programme.

b) That the Council and its partners continue to work to raise the profile of firms operating in growth areas such as advanced manufacturing and software sectors;

c) That the Council and its partners look at ways of raising the profile of apprenticeships and vocational training for example through highlighting local successes stories;

d) That further work be undertaken to look at measures to increase the interest of girls and young people in areas such as advanced engineering, software and information technology.

Public Health, Wellness and Culture Scrutiny Panel

3.5 The recommendations of the *Strategies for the Prevention of Suicide* Policy Review 2014/15 are:-

a) The Health and Wellbeing Board should receive a report annually from either the director of public health (representing a suicide prevention group) or a representative of the group on delivery of the suicide prevention action plan.

b) There should be evidence that a Suicide Needs Assessment has informed a suicide prevention action plan in the city.

c) There should be evidence that the Suicide Prevention Action Plan is informed by the most relevant up-to-date intelligence specifically in relation to:
- Measures to address self-harm prevention
- Lessons learned from suicides in Sunderland

d) Appoint a Councillor Champion who would have the role of: facilitating communication between the suicide prevention group and other groups and bodies including the health and well-being board; facilitating regular communication about the work of the suicide prevention.

3.6   The recommendations of the *Tackling of New Psychoactive Substances* Policy Review 2015/15 are:-

a)   Explore the options for an enforcement strategy including

-    the use of new Anti-Social Behaviour powers and;

-    the use of all available local powers.

b)   Join the lobby requesting the Government to draft legislation to outlaw the sale and distribution of legal highs by creating a blanket ban for it to be a criminal offence knowingly to advertise, sell, supply, import or export legal highs.

c)   As a priority, pursue targeted prevention interventions with children and adults at high risk of use or current users in institutional settings. This will include work in hostels (including targeted activity by the Substance Misuse Service), children in care, and support for schools to detect and prevent the use of NPS on their premises.

d)   To investigate the options for maintaining a profile of incidents, intelligence and data on NPS to support decision making.

Children's Services Scrutiny Panel

3.7   The recommendations of the *Tackling Child Poverty in Sunderland* Policy Review 2014/15 are:-

a)   The Child Poverty Needs Assessment should continue to be developed in a way that is evidence based and is informative about local deprivation data, to encourage officers and Members to use it to inform local planning and strategy.

b)   Opportunities should be taken to maximise the take up of entitlements available to disadvantaged families. This includes

–   the take up of free nursery education offered to disadvantaged two year olds and;
–   the number of children taking up free school meals, using an assumed consent model (thereby ensuring schools claim their full pupil premium entitlement).

c)   Options for disadvantaged children to access to a nutritious meal during school holidays, where they meet the criteria for free school meals, should be explored.

d) To consolidate all 'key worker' style approaches across the city to ensure that families can work with one key mediator and are given consistent messages

e) Locally based services should be available for parents, such as parenting support, which encourages and enables parental behaviour change where needed.

4. RECOMMENDATION

4.1 It is recommended that the Scrutiny Committee considers and endorses the scrutiny policy review presented at **Appendix A-F**, and submits:
(a) 4 Policy Review Reports to Cabinet at its meeting in June 2015; and
(b) the remaining 4 Policy Review Reports to Cabinet at its meeting in July 2015.

5. BACKGROUND PAPERS

- Scrutiny Committee Agenda and reports: 26 June 2014

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**Health, Housing and Adult Services Scrutiny Panel
Policy Review 2014 – 2015**

Tackling loneliness and social isolation

Draft Report

Contents

1

1   Foreword

"*When friendship disappears, then there is a space left open to that awful loneliness of the outside world which is like the cold space between the planets. It is an air in which men perish utterly.*"

<div align="right">

Hilaire Belloc
1870-1953

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The Health, Housing and Adult Services Scrutiny Panel have, through this review, taken an in-depth look at loneliness and social isolation. The panel has explored what these terms mean, the main causes of loneliness, the impacts on an individual and some of the many interventions and support mechanisms that exist locally and nationally. The panel were certainly encouraged by the range of services available and were equally pleased to see that these services and schemes were being well used.

The panel also looked at the development of integrated care services and how this might impact on issues of loneliness and social isolation. The panel held a number of discussions with the Clinical Commissioning Group, Sunderland City Council and other key partners which helped to provide a clearer picture of integrated care and what this means for Sunderland residents.

Living alone for some is a personal choice with some people enjoying the solitude and independence that this can bring. However for many it is a catalyst for limited social contact, increasing health issues and diminishing physical, mental and emotional wellbeing. With people living longer and families ever more fragmented the probability that at some time in our lives we will live alone is increasing. It is also not the sole domain of the older generation, loneliness and isolation can impact on anyone, it does not discriminate.

The panel acknowledges that tackling loneliness and social isolation is a monumental task and clearly impossible to eliminate completely. However it is still an extremely worthwhile cause to look to connect those people in society who for one reason or another have become disconnected from their families, neighbours or communities. Hopefully the recommendations that the panel is proposing can help to promote and develop a number of the key themes and initiatives that are emerging in relation to this issue.

Finally the Health, Housing and Adult Services Scrutiny Panel would like to thank the officers, partner organisations and voluntary sector groups who provided their time so willingly to help the panel gather the evidence for this review, this contribution and cooperation is as always invaluable.

Health, Housing and Adult Services Scrutiny Panel
March 2015

2 Introduction

2.1 The Scrutiny Debate provided the usual variety of scrutiny topics for potential review during the coming year. The Health, Housing and Adult Services Scrutiny Panel, commissioned by the Scrutiny Committee, agreed to undertake a spotlight review around the issue of loneliness and social isolation linked to the newly developing community integrated care teams in Sunderland.

3 Aim of the Review

3.1 To look at the issue of loneliness and social isolation across the city, the range of provision available to tackle isolation and loneliness and the extent that the developing community integrated care teams can have on this.

4 Terms of Reference

4.1 The title of the review was agreed as 'Tackling loneliness and social isolation' and its terms of reference were agreed as:

(a) To define and understand the terms loneliness and social isolation in the context of the review;

(b) To investigate the current interventions provided by a range of organisations that look to tackle issues of loneliness and social isolation, including examples from across the region and country;

(c) To gain an understanding of person-centred coordinated care and how the development of community integrated locality teams within Sunderland can be influenced to give consideration to loneliness and social isolation;

(d) To explore how the local authority's social care services in conjunction with health partners will approach evaluating how well they have tackled social isolation in relation to the quality of care provided to individuals.

5 Membership of the Panel

5.1 The membership of the Health, Housing and Adult Services Scrutiny Panel during the Municipal Year is outlined below:

The Late Councillor Christine Shattock (Scrutiny Lead Member for Health, Housing and Adult Services) and Cllrs Rosalind Copeland, Daryl Dixon, Michael Dixon, Alan Emerson, Jill Fletcher, Shirley Leadbitter, Barbara McClennan, and Dorothy Trueman.

6 Methods of Investigation

6.1 The approach to this work included a range of research methods namely:

(a) Desktop Research;
(b) Use of secondary research e.g. surveys, questionnaires;
(c) Evidence presented by key stakeholders;
(d) Evidence from members of the public at meetings or focus groups; and,

3

(e) Site Visits.

6.2   Throughout the course of the review process the panel gathered evidence from a number of key witnesses including:

(a)   Victoria Brown (Age UK);
(b)   Lennie Sahota (Sunderland City Council);
(c)   Ian Holliday (Sunderland CCG);
(d)   Gillian Gibson (Sunderland City Council);
(e)   Gillian Robinson (Sunderland City Council);
(f)   Graham Burt (Sunderland Carers' Centre);
(g)   Marianne Siddorn (Campaign to End Loneliness);
(h)   Jacqui Reeves (Washington MIND);
(i)   Kay Hunter (Headway Wearside);
(j)   Tricia Doyle (Headlight Sunderland);
(k)   Helen Tranter (Gentoo Living);
(l)   Julie Walker (Gentoo Living);
(m)   Margaret Hope (Hetton New Dawn);
(n)

6.3   All statements in this report are made based on information received from more than one source, unless it is clarified in the text that it is an individual view. Opinions held by a small number of people may or may not be representative of others' views but are worthy of consideration nevertheless.

4

7 Findings of the Review

Findings relate to the main themes raised during the panel's investigations and evidence gathering.

7.1 Loneliness and Social Isolation: Facts and Figures

Loneliness and Social Isolation - are they the same thing?

7.1.1 Loneliness and social isolation are often used to mean the same thing, but they are very distinct concepts. Social isolation refers to the lack of social or familial contact, community involvement or access to services, an objective state. While loneliness is often most widely described as a subjective experience; a negative that is associated with a perceived gap between the quality and quantity of relationships that we have and those we want. Loneliness is very personal and its causes, consequences and existence are impossible to determine without reference to the individual and their own values, needs and feelings.

7.1.2 With this in mind it is therefore possible to be isolated without being lonely and to be lonely without being isolated. A person can be physically isolated (living alone, little contact with other people etc.) without feeling lonely, for some this can even be as a result of their choosing. Also individuals can feel lonely surrounded by people if those relationships are not enough to deter feelings of loneliness.

7.1.3 As such, it is a complex issue to address, and is likely to change over the course of a lifetime. A number of predictors of loneliness have been identified, through research conducted by ELSA[1], including personal circumstances (e.g. widowhood), life events (e.g. bereavement, moving into residential care), poor physical and mental health, or perceptions such as the expectation of declining health and dependency and low socio-economic status.

7.1.4 Social isolation is a serious issue for some older people, but it should not be considered as a predictable by-product of ageing. The majority of older people are not socially isolated and continue to make a considerable personal contribution to society, alleviating loneliness for themselves and others. This contribution is essential in helping communities to develop capacity and resilience and it is something this review will return to later.

The main causes and contributing factors

7.1.5 Loneliness and isolation has many different causes and affects people in different ways. People can often feel lonely because of their personal circumstances. But sometimes loneliness is a deeper, more constant feeling that comes from within. Certain lifestyles and the stresses of daily life can make some people socially isolated and vulnerable to loneliness. There are many situations and factors as people move through life that might make someone feel isolated or lonely. For example:

- Losing a partner or someone close to you
- a relationship break-up
- being a single parent or caring for someone else – you may find it hard to maintain a social life
- retirement and the loss of social contact from working

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[1] English Longitudinal Study of Ageing

5

- are older and find it difficult to go out alone
- moving to a new area without family, friends or community networks
- belonging to a minority ethnic group and live in an area without others from a similar background
- exclusion from social activities – for example, because of mobility problems or a shortage of money
- experience of discrimination and stigma – for example, because of a disability or long-term health condition, or gender, race or sexuality
- victim of sexual or physical abuse and finding it harder to form close relationships with other people.

> *"We seem to live in a society when we have very little time to spend with our family and friends, due to the fact that more of us work full time and juggling children and other responsibilities. This leaves our vulnerable members of society with less family time too, leaving them lonely and isolated".*
>
> Washington MIND (Service User)

The Impacts of Loneliness and Isolation

7.1.6 There is public awareness that loneliness affects a significant proportion of the population and that being lonely is a struggle emotionally. The links between loneliness and poor physical health are well-established, however scientists are still examining the link between mental and physical health and how loneliness affects our bodies.

7.1.7 Isolation has been associated with repeat hospital admissions and increased vulnerability to stroke, heart failure and coronary heart disease. Loneliness can adversely affect cardiovascular health (independent of other factors that may be related, such as smoking) and the immune function.

7.1.8 Members during their research highlighted two studies from 2012 which found that living alone, or just feeling lonely, may increase a person's risk of early death. One study followed nearly 45,000 people aged 45+ who either had heart disease or were at high risk of it. Those living alone, the study found, were more likely to die from heart attacks, strokes or other complications over a four-year period than those living with family or friends or in some other communal arrangement. A second study focused on those 60+ and found that men and women were 45% more likely to die during the study period (six years) if they reported feeling lonely, isolated or left out. But those who reported loneliness, 43% of the study population, weren't necessarily living alone. Researchers said the link between lonely feelings and health problems held even after living situation, depression and other factors were taken into account.

7.1.9 A meta-analysis of 148 longitudinal studies published in 2010 estimated that individuals with strong social ties have a 50 per cent greater likelihood of survival than those with poor social relationships and networks. This effect was compared to smoking 15 cigarettes a day and is greater than other well-established risk factors for mortality such as physical inactivity and obesity. However, in comparison with these more well-known factors, much less is known about the mechanisms through which loneliness affects health. As well as possible physiological mechanisms, such as neuro-endocrine or hormonal effects, health behaviours may also be important. Loneliness makes it harder for people to regulate for example, drinking, smoking

6

and over-eating, while social relationships have been shown to promote healthy behaviours.

7.1.10 The physical, mental and emotional effects of loneliness discussed above, inevitably have consequences for quality of life and the wider community, as well as costly health and social care service use. A recently developed quality of life measure based on the needs and aspirations of older people, found that most older people ranked social relationships as the key dimension. Engaging in a large number of social activities and feeling supported; good community facilities and infrastructure such as transport; and feeling safe in one's neighbourhood were among the main factors contributing to a good quality of life in older age.

7.1.11 The Panel acknowledged that loneliness and social isolation can encourage fear and distrust as well as fragmenting communities. By contrast, keeping older people connected to their neighbourhoods harnesses economic and social capital and helps to promote social cohesion. Older people's engagement in volunteering and/or caring activities brings benefits, not only to individuals, but to sustaining communities.

7.1.12 In terms of pressure on health and social care services, research has shown that socially isolated and lonely adults are more likely to be admitted earlier to residential or nursing care, are at greater risk of emergency admission and re-admission to hospital, although the impact on consultations with general practitioners (GPs) is less clear. Given the growing understanding about the impacts of loneliness and social isolation and the recognition that it is a serious problem, there is a pressing need to bring the issue to the forefront of national and local policy agendas.

> *After finishing work I was beginning to feel a little isolated and felt I needed to get out of the house and start doing something with my days. I could feel me mood becoming lower and knew I had to do something.*
>
> *Since stumbling across The Life House I have attended pottery and thoroughly enjoyed it. I met new friends and it was great to work as a team. We did work to coincide with the 50th anniversary of Washington. The class tutor Mark was exceptional.*
>
> *I also had a go at Indian Head Massage again it was great and met more new friends, I thoroughly enjoyed it and if it wasn't for The Life House I dare say I wouldn't be able to do either.*
>
> *The Life House is a great asset to Washington and we are so lucky to have it here.*
>
> *Washington MIND (Anonymous)*

Loneliness and Social Isolation – the numbers

7.1.13 Loneliness is a problem that is present across all age groups in society. In 2014, 7.6 million people in UK households lived alone, of which 4.1 million were aged 16 to 64. The majority of this age group are male possibly due to higher proportions of men never marrying, marrying at older ages or partnerships breaking up leading to

7

men living alone while women will, generally, live with any children from the relationship.

7.1.14 For those aged 65 and over the picture is an opposite; with the majority of people living alone being female, this can be attributed to women's higher life expectancy. By 65 most women have been married, and husbands are typically older than their wives, which highlights the gap in life expectancy, and means more women are widowed and ultimately living alone.

7.1.15 The baby boom generation of the 1960s having reached the 45 to 64 age group coupled with the rise in divorce and fall in marriage rates has resulted in a statistically significant change to the numbers from this age group living alone. In contrast living alone, in the 25 to 44 age group, has fallen most likely due to the affordability of moving to independence as well as research indicating a shift towards young adults sharing accommodation.

	2014	2015	2016	2017	2018	2020	2025	2030
Males aged 65-74 predicted to live alone	2,600	2,660	2,760	2,820	2,860	2,960	3,080	3,340
Males aged 75 and over predicted to live alone	3,196	3,264	3,298	3,366	3,468	3,638	4,488	5,134
Females aged 65-74 predicted to live alone	4,440	4,500	4,650	4,740	4,800	4,890	4,980	5,370
Females aged 75 and over predicted to live alone	8,418	8,540	8,540	8,601	8,662	9,028	10,553	11,590
Total population aged 65-74 predicted to live alone	7,040	7,160	7,410	7,560	7,660	7,850	8,060	8,710
Total population aged 75 and over predicted to live alone	11,614	11,804	11,838	11,967	12,130	12,666	15,041	16,724
Rates for people living alone are as follows:								
Age range	% males	% females						
65-74	20	30						
75+	34	61						

Figure 1: People in Sunderland aged 65+ living alone, by age and gender, projected to 2030
Source: General Household Survey 2007 (ONS)

7.2   Tackling Loneliness and Isolation: What can help?

7.2.1   There are many types of support and intervention available that can help to reduce loneliness and isolation. These services include, but are not limited to, interventions delivered by both the public and voluntary sectors. The Campaign to End Loneliness has categorised many of these services and below are examples of the main categories that Members have encountered during their evidence gathering.

Information and Signposting Services

7.2.2   There are many opportunities to provide information and signpost people to support services through websites, directories or telephone help-lines that include information about social support services. The use of health and social needs assessments can also help to identify loneliness and social isolation. Current community care assessments address issues related to social support systems through questions linked to connections with family and friends, meeting people and creating friendships. By doing this it is possible to start to evaluate an individual's needs around social contact with services available in their community.

8

COMMUNITY DIRECTORY

The East Area Committee, recognising social isolation in older people was a major issue, agreed to establish a community directory to highlight services, support and activities available in the area.

In order to set up a directory it was important to understand what was already out there, ward workshops were hosted with elected members and voluntary sector representatives. Over a period of 4 months, 350 services/sessions were identified in the East area; this information was then collated into a database. In addition to completing the mapping exercise, officers liaised with other departments who managed databases (CORA, Family Information Services, Active Sunderland, etc.) and received copies of their information. Three people were employed from SWITCH to pull all the information together, and collectively over 4,000 services had been identified. Unfortunately the decision was made to remove all the information relating to ages 0-50, and only services for the 50+ age group were transferred onto the online directory.

The directory was launched on a small scale, as this was regarded as an interim directory, but Sunderland City Council Call Centre and others have started to use it. In its first month it had received over 10,000 hits, however figures have dropped, possibly attributable to the weakness within the search engine. It has, though, served a useful purpose in highlighting many of the services and organisations available within a given area. Currently a new directory is being designed and built which will have a search engine similar to that employed by leading web search engines. It is hoped that this new directory will be launched in April 2015.

Support for Individuals

7.2.3 There are again many forms of support for individuals including befriending services where volunteers make weekly visits or phone calls, providing social interaction to help alleviate the feelings of loneliness. Mentoring can also provide a useful short-term support intervention that can help individuals to achieve a particular goal. Age UK Sunderland also offer a new innovative service called LIFEstyle which provides trained, supportive staff to enable people to go out shopping, enjoy social events or help with tasks around the house.

7.2.4 Members also noted that Age UK offer befriending / home visiting services targeted at the most vulnerable older people, who are unable to access other services due to health or mobility. A volunteer befriender visits an individual for approximately an hour each week or as required, to provide conversation or social activities depending on the individual's needs. These types of services can be a starting point and used in conjunction with other services such as supported group

9

activity; it aims to support those who can, to move away from befriending and reconnect with the local community.

7.2.5 As public resources continue to reduce, despite the ever increasing demand, many current and traditional delivery methods are no longer affordable and also not meeting the outcomes of local people. At the same time, there is also a growing recognition of existing but often untapped assets and potential within communities that can enhance and complement the public sector offer. The challenge is to develop these new ways of working, encompassing and utilising all the resources available locally to achieve the best outcomes possible.

7.2.6 Wayfinders or Community Connectors are usually volunteers who provide "hard to reach" or vulnerable people with emotional, practical and social support. They can act as "connectors" between the community and public services facilitating access to services. Where these services have been developed in the UK, they have built on a model first developed and evaluated in the USA. The key feature of these services is the training of 'non-traditional' referral sources to reach out to otherwise hard-to-reach groups. These services have been subject to robust independent evaluation in the USA and have shown positive results in terms of their ability to effectively identify and engage with older people who might otherwise not access services. Buddying or partnering can also help people to re-engage with past social networks, following a major life change e.g. bereavement, divorce etc.

7.2.7 In Leeds the Seniors Network aims to work with and enhance these natural linkages by up-skilling local people to be even more effective at making connections, and supporting networks and groups. The overall aim is to support older people to live longer at home, have an active social life and remain integrated in their local community. Three third sector Neighbourhood Network Schemes have been commissioned to act as Community Builders to recruit volunteer 'Community Connectors' to identify and connect with people who are not already engaged with groups and activities, supporting them to turn their ideas into actions. Individuals come from a wide range of backgrounds but were selected because of their strong networks in the community and their willingness to help make things happen. Each area has a small amount of seed funding (Small Sparks Fund), to help develop actions.

7.2.8 In Sunderland a Community Connector scheme was launched in April 2014 to enable self-care in the community as far as possible, supported by local people who act as informal connectors to information / local activities and self-care messages. The level of help varies from person to person dependent on ability, with some people requiring only a small amount of help or assistance such as being signposted to an activity or support service to enable them to get out and about, whereas others may need much more help and support which could include help from the integrated care teams or outreach help. Currently area arrangements are exploring issues related to community support within the city and it will be crucial to any development going forward that issues of ownership, recruitment and training are thoroughly explored to ensure that any community connector model employed is clear in its aims and purposes. It was also noted by Members it would be important to look at specific groups such as young people, people leaving the armed forces etc. to ensure the city and its connectors are prepared. There are also other voluntary and community sector organisations that are well placed within the city to support the community connector model. This includes

Sunderland Carers' Centre, who are willing to work collaboratively to offer a community connector function providing information and advice to carers.

7.2.9   It will continue to be important to value community connectors as a rich source of information and ensure that mechanisms are in place for them to connect with each other and access up-to-date information. This could be achieved through the use of newsletters, monthly meetings etc. that provide a 2-way dialogue between connectors and the key statutory bodies. It will also be important to build the connector role into job roles and organisational culture and training. The inclusion of such a role within community integrated teams will be a positive contribution to help people regain or stay connected to a community, reducing the risk of social isolation and achieving person centred outcomes. There can also be varying levels of connector from 'Informal Connectors' performing a good citizen role to 'Formal Connectors' such as health professionals, housing officers etc.
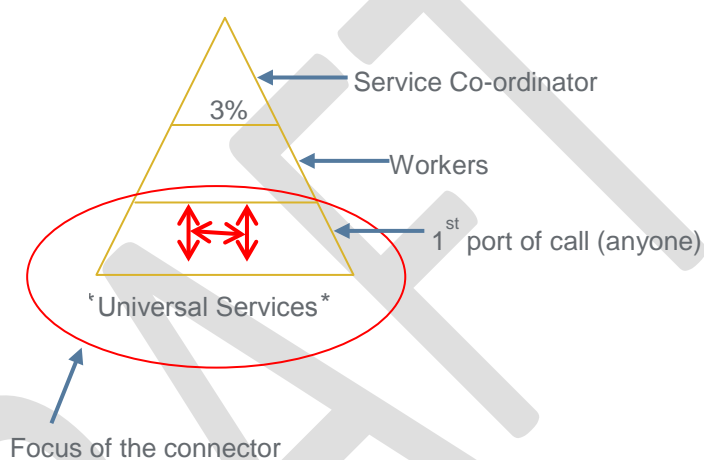
Figure 2: Focus for Community Connectors
Source: Delivering Better Health & Wellbeing in Sunderland

Group Interventions

7.2.10 Group interventions include day centre type activities such as lunch clubs and social group themes. The number and extent of group interventions is very wide. Those interventions within 'social group schemes' incorporate self-help and self-support groups that cover a number of areas (e.g. bereavement, friendship, creative and social activities, health promotion). Such structures and ways of working depend on the needs of the population to whom the intervention is addressed. They can be open to all or more limited and focused in their membership. They can have specific aims or depend on the group as a whole to develop activities that the group requires. They can be peer led or led by specialists or volunteers.

7.2.11 Age UK in Sunderland provide a variety of support and encouragement to local people over the age of 50, who are experiencing blocks or barriers to health, wellbeing and independence. Tackling social isolation is a key element of many of these services and many of the people accessing support have become isolated, depressed or anxious.

7.2.12 There are a range of services that can meet individual needs in an holistic way through supported group activity for people who lack confidence or are having difficulty in engaging in social activities. This may involve supporting individuals on a one-to-one basis to begin attending local group activities or

11

introducing them to some of Age UK's group programmes that provide a range of activities.

HETTON NEW DAWN

Hetton New Dawn is a project that works with members of the local community to plan and organise activities for elderly people who are socially isolated within the community and surrounding areas. The Project activities provided include indoor bowls, lunch club, befriending service, bingo and Hetton Local History Group. These activities are to help maintain independent living, build self-esteem, promote the development of friendships and companionship and to promote a healthy lifestyle.

The lunch club, which currently has a membership base of approx. 42 members, offers a 2-course hot meal and, importantly, subsidised transport, through a community bus, to group members if needed. In speaking to the group Members noted that for many people this, in the main, was their only form of social interaction or leaving the house for a social experience. Most people arrived at the centre at approx. 10.30am which provided that important time for chatting, catching up with friends and social activities (e.g. bingo) before lunch at noon.

An important outcome of the lunch club was that some of the group had gone on to form their own friendships, resulting in their own organised social activities outside those of Hetton New Dawn. It was highlighted how much people clearly benefitted from attendance at the lunch club and recognised the change in people over the months as they grew in confidence and developed friendships.

Hetton New Dawn like many similar organisations worked in partnership with other key providers across the city including the Council, Gentoo, Age UK and Sunderland Volunteer Centre and will signpost people to these organisations were appropriate.

7.2.13 Members also visited Swan Lodge - Life House, Sunderland which supports and offers accommodation for local people who are homeless who may experience various problems and complex needs, including mental health, alcohol and substance misuse. It was an opportunity to understand the role of Swan Lodge and the services provided to its users. The Life House consisted of 65 rooms across five floors (nine of which were exclusively to support women) to support people aged 18-80yrs. In addition to the 65 rooms, there were also two sofa beds for emergency purposes when the lodge is full.

7.2.14 Members of the panel met a former resident of Swan Lodge, who following a variety of issues including relationship breakdowns, mental health problems and alcoholism, had become a volunteer and then a paid member of staff. Members were also informed of how these experiences have helped him to help others

12

through his own knowledge, background, and empathy for the situation that many people within Swan Lodge find themselves in.

7.2.15 Staff at Swan Lodge emphasised to the Members the importance of time in allowing residents to gain confidence and develop relationships that, in time, will allow them to move on. However, one size does not fit all and it is important that each resident is supported in the appropriate way through their own support plan. The majority of issues for residents have a root cause in relationship breakdowns which often lead to issues such as mental health, alcohol and drug misuse. The Life House has, over the last three years, seen an increase in the numbers of young people, age 18-25yrs, requiring support. Some of the contributing factors could include the current economic climate, bedroom tax, availability of cheap alcohol, drugs and legal highs.

7.2.16 Swan Lodge also holds a number of sessions to address social isolation which included; a soup and sandwich drop-in at a number of locations and a breakfast drop-in at the Salvation Army, Southwick on a Friday. It was noted that the sessions were very popular and that through the provision of a meal had created an opportunity of social contact for a number of people who could be classed as lonely or socially isolated.

7.2.17 There is also a current 'Early Intervention' scheme which ensures that new residents are 'buddied' with a worker providing that link, individual support and relationship which allows the worker to gradually introduce the resident to useful places in the City including the Job Centre, Igneous (training provider), Volunteer Services etc. This gentle approach is important in giving individuals the time to adjust and settle into the Lodge.

7.2.18 In talking with staff from the Lodge it was clear that there is a need to reduce the stigma attached to residents of Swan Lodge and how the Lodge can become more present within the community through increased understanding, awareness and building on the skills of the residents.

Wider Community Engagement

7.2.19 Wider engagement is aimed at promoting projects that are designed to support individuals to increase their participation in existing activities such as sport, libraries, museums etc. from within their existing communities. Time Banks are also examples of effective wider community engagement at a local level benefiting not only the recipient of the service but also the provider of the service.

7.2.20 Members in conversation with Gentoo noted that the housing group have seven purpose built housing schemes consisting of self-contained apartments providing secure accommodation with dedicated care managers for independent living. These are located across the City:

- Central Area – Gillhurst House & High Grindon House
- Washington – Roseberry Court and Peacehaven Court
- South Area - Tom Urwin House
- North Area – Albany House.

7.2.21 All the accommodation have communal areas that deliver activities including luncheon clubs, bingo, and coffee mornings etc. for both residents and importantly the local community. Gentoo recognises the use of these venues as community

13

hubs so people living within the schemes still feel and remain part of their local community. These schemes are very popular and Gentoo operate a waiting list and any vacant properties are advertised through the choice based lettings scheme with no priority or assessments made.

7.2.22 Gentoo operate a range of activities and events for all ages across the City to engage with the community and currently offer:

- Facilitated Citywide Events;
- Intergenerational Working with schools to help break down barriers between the young and old;
- Supported Housing;
- Community Groups;
- Reduce Social Isolation.

Members enquired how the activities and events were advertised and it was noted that all services were advertised within the residential accommodation through the care mangers along with newsletters, websites, mailing lists and through other partners.

7.2.23 Gentoo reported that there were three main strands to their service improvement and ensuring that the services provided were what people really wanted:

Customer Feedback – this helps influence services both formally and informally and includes community events, tenants meetings and
Customer Improvement – feedback received from customers helps to re-shape services.
Activities – various activities delivered across the city to including coffee mornings, bingo, Remembrance & VE Day celebrations, watching TV together, gardening and fishing clubs etc.

7.2.24 Sunderland City Council's Area Committees are also very proactive in funding and supporting projects and community initiatives that look to tackle issues of loneliness and social isolation. The Washington Area Committee has funded the Easington Lane Community Access Point to provide support to 22 residents in Washington to become involved in activities in and around Washington. It is positive to recognise that once the project comes to an end the group will continue to meet independently.

7.2.25 The East Area Committee has also awarded 25 organisations with grant funding to enable such groups to purchase more equipment, i.e. table and chairs to deliver a luncheon club, to funding bouncy castles, hand massages, etc. to cross generational community events day.

7.2.26 Similarly the North Area Committee has approved funding to support local VCS organisations to address social isolation in the North. Activities included:
- Groundworks have utilised local amenities including the coast, allotments and green spaces to introduce older people in the North to 'Active Green Living activities'.
- The Salvation Army are identifying and engaging with individuals at risk of social isolation, and supporting them to attend activities in Austin House. The centre has seen an increase in people attending activities such as the

60's befriending sessions, the ICT suite, activities aimed at preventing social isolation for older people and the community café.

- Local Community Associations were awarded funding to deliver services and activities in the area and encourage take up of those activities from socially isolated members of the community.

7.2.27 One of the key issues for people who feel lonely and socially isolated is around the issue of transport to activities and events, this is recognised by many providers and organisations as a big barrier to tackling loneliness and isolation. A number of organisations use community transport e.g. Age UK, Hetton New Dawn, and a number of funded projects also ensure transportation is factored into the project remit.

7.3 Integrated Care

7.3.1 Integration of health and social care services within Sunderland is based on a vision that has been formed through consultation with the people of Sunderland outlining their needs from health and social care services. Sunderland CCG recognises that there is enthusiasm amongst people in Sunderland for a safe, integrated, effective and timely response that meets their individual needs. At the heart of the vision is the ambition to deliver the right care and support, at the right time, in the right location with the right people to meet the needs of the individuals, their carers and families living within Sunderland[2].

7.3.2 People want choice and control, support to continue living in their own homes and communities with services that are co-ordinated to meet their individual needs at times which they require. At the heart of the vision is the ambition to deliver the right care and support, at the right time, in the right location with the right people to meet the needs of the individuals, their carers and families living within Sunderland. The Sunderland vision for integration identifies 5 priority elements within the Integration programme:

- An overall integrated operating model;
- Locality integrated teams across health and social care;
- Integrated commissioning processes;
- Shared intelligence processes;
- Enhanced user focus both in terms of engagement and influencing behaviour to manage demand.

7.3.3 The CCG's vision for integrated services is built around bringing together social care and primary/community health resources into co-located, community focused, multi-disciplinary teams that link seamlessly into hospital based services. The teams will consist of GP's, nurses, specialist health professionals and Social Workers etc. and will target specific patient needs. With those who require services receiving the right care and support in their own homes and communities through the development of community integrated locality teams organised around GP practices ensuring:

- co-ordinated services around individuals targeted to meet specific needs;
- improved outcomes for individuals;
- improved experiences of care by individuals, families and carers;

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[2] A modern model of integrated care. Sunderland CCG. July 2014

- enhanced independence through the provision of the right support in a timely manner, focusing on a re-ablement approach;
- high quality, tailored support which focuses on keeping people out of hospital;
- care is co-ordinated and managed, with the GP at the centre of organising the care, avoiding unnecessary admissions to hospital and care homes allowing people the ability to regain independence following ill health or injury. **Appendix 1** illustrates the emerging Sunderland model for out of hospital care.

7.3.4 In June 2014, the CCG and local authority took the lead in working with partner organisations across health, local government and the voluntary sector to further develop the health and social care integration agenda and create a shared understanding and commitment to how the agenda will be delivered. This was undertaken via an Accelerated Solutions Event with over 100 attendees from all partners including Healthwatch and the Voluntary sector. The objectives set for the event were:

- Reaffirm the vision and outcomes for Sunderland and the financial context in which this needs to be delivered;
- Understand and define HOW the health and social care integration agenda will support the achievement of these outcomes over the next 2 years
- Discuss and shape a tangible plan that will take us forward in the short, medium and long term including agreement on how to measure our success;
- Engage all key stakeholders in the programme to gain feedback on proposed service changes and identify how we will work together to drive greater quality, value and sustainability.

7.3.5 The aim being to enable self-care in the community as far as possible, supported by local people who act as informal connectors to information and local activities. While at the other end of the spectrum it is to ensure only those who really need acute / specialist intervention access this level of support. Also along the range of the spectrum it is to make sure that those with long term conditions or complex needs are identified and receive proactive person centred care from formal connectors and care coordinators who consider their overall health and wellbeing rather than only the 'illness' aspect of their lives.

7.3.6 Citywide intermediate services will provide the support to locality based teams, ensuring a rapid response to emergency issues and supporting both a step-up and step-down care approach. The focus for the integrated teams will be on the top 3% of the population who currently account for 50% of the health and care spend. This focus will, over the course of this plan, start to impact on the next 12% of patients with long term conditions who account for 36% of the spend. More detailed work was also undertaken on the commonly agreed key aspects of the model which will inform and refine current plans including the following areas:

- Prevention, early intervention and self help
- Engagement and Communication
- Culture & Behaviours
- Joint Commissioning or Making the whole model work
- Shared information and data insight
- Connectors
- Integrated Teams – Roles & Skills

16

- Service Co-ordinator

7.3.7 These key aspects from the city wide model will be informed and supported by some of the current CCG transformation programmes over the next 2 years including:

- Improving healthcare in care homes for all localities;
- Implementation of end of life 'deciding right' initiatives in practices;
- Extension of the intermediate care hub;
- Development of Dementia friendly communities.

7.3.8 The panel reported that the CCG needed, within this model, to address issues of loneliness and social isolation. It was noted as important that colleagues in Public Health needed to engage with locality teams across the Council to ensure indicators and triggers related to loneliness and social isolation are not missed. Simple interventions can make the biggest of differences but because services operate in isolation from each other many of these opportunities are not being picked up. Members referenced the CCG funded Essence Service based in the former Doxford Park library, which opened on 10th November 2014, and it was noted that it was services such as this that should be included in the model as since September, over 60 referrals have been made to the Essence Service.

AGE UK – ESSENCE SERVICE

People access Age UK's Essence Service via a referral route principally from the memory protection service although it was noted that referrals would be accepted from any route. The service also works closely with the Carers' Centre, contributing to the development of individual support plans.

It was also interesting to note that the Essence service links in with a number of other similar or complimentary services such as Hetton New Dawn, Housing 21, Alzheimer's Society and Gentoo developing a closer partnership working. This increased coordination is a positive in making access to support much easier; in so much as through a coordinated network of providers someone will be able to provide the appropriate support for an individual.

One of the key attributes of the service, when panel members spoke to users, was its informal nature. It was also noted that many people were able to learn and share their own experiences with other people which was a huge benefit.

7.3.9 Age UK has also developed a proposal for the Living Well Link Service which is based on services delivered by Age UK in other parts of the country. The service looks to complement health and social care support and put people in control of their health and well-being and as a result promoting independence. Living Well link workers will look to re-connect patients that have become disconnected with their

17

local communities, social connections and the opportunities that these connections afford. This type of provision can help to reduce loneliness and isolation and being based within the voluntary and community sector can ensure that local community connectors are established and maintained.

7.3.10 This is supported by Headlight in that any coordinated care approach that looks to address loneliness and isolation should involve professionals from the statutory and voluntary sectors working together and recognising each other's skills to enable service users to get the best package of care available. These multi-agency attitudes are fundamental to recognising issues associated with loneliness, isolation and other factors that can trigger crisis situations. The effectiveness of person centred approaches is the focus on the individual and through support and motivation will come the confidence and skills to move on through positive change. Also feeling part of the process and being listened to and signposted to help and support can see also help to reduce the feeling of loneliness and social isolation.

7.4 Community Capital

7.4.1 Communities can play a significant role in protecting people from, or increasing, loneliness. Neighbourhood action is a crucial tool in building and harnessing communities' own capacity to tackle loneliness. There are also practical benefits to a neighbourhood approach in that it breaks down into manageable pieces and allows for more effective targeting of initiatives and outreach efforts.

7.4.2 It was noted during the research that activity at a neighbourhood level should flow from an authority-wide strategy, and should involve a tailored approach which supports neighbourhoods to build resilience to loneliness, dependent on local circumstances and not forgetting to recognise assets and challenges that are present in individual communities.

7.4.3 In developing or creating 'age friendly communities' there needs to be a number of actions including:

On Places: including improving the availability of public meeting places and green spaces; providing public seating, improving pavements to reduce the risk of falls; and improving street safety with measures such as street lighting and other community safety initiatives.
For people: including facilitating local social activities; encouraging intergenerational contact; ensuring local people have a voice in local decision making, for example through ward assemblies; and encouraging volunteering and neighbourliness.
On Services: including ensuring local bus services and community transport go to the places older people and younger people want, at times they want to travel, improving parking, particularly for those with restricted mobility; and providing local sources of information and advice.

7.4.4 There are many approaches that have been shown to be successful in supporting communities to develop their capacity and resilience to loneliness, in particular:

Establishment of a community navigator scheme – whereby a network of navigators, connectors, agents, or facilitators provide support to individuals on the ground to make the most of community opportunities, but also help to identify gaps in services or ways services could be improved.

18

Identifying new opportunities for joint commissioning – drawing on the opportunities created by the move to GP-led commissioning, and the lessons of the Total Place pilots, to maximise the potential impact of finite resources. This would be a sensible area of focus for new health and wellbeing boards.

Moving beyond consultation to coproduction – involving people and communities not just in commissioning, but also delivering services, and ensuring that the potential contributions of older people as supporters, advocates, workers and volunteers is maximised.

Establishing timebanks etc – so that older people can not only benefit from volunteer provided services, but also make their own contribution, fostering a culture of reciprocity and giving people back a sense of purpose within their own communities. Timebanking naturally builds connections between people in local communities and addresses the sense of a lack of purpose which is a key feature of loneliness.

Supporting community events – through small grants, or support in kind of staff time or resources, to help to build up the community's confidence and capacity, and these are a number of examples of this in the report.

Identifying and empowering community leaders – drawing on existing assets in the community to communicate and drive forward shared objectives.

7.5   Evaluating Social Care Services

7.5.1 Numerous research has been undertaken to determine what interventions are most effective in tackling loneliness, and it is difficult to find consistent evidence of impact across all types of loneliness intervention and there are some common interventions, such as befriending, which are not well researched at all. The Campaign to End Loneliness (CtEL) found that a number of organisations were not measuring the impact of their services on tackling loneliness. The prime reasons cited were not knowing how to measure such impact or not being required by the funder to measure these. The research also highlighted that amongst those who were measuring their impact on loneliness a range of methods were in use, the most popular being:

(a) Questionnaires;
(b) Surveys;
(c) Meetings – e.g. user groups etc.;
(d) Reports from staff / volunteers.

7.5.2 In conversations with those organisations that had looked to measure the impacts of their services on loneliness and isolation the CtEL research found some common themes as follows:

(a) Organisations had not been able to draw on any particular guidance or expertise in choosing how to measure impact on loneliness. They had had to carry out their own research and/or develop their own measures.

(b) Awareness of the academically developed was low.

19

(c) There was concern around the sensitivity of loneliness as an issue, and a sense of the need for caution in asking questions about loneliness, especially with new clients or service users.

(d) The need to demonstrate impact to commissioning bodies was a key driver of the decision to measure impact and of the choices made as to exactly how to do it. With questions specifically designed to elicit information to directly map to local authority strategic priorities.

7.5.3 If one of the key drivers was to demonstrate impact to commissioners of services it is worth understanding their perspective. Again the CtEL have undertaken research with individuals from national and local government, health and well-being boards and civil servants. Common themes were as follows:

(a) There was a clear emphasis on the need for impact measures to allow loneliness interventions to "compete" against other projects and interventions. In other words commissioners placed a significant emphasis on the need for statistical information, and ideally information which linked impact on loneliness directly to cost savings.

(b) A strong sense that whilst measuring reductions in loneliness was helpful, what was even more compelling was linking reductions in loneliness to the key measures of interest to the authority – e.g. GP visits or emergency readmissions to hospital, or admission to residential care.

(c) Unlike many of the service providers commissioners had a greater interest in drawing on academic models of measurement. Awareness of the multi item scales was higher among commissioners and they were keen to ensure that measures used were robust, but recognised some of the constraints on using complex measurement tools in a service delivery environment.

(d) Whilst statistical information was important, commissioners also recognised the need for "richer" information, for example from case studies, in order to tell a local story, and to bring issues to life. This still remains a powerful tool for understanding service impact in a local area.

7.5.4 It is clear from the research conducted that commissioners and service providers need to look at the future development of measuring the impacts their services on loneliness and social isolation. The CtEL is currently developing a new diagnostic or measurement tool that will help to measure how successful a service is in reducing loneliness.

7.5.5 The CtEL is working to have this tool ready for use in spring 2015, hopefully providing a more standard method of evaluating the impact of services on levels of loneliness. The tool will aim to be:

Simple, Flexible, produce comparable results, sensitive, practical, empowering and valid.

7.6 Assets Based Approach

7.6.1 An asset based approach is seen by many experts as perhaps the best way to deliver results in tackling loneliness. Such an approach is based on identifying and rallying individual and community 'assets', rather than the usual approach of

20

focusing on the problem or issue. Taking such an approach can create effective results as the approach is most likely to deliver a range of services that are:

- What people want
- Involves people
- Being sustainable.

7.6.2 The evidence base to support such approaches, and their impact on loneliness specifically, is in its infancy. However an approach that is based around local people's involvement and assets would result in the development of the kind of groups, activities and services which have been shown to be effective in tackling loneliness. Also the potential for intergenerational contact in such an approach is highlighted by the Joseph Rowntree Foundation programme, Neighbourhood approaches to loneliness, which noted that when loneliness was addressed at a neighbourhood level without reference to age, it naturally brought about services with an intergenerational element.

LinkAge Bristol – Involve, Inspire, Enjoy

LinkAge is a local charity that works with people aged 55+ and local communities to facilitate inspiring social activities that enrich lives, reduce isolation and loneliness and promote active participation and positive ageing.

It is run, and funded, by a partnership of Bristol City Council, St Monica Trust, the Anchor Society, Bristol and Anchor Almshouse Trust and Redcliffe Care. The organisation takes a community development approach to its work, raising the profile of what is already taking place within communities and helping to make it successful and sustainable, as well as operating as a broker and a catalyst to fill gaps in provision.

LinkAge works through community hubs, each of which has a local Advisory Group of people aged over 55 who decide on what activities to develop, informed by feedback from the wider community at open days and wellbeing days where people can contribute their ideas and suggestions. LinkAge will provide support in getting new groups off the ground, negotiating deals on venues etc, but aims for activities to become self-sustaining with participants taking on organisation and contributing to costs.

Throughout the city, hubs offer a wide range of activities including archery, choirs, cooking, holistic therapies, golf, IT, ping pong, walking football, and yoga. Local What's On guides are used to show people what is available in their community. LinkAge also supports the development of more friendly, cohesive and empathetic communities through its intergenerational work, by celebrating cultural diversity and by challenging age stereotypes. Volunteers are the keystone of the organisation and LinkAge has seen 'virtuous circles of volunteering' where people start by attending activities, but later become volunteers.

21

8 Conclusions

The Committee made the following overall conclusions:-

8.1 Loneliness is part of the human condition and it can affect all ages, with older people being particularly vulnerable. Experiences commonly associated with ageing, such as loss of family and friends, poor health, decreased mobility and income; as well as trends in wider society, such as greater geographical mobility of the population, reduced inter-generational living and less cohesive communities, mean that many people are becoming more socially isolated, potentially leading to increased loneliness.

8.2 Social isolation can be a serious issue for some people, but it should not be regarded as an inevitable by-product of ageing. Many older people continue to make a considerable personal contribution to society, alleviating loneliness for themselves and others. This contribution is essential in helping communities to develop capacity and resilience and the council and its partners are rightly continuing to develop services and support in this area. The best way to tackle loneliness is to understand an individual's situation, perhaps rooted in physical or mental decline, inaccessible housing, bereavement or a combination of other factors. Understanding individual cases involves specific contact and support. This can only be delivered by partnerships between the council, the CCG and other organisations supporting people and communities.

8.3 The importance of knowing what is taking place in the local area and where support, advice and help can be accessed is crucial in looking to empower individuals to tackle their own loneliness and isolation. The community directory is an ideal tool for facilitating such actions and the importance of a positive launch of the new version of the directory will be paramount to its success. Individuals, families, friends and key professionals need to be aware of its existence and only through widespread awareness will a directory of this type succeed. A continued promotion of the directory through such mediums as the Community News will help to keep it in the public eye. This could even act as impetus for the development of a 'What's On' style feature within Community News to publicise groups and activities taking place in the various areas across the city.

8.4 External factors can act as a barrier to social engagement. Lack of access to appropriate and easily accessible public transport is consistently identified by older people as a key barrier to social engagement. The Panel heard that older people were often afraid to use public transport, or were put off by unreliable provision, lengthy waiting times for connections and many do not have the confidence to plan connections for indirect journeys. Cold weather, icy conditions and dark nights often intensive the above issues, and as a result older people reported missing medical appointments as well as foregoing social activities.

8.5 The ethos behind community connectors focuses on asset based community development and that the only way to truly improve health, social and economic issues is by enlisting the very people who are now classified as 'clients' and 'customers'. Anyone can become a community connector and with suitable training can help to address issues of health, education and social isolation by building those resilient communities that are so important for supporting the most vulnerable members of our society. The key to the success of any initiative of this type is to ensure that there are clear aims for everyone involved from a clear definition of

22

what is expected of community connectors through to who is operating and taking ownership for the connector network across the city. A recruitment drive could also help to bring in the desired local people who can be trained and help to ensure that communities, families and individuals receive the help they need from within their locality. Ultimately it doesn't matter if people are working, unemployed or a stay at home parent, as long as they are willing to share their knowledge by signposting others in their communities to local services, then they could potentially become a Community Connector.

8.6   Group interventions appear to be effective in improving health and wellbeing but a variety of research findings prove inconclusive in terms of combatting loneliness; although a number of studies have reported positive outcomes from group interventions including improved physical health, a reduction in falls and improved survival rates. Importantly it is these types of interventions that have also been found to have a positive impact on health service use, such as GP visits, hospital bed days and out-patient attendance. The panel acknowledged that services varied widely, including lunch clubs and social support circles, but recognised that these types of interventions are particularly successful in reaching large numbers of socially isolated people.

8.7   There are numerous schemes and initiatives operating across Sunderland and the panel are keen to acknowledge the excellent work that is being undertaken by both the public and voluntary sector. These range from large scale projects to schemes that operate on a much smaller scale, but all are of equal merit in helping to tackle loneliness and social isolation. The panel is also keen to ensure that activities are co-ordinated in order to minimise the potential for duplication and more importantly to provide a forum for the sharing of learning and good practice.

8.8   As more and more people live with long-term conditions like diabetes and heart disease, the vast majority of their treatment will take the form of self-care at home. Therefore in moving towards integrated care there will be a need to focus on delivering flexible care that can tackle issues like loneliness as well as medical needs. In discussions with the CCG the Panel noted the need, within this model, to address social isolation and how colleagues in Public Health need to engage with locality teams across the Council to ensure indicators related to loneliness and social isolation are not missed. There is a wealth of data and information that is collected from a variety of sources and integration of care could see this information harnessed and used to develop and target services. Simple interventions can make the biggest of differences but because services operate in isolation from each other many of these opportunities are not being picked up.

8.9   Evaluation of services and their impact on issues of loneliness and isolation are very important to ensure that organisations delivering services to lonely individuals are making a difference. The statutory, voluntary and private sectors are facing ever increasing financial pressures and therefore need to be assured that there is clear evidence that their interventions deliver real outcomes for the individuals they serve. The issue is how to measure the effectiveness of an intervention against something so personnel as loneliness or isolation. The Campaign to End Loneliness has recognised this and is currently undertaking work to develop a measurement tool to aide both commissioners and service providers. This could be an extremely useful tool and could be something worth exploring once it has been released.

8.10 Throughout the review Members have continually recognised the importance of local communities and the need to develop the assets that already exist within communities. Clearly the development of integrated care teams, the move to community connectors and the work of area committees in funding projects and activities supports this view. Loneliness is something that can affect anyone of us but it is also in everyone's gift to prevent it, only through a concentrated community spirit, desire and effort will we ever truly be able to tackle loneliness and isolation.

9. Draft Recommendations

9.1 The Health and Wellbeing Scrutiny Panel has taken evidence from a variety of sources to assist in the formulation of a balanced range of recommendations. The Panel's key recommendations to the Cabinet are as outlined below:-

a) To ensure that there is an effective launch and continued promotion of the community directory to local people, key stakeholders and providers;

b) To explore and understand with key partners how a community connector scheme would operate in the city including issues of promotion, recruitment and training that enables anyone who wishes to take part the opportunity to do so;

c) To look at how to develop arrangements to ensure that activities / initiatives are co-ordinated in order to minimise the potential for duplication and to provide a forum for sharing, learning and good practice;

d) To ensure that a measure of loneliness and/or social isolation is included in the Joint Strategic Needs Assessment;

e) To look at through integrated care the development of shared intelligence and how to ensure the use of all intelligence to help predict the softer issues within communities such as loneliness etc.;

f) To explore the potential of an employee volunteer scheme within the council to provide opportunities for employees to volunteer their help to a local organisations, communities and projects;

g) To explore the potential for adoption of the Campaign to End Loneliness evaluation tool on the effectiveness of interventions on loneliness once it is released.

10. Acknowledgements

10.1 The Committee is grateful to all those who have presented evidence during the course of our review. We would like to place on record our appreciation, in particular of the willingness and co-operation we have received from the below named individuals and organisations:-

(a) Neil Revely – Executive Director – People Directorate;
(b) Victoria Brown (Age UK);
(c) Lennie Sahota (Sunderland City Council);
(d) Ian Holliday (Sunderland CCG);
(e) Gillian Gibson (Sunderland City Council);

24

(f) Gillian Robinson (Sunderland City Council);
(g) Graham Burt (Sunderland Carers' Centre);
(h) Marianne Siddorn (Campaign to End Loneliness);
(i) Jacqui Reeves (Washington MIND);
(j) Kay Hunter (Headway Wearside);
(k) Tricia Doyle (Headlight Sunderland);
(l) Helen Tranter (Gentoo Living);
(m) Julie Walker (Gentoo Living);
(n) Hetton New Dawn;
(o) Sunderland City Council Area Arrangements.

11. Background Papers

11.1 The following background papers were consulted or referred to in the preparation of this report:

Promising approaches to reducing loneliness and isolation in later life – The Campaign to End Loneliness and Age UK (January 2015);

Later life in the United Kingdom – Age UK (June 2014);

Loneliness and social isolation: A special JSNA topic paper – Alan Dawkes and Stephen Simpkin (January 2013);

Loneliness and social isolation among older people in North Yorkshire – The University of York (April 2013);

Measuring the impact of services on loneliness – Kate Jopling (July 2013);

Integrated care and partnership working: reading list – The Kings Fund (January 2013);

Emerging Sunderland Model for Out of Hospital Care

City-wide multi-agency Resource Hub
Providing alternatives to hospital admission.
Supporting individuals to recover from illness or crisis and to regain independence in their own home or as close to home as possible.
Facilitating discharge for individuals who have to be admitted ensuring their stay is no longer than necessary
Preventing unnecessary admission into long term residential or nursing care
Reducing the requirement for an on-going social care package of support

HOSPITAL

Recovery at Home Service
Community Integrated Recovery at Home
Telecare and Community Equipment
24 hour Single Point of Access – the Intermediate Care hub
Therapies
Bed Based Services: Farnborough Court, ICAR

Elderly Frail / High Risk population:
High Risk patients who will benefit from multi-disciplinary person-centred coordinated care.
Comprehensive care plans including risk management planning.

2% – 5%

Enhanced Primary Care:
Patients who will benefit from better coordinated care and enhanced long-term condition management including self-management

5% - 10%

RISK STRATIFICATION

COMMUNITY CONNECTORS

SELF-MANAGEMENT

North Integrated Team

West Integrated Team

East Integrated Team

Washington Integrated Team

Coalfields Integrated Team

GP Out of Hours
Co-located with Recovery at Home Service

111/999
Urgent Response; Triage; Navigation to appropriate response

Urgent Care Centres
x4
Including 24/7 x1

Community Resources and Resilience:
Robust Health and Wellbeing Strategies – Health Promotion; Self-Management; Leisure; Recreation; Meaningful Occupation; Housing, including extra Care; Strong Voluntary Sector; Faith organisations …

North Locality Practices

West Locality Practices

East Locality Practices

Washington Locality Practices

Coalfields Locality Practices

Community Resources and Resilience:

Source: Sunderland CCG

26

**City Services Scrutiny Panel
Policy Review 2014 – 2015**

Review of Cemetery Regulations and the Introduction of a Medical Examiners Service - Draft Report

Contents

1   Foreword from the Scrutiny Lead Member for City Services

During the year, the Panel has looked at two issues facing the Council's bereavement service; the content of the existing Cemetery Regulations and the implications for the city of the proposed introduction of a Medical Examiners service. Given the linkages between the two reviews, it was considered appropriate to combine them into one report.

The review into Cemetery Regulations came about as a response to issues raised by members of the public regarding the maintenance of the Council's cemeteries, particularly in relation to the impact of unauthorised kerb sets.

The Panel consider that a review into the Cemetery Regulations should include an overall policy statement setting out the vision and direction of the service in the decades ahead and contain amendments to deal with the problem of unauthorised kerb sets; the number of which have grown in recent years. These kerb sets often adversely affect the appearance of our cemeteries, make maintenance more challenging and are of concern to the families of neighbouring graves who may find their own access hindered by them

The Panel would emphasise that the rules and regulations governing the maintenance of cemetery space is a very sensitive area and should be handled with care and sensitivity. We consider it important that a full and thorough consultation is undertaken in order that people are made aware of the changes being proposed, why the changes are necessary and the way in which the changes will benefit the whole community.

The proposed introduction of the Medical Examiners Service has been the subject of considerable delay. It was now unlikely that there will be any progress or new announcements until after the May 2015 election.
However, the establishment of a new Medical Examiner Service will have significant implications and our report considers the respective roles and responsibilities of the Council and its partners such as the Coroner.

The Panel considers that the issue of funding is a sensitive and potentially controversial issue and the prospect of additional costs being passed on to the bereaved could result in issues of affordability.

However the Panel is impressed with the level of preparation with regards to the work going on with the Coroner and other partners and we are satisfied that the Council will be in a position to introduce the service at short notice if required.

In conclusion, I would like to thank my colleagues on the City Services Scrutiny Panel and all of the officers and staff involved for their hard work during the course of the review and thank them for their valuable contribution.

Councillor David Snowdon, Lead Scrutiny Member for City Services

2

Review of Cemetery Regulations

2   Introduction

2.1   On the 9 October 2014, the Council's Scrutiny Committee referred to issues that had been raised by members of the public regarding the maintenance issues of a number of the Council's cemeteries, particularly in relation to the impact of unauthorised kerb sets. The Committee asked that this Panel look into these issues in further detail as a matter of priority.

2.2   In response, the Panel has undertaken a short policy review into this matter. This has involved meeting with relevant Council officers, inspecting the conditions at Bishopwearmouth Cemetery and considering the approach being taken to cemetery maintenance among other neighbouring local authorities.

2.3   From the outset, it became clear that addressing these issues raised would require a review of the Council's existing cemetery regulations. It was also clear that any such review would need to be handled sensitively, balancing the wishes and expectations of families and cemetery visitors.

3   Aim of the Review

3.1   The aim of the review was to examine maintenance and upkeep issues at the city's cemeteries and consider the implications of any revisions to the Cemetery Regulations.

4   Terms of Reference

4.1   The terms of reference for the review were agreed as follows:-

- to examine maintenance and upkeep issues at the city's cemeteries;

- to consider the practical implications for the Council of a review of its Cemetery Regulations;

- to consider the impact upon residents and cemetery users of a review of the current Regulations;

5   Membership of the Panel

5.1   The membership of the City Services Scrutiny Panel consists of Councillors David Snowdon (Lead Member), James Blackburn, Michael Essl, Stephen Foster, Stuart Porthouse, Lynda Scanlan and John Wiper.

6   Methods of Investigation

6.1   The following methods of investigation were used for the review:

3

(a) Desktop Research
(b) Evidence from relevant Council officers;
(c) Visit to Bishopwearmouth Cemetery

7 Findings of the Review

Findings relate to the main themes raised during the Panel's investigations and evidence gathering.

7.1 Provision of Cemetery Service in Sunderland

7.1.1 As a starting point for the review, the Panel received background information on the scale and operation of Bereavement Services in Sunderland.

7.1.2 The Council operates and maintains ten cemeteries within the city of Sunderland; namely:-

Bishopwearmouth Cemetery (84 acres)
Castletown Cemetery (2.2 acres)
Houghton Cemetery (4.6 acres)
Washington Cemetery (4.3 acres)
Easington Lane Cemetery (3.4 acres)
Sunderland (Grangetown) Cemetery (34 acres)
Mere Knolls Cemetery (38 acres)
Hetton Cemetery (6.5 acres)
Southwick Cemetery (17 acres)
Ryhope Cemetery (9.5 acres)

There are an average of 3000 deaths annually in the city, from which approximately 600 will be buried whilst the remaining 2400 will be cremated.

7.1.3 The range of services provided by the Council includes:-

- Initial booking of the interment.
- Scheduling bookings across the ten cemeteries.
- Processing of statutory forms and completion and maintenance of burial records.
- Overseeing of interments.
- Dealing with applications for the purchase of grave spaces.
- Processing applications for the Installation and maintenance of cemetery memorials.
- Grounds maintenance in cemeteries, including the excavation of graves.
- Genealogical research requests.
- Exhumations

7.1.4 The rules governing the burial process are contained in the Council's Cemetery Regulations which are a requirement of the Local Authorities Cemeteries Order 1977. The Regulations form the basis for the good governance of the cemeteries, ensuring that the city's cemeteries remain neat

4

and tidy and do not pose a safety risk to either visitors or those working within them.

7.1.5 A copy of the Cemetery Regulations is attached as an appendix to this report. They are available for public information on the internet at www.sunderland.gov.uk and copies are also provided upon request to Bereavement Services.

7.1.6 Families who have suffered a bereavement and wish to have their loved one interred in one of the city's cemeteries are required to purchase a grave space. For 2014/15, the cost of an adult grave space for the interment of a resident of Sunderland is £704.00, and the cost for a non-resident of the city is £1408.00. When a grave space is purchased, the owner gains the 'Exclusive Rights of Burial' and this extends for a period of 100 years from the date of purchase.

7.1.7 The Exclusive Rights of Burial provides the purchaser with control over burials in the grave space should space allow, and over any memorials that may be placed upon the grave (following the submission of an application to erect a memorial to Bereavement Services and approval being granted). The Exclusive Right does not grant ownership of the land, which remains in the ownership of the Council.

7.1.8 When Exclusive Rights of Burial have been acquired, the purchaser is issued with a formal Grave Deed for the grave space in question, together with supplementary information which summarises the rights acquired through ownership, together with the responsibilities.

7.2 Condition of Local Cemeteries

7.2.1 As mentioned earlier in the report, the Panel has been made aware of public concern regarding the impact of unauthorised kerb sets on the appearance and maintenance of our cemeteries. Many of these concerns have been raised by families with graves adjacent to such kerb sets.

7.2.2 In order to review the condition and maintenance issues facing our cemeteries, the panel undertook a visit to Bishopwearmouth Cemetery to view the situation at first hand. The Panel's conclusions and recommendations are based on the outcome of this visit and are set out in detail below.

7.2.3 The general upkeep of our cemeteries is good and they are clearly being well looked after and maintained. Staff are enthusiastic and committed to providing the best possible service to the public in an area that requires great tact and sensitivity.

7.2.4 However, there are clearly continuing issues relating to those sections of the cemetery containing unauthorised kerb sets.

7.2.5 Unauthorised kerb-sets can best be explained as graves that have been extended or adorned beyond the permitted 12 inches immediately in front of

5

the memorial (where families are allowed to plant with low growing flowers and plants). Some of these memorials may be poorly constructed or maintained and can have the effect of impacting on the orderliness and dignity of the cemetery. In quite a few cases, kerb sets are no longer being maintained or cared for which considerably adds to the problem.

7.2.6   As well as the impact of their appearance, such kerb sets can also provide difficulties for grass cutting and the general maintenance of the cemetery. Responsive Local Services (RLS) staff responsible for this duty may be unable to use sit-on machinery to maintain the area and are compelled to use strimmers to effectively manage the area in question. This makes maintenance duties more labour intensive and time consuming and adds to the risk of accidental damage to neighbouring graves.

7.2.7   By comparison, Members commented on the attractiveness of the open lawns section and the war graves section. The Lawn Sections were introduced into the city's cemeteries in the early 1970's. The intention of this was to provide a system of graves where the space between memorials would be maintained as open lawn. This would allow unobstructed access for visitors, including those with mobility issues or disabilities, and would greatly reduce the maintenance issues caused by official kerbed enclosures as often favoured on traditional Victorian graves.

7.2.8   Over the years, the strict Lawn Section Regulations were relaxed to allow families more choice for commemorating the deceased and official kerb-sets not exceeding 5 feet on standard 9 foot graves, and not exceeding 4 feet on standard 8 foot graves are currently allowed on these sections. Again these kerb-sets, although within the current Regulations, cause access and maintenance issues and contradict the original objective of the creation of Lawn Sections in our cemeteries.

7.2.9   Finally, the Panel visited the Commonwealth War Graves section of the cemetery. This section is uncluttered and dignified in appearance and the graves are maintained to an extremely high standard by the National Commission.

7.3   **Views of the Panel**

7.3.1   As previously mentioned, the city's cemeteries are generally well maintained and in good condition. However, as ever, there is always room for some improvement and we would suggest a review of the existing cemetery regulations focusing in particular on the control of unauthorised kerb sets.

7.3.2   The current Cemetery Regulations have not been reviewed for a significant number of years. Terminology used within the Regulations is at times out of date, no longer relevant in parts and not always conducive to the successful management of the city's cemeteries. While such a review need not be a full scale overhaul the aim should be to produce a new set of regulations that are fit for purpose for the decades ahead.

6

7.3.3 We therefore suggest that a policy statement is included in the future regulations that sets out clearly and concisely the Council's overall approach to the maintenance of its cemeteries.

7.3.4 Given the severe resource constraints facing the Council for the foreseeable future, we recognise that that a long term incremental approach will be required albeit one that will generate future savings in maintenance costs and improvements in the environment of our cemeteries.

7.3.5 In terms of the specific problems being experienced with unauthorised kerb sets, we would suggest that the cemetery regulations should be revised to ensure that, in the future, only kerb sets that meet specified conditions are allowed.

7.3.6 We would not however suggest that existing unauthorised kerb sets should be removed. We feel that such an approach could be viewed as being heavy handed and insensitive. This was borne out by the experiences of a neighbouring authority where their initial policy of removing unauthorised kerb was revised to apply to only new kerb sets in the face of public concern.

7.3.7 We would therefore suggest that any revised cemetery regulations set out a time limit for kerb sets and that there should be a power for kerb sets to be removed where they are not being maintained by a family or have fallen into disrepair and become unsafe.

7.3.8 The Panel would also suggest that the review consider whether to have a traditional section which would permit the installation of authorised and approved kerb sets for families who choose this memorialisation option. In contrast, separate lawn sections would be available for interment which would be clear of any such enclosures and consist of headstones only with an open, clear, grassed area between graves. This could help to balance the interests of differing cemetery users while providing for greater conformity and easier maintenance.

7.3.9 One issue that the Panel would like to emphasise is that the rules and regulations governing the maintenance of cemetery space is a very sensitive area and requires to be handled with care and sensitivity. We consider it very important that a full and thorough consultation is undertaken in order that people are made aware of the changes being proposed, why the changes are necessary and the way in which the changes will benefit the whole community.

7.3.10 We suggest that the Council therefore draws up a consultation plan setting out how it will make best use of public notices, the Council website and meetings with key stakeholders as well as public meetings.

7.3.11 During the course of our review, a number of other issues having been raised which we feel could contribute to an improvement in the physical fabric of our cemeteries. One of these was the potential of developing the number of "friends" groups operating in our local cemeteries, particularly for older

7

sections of our cemeteries. Such groups can make an important contribution to the upkeep of sections of our cemeteries.

7.3.12 The review of the cemetery regulations should also take into account the views and interests of faith groups and again thorough consultation will need to be undertaken to ensure that they reflect any issues or concerns.

7.3.14 Our review has also highlighted the importance of making adequate provision for vehicles that need to enter and park in the cemetery. During our visit we were struck by the damage done by cars driving on verges and leaving unsightly tracks on the grassed areas adjacent to some of the graves. We would suggest that the Council look at this issue and ensure that appropriate provision is made for vehicles without it being to the detriment of other users of the cemetery.

8

8   Conclusion

8.1   The general upkeep of our cemeteries is good and they are clearly being well maintained.

8.2   The upkeep of cemeteries is governed by the Council's cemetery regulations. These regulations have not been reviewed since the 1990's. While overall they are fit for purpose they do require review to deal with the issues facing us now and into the future.

8.3   In particular, we need the inclusion of an overall policy statement setting out the vision and direction of the service in the decades ahead. They also require amendment to deal with the problem of unauthorised kerb sets; the number of which has grown rapidly in recent years. These kerb sets often adversely affect the appearance of our cemeteries, make maintenance more challenging and are of concern to the families of neighbouring graves who may find their own access hindered by them.

8.4   We therefore suggest that all future kerb sets be required to adhere to a clear policy set out in our cemetery requirements, and that these be enforced consistently and effectively.

8.5   In the case of existing unauthorised kerb sets we would recommend that these be gradually phased out over time and that the Council establish a policy to time limit and remove such kerb sets if they are not maintained or fall into disrepair. We would also suggest that the Council looks into the feasibility of establishing separate lawned-only sections along with separate areas for those wishing to have an authorised kerb set.

8.6   Clearly, the implementation of such measures will be a long term process and we would suggest the formulation of an action plan in order to focus the work required and also help to secure momentum into the future.

8.7   Most important the revision of our cemetery regulations should be handled sensitively given the emotive nature of the service provided. Any changes should therefore be accompanied by a thorough process of consultation with the public in order that they are aware of the reasons for the changes and the potential future benefits for the community as a whole.

8.8   Finally, the panel would ask that any review of the cemetery regulations should take account of the specific needs of faith communities and reflect the value of friends groups for future improvements to our cemeteries.

8   Recommendations

9.1   The Panel's recommendations are as outlined below:-

a. That a review be undertaken into the Council's Cemetery Regulations and that this include the development of a clear overall policy statement;

b. That the review include provisions governing kerb-sets and that the Council work retrospectively to bring up to standard;

c. That given the sensitivity of the issues involved a consultation plan be established involving the Council website and engagement with key stakeholders;

d. That officers investigate the possibility of establishing friends groups at older sections across the cemeteries.

Introduction of a Medical Examiners Service in Sunderland – Draft Report

10   Introduction

10.1   This report sets out the findings of a short review of the potential implications for the Council in the event of the introduction of a Medical Examiner Service in the city.

11   Aim of the Review

11.1   The objective of the review was to consider the implications for the Council of the establishment of a Medical Examiner service in the city.

12   Terms of Reference for the Policy Review

12.1   The terms of reference for the review were agreed as follows:-

- To consider the practical implications for the Council of the establishment of the new position of Medical Examiner and input into policy development around this area;

- To consider the respective roles and responsibilities of the Council and its partners in working with the Medical Examiner.

13   Membership of the Panel

4.1   The membership of the City Services Scrutiny Panel consists of Councillors David Snowdon (Lead Member), James Blackburn, Michael Essl, Stephen Foster, Stuart Porthouse, Lynda Scanlan and John Wiper.

14   Methods of Investigation

14.1   The following methods of investigation were used for the review:

(d) Desktop Research
(e) Evidence from relevant Council officers;
(f) Discussions with Senior Coroner

15   Findings of the Review

Findings relate to the main themes raised during the Panel's investigations and evidence gathering.

15.1   Role of Medical Examiner - National Context

15.1.1 As a starting point for the review, the Panel looked into the national and local context for the proposed introduction of a new Medical Examiner service.

15.1.2 The Panel heard that the current system for death registration has remained largely unchanged for 50 years. Under this system, the doctor attending a patient in their final illness completes a Medical Certificate of Cause of Death (MCCD) when death occurs. The doctor then ensures this certificate is sent to the Registrar of Deaths, usually by handing it to the relatives of the deceased. On receipt of the MCCD, the Registrar registers the death and gives a Certified Copy of an Entry to the informant, which is the document most properly referred to as the formal death certificate.

15.1.3 However, the inquiry into the circumstances surrounding the case of Dr Harold Shipman in 2003 led to a demand for a fundamental national reform of the system for death certification in order to prevent the possibility of any reoccurrence of criminal activity.

15.1.4 Furthermore, it had long been known that many death certificates were inaccurate in terms of the reasons given for cause of death. In practice, Doctors receive little training in relation to completion of death certificates and many inaccuracies can arise. Indeed, a pilot study conducted in Sheffield found that death certificates might be inaccurate in one in four cases, while the Office for National Statistics put the figure at one in five.

15.1.5 The Coroners and Justice Act 2009 sets out the legal basis for a new system of death registration in the UK.

15.1.6 The Act includes proposals for the introduction of an independent Medical Examiner to ensure thorough external examinations of bodies where necessary; scrutiny of all death certificates which are usually written by junior doctors; discussion about deaths with bereaved relatives and consultations with Coroners.

15.1.7 The Panel heard that the proposals are designed to ensure that families receive an expert explanation of the cause of a death and an independent authority who will be empowered to listen to and act on concerns and provide greater transparency to the death certification process. The reforms therefore should strengthen safeguards for the public, make the process simpler and more open for the bereaved and increase the quality and consistency of certification and data relating to causes of death.

15.1.8 Those eligible for the position of Medical Examiners will be appropriately trained senior doctors with at least 5 years' experience. The main responsibilities of the post will be to:

- o ensure compliance with the legal and procedural requirements associated with the current processes of certification, investigation (by coroners) and registration of deaths within a Local Authority area;

- o support those doctors who call for medical advice on suspected natural causes of death before they prepare an MCCD, and provide general medical advice to the coroner;

12

- o scrutinise the certified causes of all in-scope deaths in a way that is compliant with the proposed national protocol;

- o maintain comprehensive records of all deaths scrutinised and undertake analysis and provide information as required to ONS & locally for clinical governance purposes;

- o explain to bereaved relatives cause of death in a transparent, tactful and sympathetic manner;

- o support the training of junior doctors in completion of MCCDs and provide feedback on accuracy of certification locally

15.1.9 The Panel heard that Primary Care Trusts (PCT's) were originally intended to be responsible for the Medical Examiners service. However following the introduction of the Health and Social Care Act 2012 and the subsequent abolition of Primary Care Trusts, provision was made for the new Medical Examiner service to sit with local authorities.

15.1.10 The proposed introduction of the Medical Examiner Service will have considerable implications for local authorities at a national level. It is estimated that up to 500, mostly part time, Medical Examiners will be needed across England and Wales to scrutinise around 390,000 deaths per year and provide advice to doctors on a further 40,000 deaths that are subsequently investigated by a Coroner.

15.1.11 Clearly, reforming the current system will have an impact on a wide range of individuals and organisations. Key partners include local authorities, doctors and NHS staff, Senior Coroners and Coroners' Officers, funeral directors, Registration Services, Burial and Cremation authorities, Bereavement Services, the public, local government and other representative bodies. Indeed, the Act makes particular reference to the importance of the Medical Examiner working closely with the Coroner and the local authority Bereavement and Registration Service.

15.1.12 The Panel heard that concerns regarding the potential cost of the Medical Examiner Service had led to delay in the Government issuing formal approval for its establishment. Further guidance is expected shortly but this is now likely to follow the General Election in May 2015.

15.1.13 However, there was considered to be cross party support for the establishment of the Medical Examiner and a pilot project conducted in Sheffield was seen as a success, although this project did not consider the funding implications of a national roll out.

15.2 Establishment of Medical Examiner - Local Context

15.2.1 The establishment of a new Medical Examiner Service will have significant implications for the Council.

13

15.2.2 Department of Health recommendations are that each Medical Examiner district should deal with an average of 2100 deaths per annum. In 2013, 3089 deaths were registered in Sunderland with this figure expected to remain consistent for the foreseeable future.

15.2.3 Based on the anticipated workload, the new service will require a staffing structure including a Medical Examiner, Medical Examiner Officers who will act as investigatory and support staff, as well as administrative support.

15.2.4 There will also be other issues to consider such as the consequential effect on the Coroner and its successful integration with the established Bereavement, Registration and Coroners Service.

15.2.5 The Panel has raised concerns that the establishment of the Medical Examiners service could slow down the death certification process causing potential distress for the families of the deceased. However, we were reassured that it should add only 1 or 2 days at the most to the process and that this would be outweighed by the assurance provided families assurance that a death has been independently scrutinised.

15.2.6 In terms of the financial implications, using guidance provided by Department of Health and information from pilot Medical Examiner areas in Sheffield and Brighton indicate costs per annum of around £230k including Medical Examiner staff costs, together with support staff, ICT and central support and overhead costs would need to be considered by the Council.

15.2.7 There is as yet no indication whether additional funding will be made available to local authorities in support of the provision of the new service. If there is no funding, provision may need to be found from within the Council budget. The introduction of a fee charged by the Medical Examiner to the bereaved family would provide an opportunity to create a cost neutral service. This fee can only be recovered retrospectively and initial indications subject to validation of costs, are that the charge per reported death could be in the region of £100. Clearly, the economic, political and practical aspects of such a charge would require careful consideration.

15.2.8 It is anticipated that Councils will be given the authority to decide how the new fees will be recovered. There are a number of options including:-

- No fee
- Work with the Funeral Directors to include it in their total fees
- That the Registrar collects the fee from the informant when a death is registered.

15.2.9 It was also anticipated that approximately £40,000 could be saved by the introduction of the Medical Examiner system, as the current role of the Medical Referee that is a requirement under the current system would no longer be necessary.

15.2.10 It was stressed that the ME service will need to have open and transparent costs. There are current costs associated particularly with cremations (commonly known as Ash Cash) that are currently integrated into the overall Funeral Directors costs. The statutory forms requesting a cremation must be signed by two doctors and then signed off by the Medical Referee. These costs will no longer be needed with the introduction of the ME system and it's associated fee.

15.2.11 During the review, the Panel met with Mr Derek Winter, Senior Coroner for Sunderland to obtain a clearer understanding of how the Medical Examiner (ME) may impact on the current Coroner workload in the city and the way in which partnership working is progressing.

15.2.12 Mr Winter highlighted the on-going delay with the implementation of the ME system. He noted that a number of successful pilots have been undertaken around the country but a definitive proposal had still to be put out for consultation. It was felt that the main reason for the delay was linked to how the new scheme will be funded, and it was noted that all of the pilot sites across the country had not imposed a fee upon families.

15.2.13 Mr Winter confirmed to us that Sunderland was ahead of many other local authorities in terms of planning for the new service and that it was pleasing that work had already been done to obtain some indication of the costs involved and the potential options for funding.

15.2.14 The introduction of a Medical Examiner service could result in more deaths being referred to the Coroner and that would mean a likely increase in the demands made on the Coroners Service. Currently, around 50% of all deaths are referred to the Coroner and last year this represented around 1700 cases in Sunderland. It should be noted that the number of Deprivation of Liberty Orders (DoLS) applied to residents in the city are currently having an impact upon the Coroner caseload, with a significant increase in cases referred. Whilst DoLS remain an issue, this would continue to keep the Coroner caseload higher than usual, and impact upon the ME caseload to reduce it.

15.2.14 Mr Winter highlighted the importance of the Coroner and Medical Examiner establishing close links and a good working relationship in order to promote an efficient and coordinated service. He also confirmed that he was working closely with the Council to prepare for the introduction of the service.

15

16 **Conclusions**

16.1 The proposed introduction of the Medical Examiners Service has been the subject of considerable delay. It was now unlikely that there would be any progress or new announcements until after the May 2015 election.

16.2 However the Panel is impressed with the level of preparation with regards to the work going on with the Coroner and other partners and we are satisfied that the Council will be in a position to introduce the service at short notice if required.

16.3 Clearly, more work will need to be done on the cost of the service and how it can be best funded once an announcement has been made. The Panel considers that the issue of funding is a sensitive and potentially controversial issue and the prospect of additional costs being passed on to the bereaved could result in issues of affordability.

16.4 We would suggest that the Council looks in more detail into how any additional cost could be addressed for example by incorporating it into the charges and fees traditionally collected by Funeral Directors, usually referred to as disbursements.

16.5 We would also suggest that consideration be given into the possibility of some form of regional shared service if this was to prove a viable option, possibly with a 'South of the Tyne' Medical Examiner service to be considered.

17   Recommendations

(1) The Council continue to work with partners to prepare for introduction of Medical Examiners Service;

(2) that the financial implications of introducing the Medical Examiner be examined in more detail including the options for the funding of the service;

(3) That any consideration of future funding options take into account the sensitive nature of the service and likely issues of affordability

17

Responsive Services and Customer Care Scrutiny Panel

Policy Review 2014 – 2015

Impact of Welfare Reform on Sunderland – Draft Report

Contents

1

1   Foreword from the Scrutiny Lead Member for Responsive and Customer Services

The Welfare Reform Act 2012 constitutes the most significant reform of the welfare system in the last 60 years. The reforms will have a significant impact nationally and on the people of Sunderland. They will affect individuals, households, the local economy and the operation of the Council and its partners.

As part of its review, the Panel's review has considered an overview of the welfare reform legislation, the effect that these are having on the people of Sunderland and the way the Council and its partners are responding.

We have seen that welfare reform will have a very substantial impact on the income levels of many residents. Indeed, many families will be absorbing a number of welfare changes simultaneously and it is important that we understand the cumulative effect of these changes.

It is estimated that over half of the households in the North East will be affected in some way by the reforms. Some may suffer a reduction in income; some may find their present accommodation is no longer affordable and this could all impact on a range of services such as jobs, housing, community cohesion, and demands for local authority services. There will also be an impact on the local economy with a potential loss of spending power and additional demands for Council services and support.

The changes present a challenge to local authorities and partners particularly at a time of reducing funding. It is also important that the demands placed on the Council are reflected in additional funding from the Government.

In conclusion, I would like to thank my colleagues on the Panel and all of the officers and staff involved for their hard work during the course of the review and thank them for their valuable contribution.

Councillor Ronny Davison, Lead Scrutiny Member for Responsive and Customer Care Services

2 Introduction

2.1 The Welfare Reform Act 2012 constitutes the most significant reform of the welfare system in the last 60 years.

2.2 The reforms will have a significant impact nationally and on the people of Sunderland. They will affect individuals, households, the local economy and the operation of the Council and its partners.

2.3 This review will provide an overview of the welfare reform legislation, the effect that these are having on the people of Sunderland and the way the Council and its partners are responding.

2.4 The Panel recognise that welfare reform includes a broad range of measures whose impact will be far reaching. We felt that it was important to focus our attention on those areas where the Council can have a direct affect or exercise real influence. The Panel has therefore taken the opportunity to comment on the Council's draft proposals for the content of its Council Tax Support scheme and the Community Care Support and Crises Support schemes.

2.5 In looking at the effect of welfare reform, the Panel has made use of a number of individual case studies. We feel that such case studies can help to highlight the effect of the welfare reforms on individuals and their families.

2.6 As a follow up to the review, the Panel will also be producing a separate report looking at the operation of Food Banks in the city.

3 Aim of the Review

3.1 The review will provide an overview of recent welfare reform legislation and its impact on the people of Sunderland.

4 Terms of Reference

4.1 The Panel agreed the following terms of reference for the review:-

(a) to obtain a better understanding of recent Welfare Reform legislation;

(b) to consider the impact of welfare reform on the people of Sunderland;

(c) To hear from those working directly with residents and provide case studies illustrating the impact on Sunderland residents;

(d) To consult on the management and content of the Council Tax Support Scheme and the Crisis and Community Care Support Schemes.

5 Membership of the Panel

5.1 The membership of the consists of Cllr Ronny Davison (Chair), Cllr Barry

3

Curran, Cllr Margaret Forbes, Cllr Gillian Galbraith, Cllr Betty Gibson, Cllr Iain Kay, Cllr Anne Lawson, Cllr Lee Martin and Cllr George Thompson.

6 Methods of Investigation

6.1 The following methods of investigation were used for the review:

(a) Desktop Research
(b) Evidence from relevant Council officers and key stakeholders
(c) Case studies of the experiences of residents

7 Findings of the Review

Findings relate to the main themes raised during the Panel's investigations and evidence gathering.

7.1 Overview of Welfare Reform

7.1.1 As a starting point for the review, the Panel looked at the aims and objectives of the Governments Welfare Reform programme, together with the range of measures included as part of the reforms.

Overview of Welfare Reform

7.1.2 The Governments welfare reforms represent the most fundamental change to the benefits system in a generation. While the reforms are intended to reduce dependency on social security and encourage employment, they also play a key part in the Government's deficit reduction strategy.

7.1.3 The Government contends that its welfare reform programme should make the benefit system fairer and more affordable, reduce levels of fraud and error, reduce welfare dependency, promote personal responsibility and help to address issues of poverty and worklessness.

7.1.4 The reforms consist of a number of measures; including:-

Capping of household benefits – so that no non- working household can receive more in benefits than the median earnings of a working household, after tax and national insurance;

Changes to housing benefit – so that any household deemed to be under-occupying their council or housing association home will lose part of their benefit;

Introduction of Universal Credit – a single benefit claimed on line and paid once a month in arrears will replace a number of existing benefits (including Job-Seekers Allowance, Employment and Support Allowance, Income Support, Child Tax Credits, Working Tax Credits, and Housing Benefit);

4

Replacing Disability Living Allowance for working age claimants with a new Personal Independence Payment;

Employment Support Allowance Scheme (ESA) – the introduction of more stringent medical tests, greater conditionality and the time-limiting of non-means tested entitlement for all but the most severely ill or disabled;

Replacement of the Social Fund - by a new localised service administered by local authorities.

Council tax support has been passed from central to local government, with a 10% reduction in total funding; each authority has to develop its own scheme for support, with protection for pensioners and other groups.

7.1.5 A number of other changes in the operation of the welfare benefit system have also been included in the report in view of their significant impact on the residents of Sunderland. These include the increasing use and severity of benefit sanctions and changes to the system of Child Maintenance.

7.2   Impact of the Welfare Reforms on Sunderland

7.2.1 The Panel went on to consider the impact of the welfare reforms on the people of the city. To do so we have made extensive use of individual case studies that can help to highlight the effect of the changes on local residents and also the range of responses being developed by the Council and its partners.

Household Benefits Cap

7.2.2 In April 2013, the Government introduced a cap on the total amount of benefits for most people aged 16 to 64. This means that households on certain benefits can no longer receive more in benefits than the average wage for working families. In effect this means that benefits are capped at £500/£350 for families/singles

7.2.3 The Panel was informed that the original data supplied by the Department for Works & Pensions (DWP) showed that 124 families would be affected in Sunderland. On review of the cases this was found to be 71 families. The table below shows the distribution of affected families across the city, based both on the original DWP figures and also following revision:-

Hendon	2	0
Ryhope	22	13
Silksworth	7	5
Pallion/Millfield	19	11

5

Castletown/Southwick	21	12
Roker	2	1
Houghton	7	2
Easington Lane/Hetton	15	8
Washington Central	2	1
Washington North	6	4
Washington South	3	2
Washington East	6	4
Washington West	12	8
Totals	124	71

7.2.4 The amount of income lost by residents varies, with some losing around £20 per week while for other the loss has been much more substantial of up to £300 per week.

7.2.5 The Panel was informed that the Council had made every effort to contact and provide support to those affected. As a result, of the 71 families affected, 16 have been helped to find work and 34 have gone into training.

7.2.6 It was noted that claimants are often more willing to seek advice from the Council rather than Jobcentre Plus and such meetings can also be used as an opportunity to provide advice on other issues such as budgeting and searching for jobs. The following case studies help to illustrate the individual circumstances of the some of the people affected by the benefits cap and the help that has been provided.

Case Study 1

This case involves a family with two children, with benefit income of £758 per week. With the introduction of the benefit cap they lost all but 50p of their housing benefit.

The Team gave them support with job search and training and the mother found a part time job for 24 hours a week. This meant that she was now eligible for Working Tax Credit which resulted in the family now having an income of £870 per week as well as being eligible once again for full housing benefit.

This woman had not had a job for a very long-time and she is now employed and had gained in confidence as well as making the family more financially secure.

Case Study 2

6

This case involves a single parent with six children, which includes two sets of twins who was £113 above the benefit cap. She had always wanted to train as a midwife but had been discouraged in this by the job centre lone parent advisor as too ambitious a goal.

The team worked helped her gain the necessary qualifications to get onto a university access course. She is now on her way to achieving her ambition.

7.2.7   The Panel recognises the very substantial distress and hardship that such a loss of income can cause to some of the most vulnerable people in the city. The Panel commends the proactive approach being taken to help those people in the city who have been affected by the benefit cap. We need to do everything we can to provide support and encourage people into training and work in order that they can support themselves and their families.

7.3   Changes to Housing Benefit - Size/Criteria

7.3.1   In April 2013 the Government introduced new rules for the size of accommodation that Housing Benefit, will cover for working age tenants renting in the social housing sector. Under these rules any household deemed to be under-occupying their council or housing association home will lose part of their benefit.

7.3.2   Under the rules, a household suffers a 14% loss for 1st spare room and a 25% loss for 2nd spare room. Bedrooms are expected to be shared by the following:-

- an adult couple
- 2 children under 16 of the same sex
- 2 children under 10 (regardless of sex)

7.3.3   The following can have their own bedroom:

- a single adult (16 or over)
- a child that would normally share but shared bedrooms are already taken, eg you've 3 children and 2 already share
- children who can't share because of a disability or medical condition
- a non-resident overnight carer for you or your partner (but only if they must stay overnight)

7.3.4   The way in which the size criteria affects Gentoo, the city's biggest social housing provider, is set out below:-

Number of Bedrooms	Total	Need 1	Need 2	Need 3	Need 4	Need 5	Need 6
2	1795	1795	0	0	0	0	0

7

3	2200	697	1503	0	0	0	0
4	240	39	75	126	0	0	0
5	33	2	4	9	18	0	0
6	1	0	0	0	0	1	0

7.3.5 The figures suggest that most under-occupiers need only one bedroom meaning that it will be single working age adults and couples who are most affected by the this measure In Sunderland.

7.3.6 Clearly, the introduction housing benefit size criteria represents a major challenge for the city. Recent research has shown that arrears are up nationally by 16%. In Sunderland our largest Registered Social Landlord has not been impacted so severely. However, it is not just a question of people falling into arrears. Work done locally with Gentoo shows that many people are cutting back on basic necessities such as food and heating in order to cover for the loss of income.

7.3.7 In areas such as the Sunderland, there are no real overcrowding problems and most demand is for a limited number of smaller properties that under occupying households are being incentivised to move into, so the case for size criteria is not strong . There is also a danger that previously occupied properties could be left standing empty due to lack of demand as well as the effect of breaking up communities and family groups.

7.3.8 As with other local authorities, the Council can offer support through Discretionary Housing Payments (DHP). In 2013/14 the level of awards in Sunderland totalled £680,000. The figure for 2014/15 is likely to exceed £750,000.

7.5.9 While DHP was intended to be a transitional award it is proving to be a safety net for some of the most vulnerable families in the city. However, there are concerns that the funding provided by the Government may not be sustained or meet demand.

7.3.10 The Panel would stress the importance of using the Discretionary Housing Payment Scheme and the Council should continue to work with partners in order to identify those most in need. The Panel consider that the continuation of DHP is essential in order to avoid substantial hardship to some of the most vulnerable residents in the city.

7.4   Personal Independence Payments (PIP)

7.4.1 The Personal Independence Payment (PIP) was introduced in April 2013 and is intended to replace Disability Living Allowance (DLA) for people aged 16 to

64. It is designed to provide support for those disabled people with the greatest needs and who face the greatest challenges to remain independent.

7.4.2 The move from DLA to PIP's was largely based on the belief that DLA is unsustainable in the long term given the substantial increase in claimant numbers in recent years. The shift to PIP's is intended to ensure that support is focused on those with greatest need, that expenditure is financially sustainable and that assessment accurately identifies who will benefit from additional support. Transfer from DLA to PIP is dependent on satisfying the criteria of regular medical assessments.

7.4.3 There was an expectation that PIP would result in a 20% reduction in expenditure once fully introduced. The Panel was provided with a breakdown on trends relating to DLA and PIP claimants nationally and in the city.

Disability Living Allowance (all ages – including children and those over 65)

	May 10	Aug 10	Nov 10	Feb 11	May 11	Aug 11	Nov 11	Feb 12	May 12	Aug 12	Nov 12	Feb 13	May 13	Aug 13	Nov 13	Feb 14
DLA	22,00	22,02	22,03	21,98	22,02	22,05	22,06	22,21	22,28	22,29	22,44	22,50	22,44	22,26	22,08	21,92
PIP													16	60	180	391
DLA + PIP													22,45	22,32	22,26	22,31
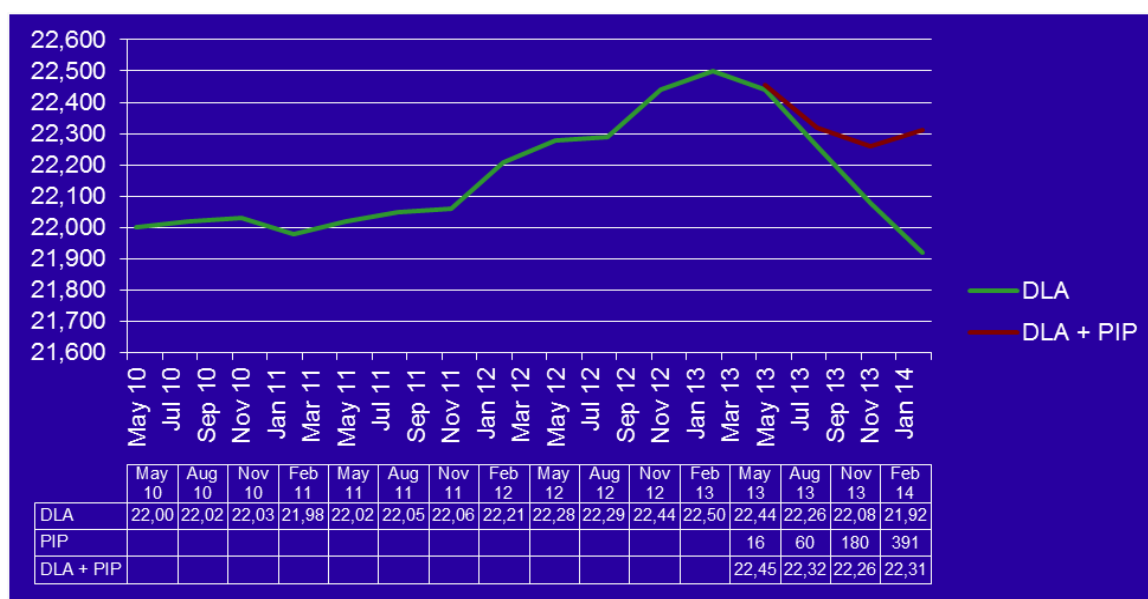
7.4.4 From February 2011 the number of DLA claimants rose (from 21,890) and peaked in February 2013 at 22,500. DLA claimant numbers then declined to 21,920 by February 2014 (580 fewer claimants).

7.4.5 As at February 2013 the overall amount paid to DLA claimants is calculated at £93,627,274. In February 2014 the overall amount paid to residents is calculated at £96,056,766. Thus although there has been a reduction in claimant numbers there is an increase in amount paid due to differences in payment amounts.

9

7.5.6   Based on the published experimental statistics, the first PIP payments were made to residents in Sunderland in My 2013 (16 people). By February 2014, 391 people were in receipt of PIP in Sunderland.

7.5.7   As at February 2014 there were 22,311 people in receipt of either DLA/PIP, 189 fewer than the number in receipt of DLA in February 2013.

Disability Living Allowance 16-64 (PIP is for those age 16 – 64)

	May 10	Aug 10	Nov 10	Feb 11	May 11	Aug 11	Nov 11	Feb 12	May 12	Aug 12	Nov 12	Feb 13	May 13	Aug 13	Nov 13	Feb 14
16-64	12,680	12,680	12,610	12,560	12,490	12,450	12,370	12,410	12,370	12,310	12,360	12,370	12,240	12,070	11,830	11,620
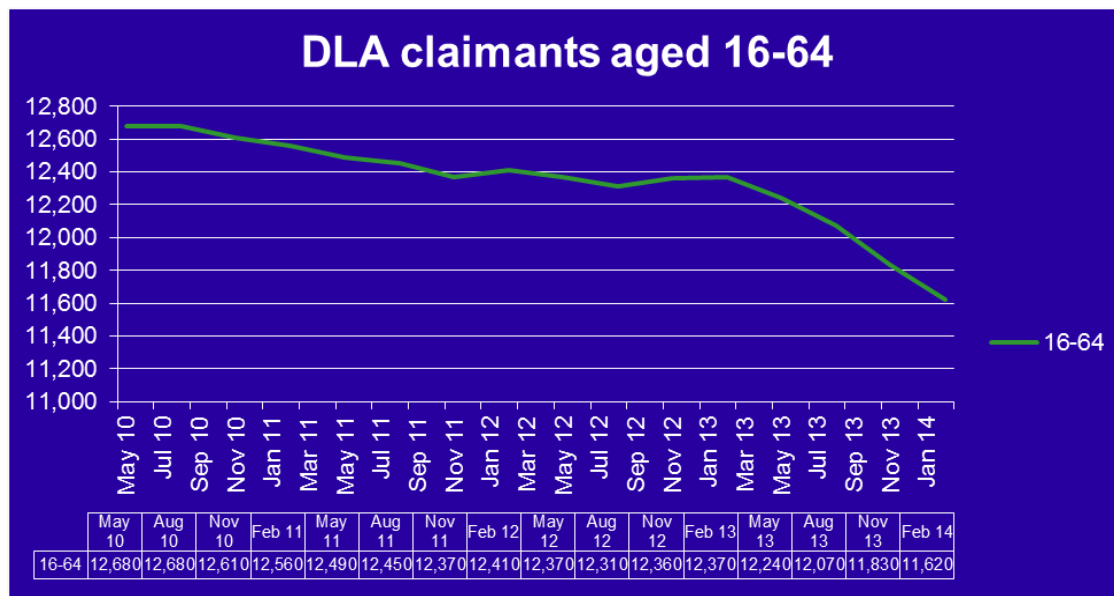
7.5.8   As at May 2013, there were 12,240 DLA claimants aged 16-64. This had reduced to 11,620 by February 2014, a reduction of 620 claimants, thus a greater reduction in the 16-64 age group than in the overall numbers (580 fewer claimants).

7.5.9   The February 2014 combined total for the number of DLA claimants aged 16-64 and the number of PIP claimants (391) is 12,011. This is 349 fewer claimants than the 12,360 DLA claimants 16-64 in February 2013.

7.5.10 The introduction of PIP has been associated with concerns that a large number of people will effectively lose disability benefit payments. The introduction of PIP has also been the subject of delay and the accumulation of large backlogs in the assessment process. Concern has also been expressed over the criteria used in the assessment process and its objectivity and consistency. Worry about delays in moving over from DLA to PIP and that this could cause a loss of income.

7.5.11 The Panel suggests that Council will need to continue to monitor the number of people who were on DLA but are not eligible for PIP and the effect of this change on their level of income.

10

7.6   Employment Support Allowance Scheme (ESA)

7.6.1   As part of the review, the Panel received an update on the current position with regard the operation of the Employment Support Allowance Scheme (ESA).

7.6.2   While the scheme was first introduced by the previous Labour Government as a replacement for Incapacity Benefit, a number of changes introduced as part of the welfare reform programme will have a major impact on the people of Sunderland. Most notable are the time-limiting of non-means tested entitlement for all but the most severely ill or disabled, a greater level of conditionality and the introduction of Work Capability Assessments (WCA) which provide for more stringent medical testing.

7.6.3   Once again, concerns have been expressed at the objectivity and consistency of the assessment process and also that the assessment takes greater account of physical disabilities than mental disabilities.

7.6.4   The Panel was informed that in March 2014, the DWP agreed an early exit from Atos the company undertaking the WCA's. Furthermore in July 2014 it was concluded that the existing WCA assessment was flawed and required a fundamental redesign. This was reflected in the high percentage of ESA decisions challenged at appeal and the significant number are overturned.

7.6.5   The revised operational arrangements for ESA have considerable implications for the city. Recent studies suggest that the impact of welfare reform has been felt keenly by disabled people. Furthermore a long standing geographical variation sees former industrial areas such as the North East and Sunderland having the highest number of people claiming IB/ESA. It therefore follows that the area is likely to be disproportionately affected by changes to welfare changes for disabled people.

7.6.6   The Panel considers that it is again important that the Council continues to monitor the number of people who were on DLA but are not eligible for PIP and the effect of this change on their level of income.

7.7   Child Maintenance: Direct Pay

7.7.1   Government announced that the Child Support Agency was now closing to new applications and that current cases would be migrated into the new system and given 6 months-notice.

7.7.2   In future separated families will have to make their own arrangements for the payment of child maintenance. For those who are unable to make such arrangements there will be a number of charges including a £20 application fee, 20% collection fee for paying parent and a 4% collection fee for the receiving parent.

11

7.7.3 Clearly these changes will lead to a loss of income for a number of families and will result in greater hardship. It also has the potential to place greater demands on local authorities and other support agencies.

7.8   Operation of Sanctions

7.8.1 Recent changes to the welfare benefit system have been accompanied with an increase in the use and severity of sanctions.

7.8.2 The Panel was informed that failure to meet the conditions set out in benefit letters will result in sanctions. For example, these could be being late for the signing on time, failure to attend interviews or training or failure to be available for work. Sanctions can result in the removal of benefit for a period of time which can in the most serious cases be up to 3 years.

7.8.3 Clients can apply for a hardship payment but it was felt that this is not always made clear by the Job Centre or was poorly communicated. As a result, a number of clients who have been sanctioned are left without income for considerable period of time. This can result in real hardship for vulnerable people who often come to local authorities or the voluntary sector for support. Such support can take the form of access to Food Banks and the Council's Crisis Support Scheme.

7.8.4 The Panel heard that following recent meetings with Job Centre Plus, there is felt to be a need to improve the level of advice and guidance to claimants. Joint working is going on with JCP to improve communications and help people to better understand the system. To this end, the Welfare Reform Team is working on a short hints & tips guide for claimants.

7.8.5 The Panel would support the joint working approach being taken by the Council and JCP and commend the proposal for the creation of a guide for claimants. However, the Panel would also suggest that in common with the national direction of travel following on from the independent review of sanctions, JCP review the current operation of the sanctions system in order to help alleviate the hardship being experienced by many claimants and the demands being placed on the Council and other support agencies.

7.9   Council Tax Support Scheme

7.9.1 On the 1 April 2013, Central Government abolished the national Council Tax Benefit scheme and passed Council Tax support from central to local government. This was accompanied by a 10% reduction in total funding. All authorities were expected to develop their own Council Tax Support schemes setting out who should be helped and how much support should be provided.

7.9.2 The reduction in funding has meant that the Council has had to make up the 10% shortfall by either funding the amount itself or by reducing the level of support given under its Council Tax Support Scheme.

12

7.9.3 Nationally around 18% of local authorities have maintained the old system with some people paying nothing, and 82% have reduced support. In other neighbouring local authorities the following charges have been set in 2014/15:

- South Tyneside 30%
- Newcastle 20%
- Gateshead 8.5%
- North Tyneside 7%

7.9.4 In 2013, when developing its Council Tax Support scheme for the Sunderland, the Council undertook an extensive consultation exercise which showed a preference that everyone should pay something towards their Council Tax bill. A consultation exercise was also undertaken in 2014. Under the old scheme there were about 15,000 people in Sunderland who received 100% council tax benefit. Many of these people were some of the most vulnerable in the city so it was considered important to achieve a balance and not introduce an amount that was beyond their ability to pay.

7.9.5 With this in mind it was decided to set the contribution to 8.5% which meant most would pay £1 per week. This was felt to provide a balanced approach between responding to the financial challenge facing the Council and the ability to pay. It was also felt to be easy to understand. This payment was for all adults in the household, and would include other household occupants, such as non-dependent children still living in the household who would also need to pay £1. This would not affect pensioners as no pensioner would have to pay more than they did on the old scheme, as this was legislated for.

7.9.6 In 2013/14, as reported to the Panel, the total number of people of working age paying Council Tax for the first time was 15,227. The total amount paid to date was £1.23m (77% of the total debt raised). 12,071 people paid in full, 1705 paid something (£180,000), 110 owe less than £10 and of 1,451 who have paid nothing (£180,000), as 937 of these are already paying on a previous bill, only 514 are left to address .

7.9.7 Therefore, since its introduction 77% of people are up to date with their payments.

7.9.8 In terms of the approach to collection, decisions are taken on an individual basis and because it often involves very vulnerable individuals a good of discretion and common sense is exercised when trying to set achievable repayment schedules. Also every effort is made to prepare people for the introduction of the charge with the sending out of clear letters explaining the reason and operation of the scheme.

7.9.9 In order to simplify the payment process, the Council uses a number of methods for collection:-

- 75% of people pay by Direct Debit (DD)
- DD dates are flexible making to easier for residents
- People can pay by cash/cheque if preferred

- Attachment of benefits is used to collect some arrears and is popular with many clients
- Court costs are kept to a minimum
- Use of bailiffs is only used as a last resort, and has been used by exception for those in work

7.9.10 As part of the review, the views of the Panel were sought on how the Council Tax Support scheme should operate from 2015/16. In view of the positive experience of the last two years, the Panel supports the continued operation of the existing Council Tax Support scheme with the maintained contribution of 8.5%. It was noted that the operation of the Council Tax support scheme would need to be revisited after 2015/16 to assess the effect of the introduction of Universal Credit.

7.10   Crisis Support Scheme/Community Care Support Scheme

7.10.1 In April 2013, both the Crisis Support Scheme and the Community Care Support Scheme were transferred from the DWP's Social Fund to local authority control. It was argued that the localisation of such financial aid could be better targeted and controlled at a local level. The resources were to be provided from non-ringfenced funding from central government

7.10.2 As very little notice was given prior to the transfer, it was decided to retain the original DWP eligibility criteria for 2 years in order to obtain a better insight into how the scheme operates and how it could be improved from 2015.

7.10.3 To be eligible for the scheme claimants:-

- o must receive DWP help in the first instance e.g budgeting loan, short term benefit advance
- o be on low or no income e.g receiving/applying for Housing Benefit/Council Tax Support
- o live in Sunderland, or be moving into the area
- o satisfy 1 of the DWP qualifying criteria – serious physical health problem, at risk of homelessness, substance or alcohol misuse problem, on probation, at risk of domestic abuse, learning disability, mental health problem, young person leaving care, prevention of going into care, older person with support needs, caring responsibilities, have dependent children, families under extreme pressure
- o as deemed appropriate by a professional

7.10.4 The number of items awarded in 2013/2014 totalled 1152 with a spend of £421,000 (includes set up costs).

7.10.5 A list of the goods available is attached as an appendix to this report. Where possible local businesses are used to provide recycled white goods. This provides good value for money as well as adding value to the local economy. Unlike the DWP scheme this scheme does not give out cash loans that need to be paid back but give goods/vouchers which are seen as gifts.

7.10.6 The table below provides a breakdown ward by ward of the Welfare Provision Packages from 2013/14. This showed that Hendon and Washington North had the most cases by far.
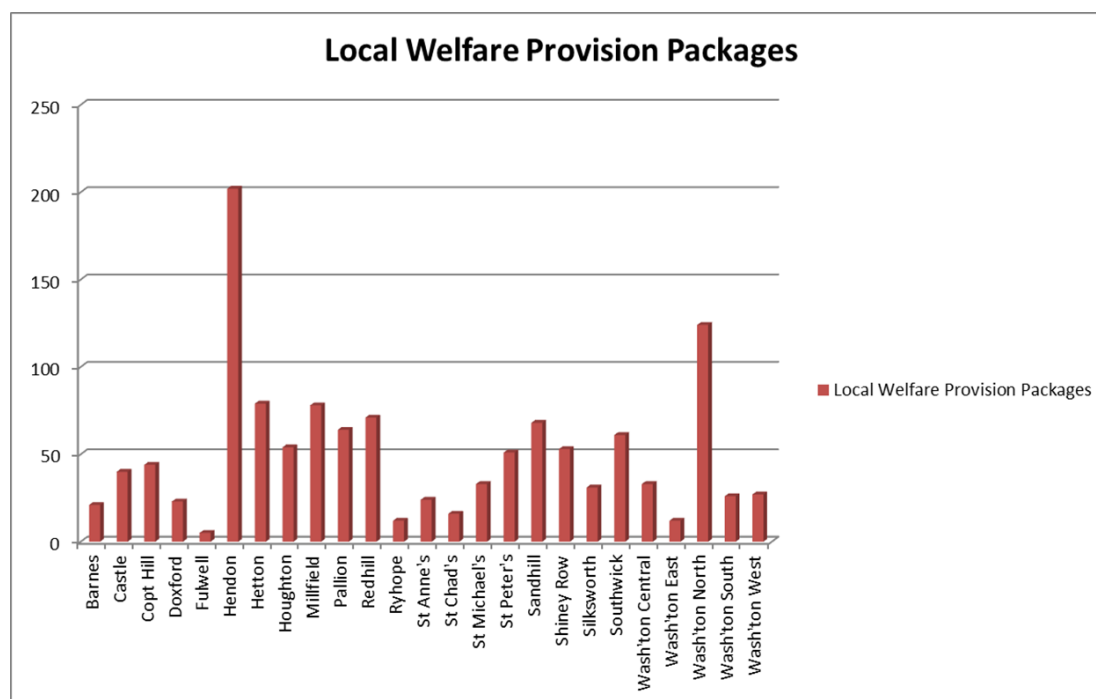
7.10.7 After two years of operation, a significant amount of experience and feedback from consultation has allowed an understanding of what is required,and the scheme is to be rolled forward as is, with the addition of the following:

The Scheme to have a wider scope: including all applicants (including couples and singles) where there is a risk to their health and safety. The aim will be to provide immediate short term help to protect a person's health and safety/welfare by preventing a crisis.

The Scheme will retain key elements including: Be on low or no income e.g receiving or applying for Housing Benefit or Council Tax Support, live in Sunderland, or be moving into the area.

The scheme will also open up the qualifying criteria to include: Those who are sanctioned and can appeal, and those applying for Universal Credit where no support is available.

7.10.8 The overall aim of the amendments is to make the scheme as flexible as possible and future proof it against the introduction of further reforms. The scheme has been costed out and is expected that it will need a budget of £250,000 pa which has been built into the base budget to provide for future years.

15

7.10.9 In order to work within this budget it will be necessary to get value for money, use recycled goods and develop strong partnerships particularly with the Food Parcel Network (FPN).

7.10.10 This will be achieved through:

- Triage process with FPN
- Support the FPN with food supplies when running low
- Working closely with Salvation Army to identify the reasons people are asking for food parcels and providing Advice Workers in locality
- Using this information to improve Council's scheme to target the most vulnerable

7.10.11 The Panel referred to the benefits of working more closely with the Community Sustainability Service as quite often the goods that are collect could be recycled rather than disposed of.

7.10.12 Again, the Panel has looked at a number of case studies providing examples of the situation that people can find themselves in and how the scheme can help in times of desperation. in order to obtain a better understanding of the impact of the schemes.

Case Study 1 – Community Support Scheme

A customer approached the Community Care Support Section for assistance with furniture and white goods as he had recently been allocated a Gentoo property following being on a local authority at risk list for over a year and had nothing at all for his new property.

The Customer has mental health problems and a history of stroke and heart problems and has recently been released from hospital. The Council was able to offer the person assistance and delivered a bed, white goods, bedroom furniture, chairs and small kitchen and electrical items which enabled the person to move into his property.

Case Study 2 - Crisis Support Scheme – Joint Working with Social Justice Team at Job Centre Plus

This case involves a single person with 5 children. Following marital problems and domestic violence the husband was removed from the property by the Police. As he was the main benefit recipient the person had to make claims in her own right. When she contacted child tax credits and child benefits they informed her that she would have to make new claims for both benefits and that they would take a number of weeks to process. She also had to make a new claim for JSA so was advised her to claim for STBA. Claiming JSA meant that she had to be available for work to satisfy the claimant commitment criteria with the JCP.

Children's Services had become involved with the family as she was struggling to cope. She was therefore referred to the Social Justice Team at

16

JCP who are continuing to support her with her job search by adopting a light touch approach in terms of her actively seeking work until she has sorted out her family problems. This will prevent any sanctions being applied to her claim. The Council were able to support the family with a food parcel and utility vouchers whilst her benefits were being sorted out.

7.10.13 The Panel notes that replacing Social Fund provision locally is a new area of work for local authorities and represents a considerable new demand, the cost of which is difficult to forecast. The Panel consider that the Government must ensure that local authorities are provided with sufficient and adequate funding they need to deliver local support schemes.

7.10.14 In conclusion, the Panel supports the suggested amendments to the eligibility criteria of the Crisis Support and Community Care Support schemes.

7.11   Introduction of Universal Credit – Sunderland

7.11.1 Universal Credit is a single benefit claimed on line and paid once a month in arrears which will replace a number of existing benefits (including Job-Seekers Allowance, Employment and Support Allowance, Income Support, Child Tax Credits, Working tax Credits, and Housing Benefit).

7.11.2 Government intends that the introduction of Universal Credit will:-

- encourage people on benefits to start paid work or increase their hours by making sure work pays;
- make it easier for people to manage the move into work;
- simplify the system, making it easier for people to understand, and easier and cheaper for the government to administer;
- reduce the number of people who are in work but still living in poverty;
- reduce fraud and error.

7.11.3 Government estimate that the introduction of UC will result in an increase in income for the majority of claimants and it should help to ensure that people are not detrimentally affected when increasing their working hours.

7.11.4 However, the introduction of Universal Credit has been associated with a number of concerns. Firstly, claimants will receive their benefits monthly rather than fortnightly and people on housing benefit will now have to pay their rent directly to their landlord monthly rather than have the money paid directly to the housing association or local authority. It is felt that this could lead to difficulties for some claimants in terms of managing their spending.

7.11.5 There is also a concern that there has been a lack of information for people ahead of the transfer to UC, the adequacy of IT systems to deal with the complex nature of the benefit and the associated possibility of errors and delays in benefit payments.

7.11.6 Universal Credit is being introduced in stages. The original plan was to implement Universal Credit in full by 2017. However serious delays have been

experienced associated with problems with the IT systems and the complexity of the processes involved. As a result its introduction has been mired in considerable amount of controversy.

7.11.7 It has recently been announced that Universal credit will be rolled out in 4 tranches. Locally, Newcastle will be in tranche 1, going live on 27 April 2015. Gateshead are in tranche 2 and will be going live 15 June 2015. Sunderland are in tranche 3 and will be going live in November 2015

7.11.8 All roll outs will be working with a limited number of new cases (single customers claiming JSA). Significant analysis has been undertaken to identify these cases and the potential impact in Sunderland, which is estimated to be 50 new live cases per week, up to a maximum take up of 1,100 who may be impacted at its peak.

7.11.9 In addition to an analysis of caseload to identify potential UC claims, a detailed UC roll out plan has been developed, and includes:

- Refine Work Coach actions (e.g. personal budgeting advice)
- Refine co-commissioning activity
- Refine additional support mechanisms (e.g. crisis support)
- Systems review
- Funding/Budget
- Communication to customers/partners/stakeholders
- Impact on administration of Council Tax Support Scheme

7.11.10 The pilots in Newcastle and Gateshead will be kept under significant review to identify any learning or issues that may need to be addressed, and the roll out plan amended accordingly

7.11.11 In conclusion the Panel would urge that developments, impacts and support mechanisms for the introduction of UC be kept under careful review. It is highly likely that the introduction of UC will add a considerable burden of work to the Council and its partners, particularly in the event of operational difficulties and delays in payments.

7.11.12 The Panel commends the Council on the preparation work that is going on in advance of the introduction of Universal Credit and its commitment to partnership working.

8 Conclusion

8.1 The Governments welfare reforms represent the most fundamental changes to the benefits system in a generation. While the reforms are intended to reduce dependency on social security and encourage employment, they also play a key part in the Government's deficit reduction strategy.

8.2 The impacts of welfare reform are very substantial with an estimated loss of income of approaching £19bn a year once all the reforms have been fully implemented, or an average of £470 a year per adult of working age across the whole of Britain.

8.3 For some of the individuals affected by the changes, the loss of income is much greater. Many families will be absorbing a number of welfare changes simultaneously and it is important that we understand the cumulative effect of these changes.

8.4 A relatively high proportion of those affected by welfare reforms are of working age/working households. The reforms have also had a particular effect on the disabled people.

8.5 The welfare reforms are being applied uniformly across the UK and have little regard for particular local circumstance or conditions. For example in the case of changes to housing benefit size criteria, it is not as justified in its introduction based on the condition of the local housing market.

8.6 The financial losses arising from the reforms have hit some places much harder than others. The impact of the reforms are being felt most strongly in areas like Sunderland where there are relatively high number of people receiving welfare benefits, particularly in terms of disability.

8.7 It is estimated that over half of the households in the North East will be affected in some way by the reforms. Some may suffer a reduction in income; some may find their present accommodation is no longer affordable and this could all impact on a range of services such as jobs, housing, community cohesion, and demands for local authority services. There will also be an impact on the local economy with a potential loss of spending power and additional demands for Council services and support. The partnership working and the council working as an enabler rather than a deliverer is to be commended in areas such as the triage between the food banks and the Crisis Support Scheme, and plans to extend this are welcome.

8.8 The use of sanctions is causing major concerns in the city and an impact in other areas and on other services such as Food Banks and Crisis and Community Care Support funding. It also brings with it the danger of charity dependency among a growing number of residents.

8.9 The changes present a challenge to local authorities and partners particularly at a time of reducing funding, and plans for the enabling role of the council are crucial. It is also important that the demands placed on the Council are reflected in additional funding from the Government. However, concerns remain about the long term future of funding for Discretionary Housing Payments.

8.10 Such concerns are heightened by the impending introduction of Universal Credit and the prospect of difficulties, delays and backlogs in processing payments by DWP
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8.11 The Panel commends the Council on the work going in the area of welfare reform and its commitment to partnership working.

8.12 It is important for the Council to continue to adopt a range of strategies to support clients; including the targeting of information campaign to raise awareness among those affected; personal support to help manage finances and avoid arrears. A key issue will be the future impact of Universal Credit. The Council has an important role to provide via partners support and ensuring that the city is prepared and has planned ahead.

8.13 We need to continue to develop joint working and signposting, in particular with Jobcentre Plus, housing providers and VCS. The development of a strong relationship with Job Centre Plus can help in addressing problems that may emerge at an early stage of UC and allow for the sharing data and information that can aid planning. Overall, we need to continue to work with housing providers, advice services, and VCS to mitigate problems and identify solutions.

8.14 The Panel supports the approach being taken on Council Tax support and we would support the continuation of the scheme in the present form. We would hope that the Government will continue to provide sufficient funding to allow for the future continuation of Discretionary Housing Payments.

20

10   Recommendations

10.1   The Panel's recommendations are as outlined below:-

(a)   That the Council continues to work with its partners and other agencies to help to mitigate the impact and hardship resulting from welfare reform on the people of the city;

(b)   That the Council continues to work with Jobcentre Plus in order to improve the clarity of information provide to claimants, particularly to prevent the unnecessary application of sanctions;

(c)   That the Council and its partners continue to prepare for the introduction of Universal Credit across the city and monitor its effect on the pilot areas.

(d)   That the Panel expressed its support for the continuation of the Council Tax Support at its current level during 2015/16 ;

(e)   That the Panel supports the content and eligibility criteria suggested for the amended Crisis and Community Care Support schemes as set out in the report.

21

Responsive Services and Customer Care Scrutiny Panel

Policy Review 2014 – 2015

Operation of Food Banks in Sunderland – Draft Report

Contents

1 Foreword from the Scrutiny Lead Member for Responsive and Customer Services

During recent years there has been a massive increase in the number of food banks operating in the UK and the number of people using them. This increase and the reasons behind it, has been the subject of considerable debate and controversy.

The purpose of this review is to look at the current position in Sunderland. The review has limited itself primarily to the operation of food banks which are part of the Sunderland Foodbank Network, though it is recognised that there exists many smaller food banks and providers of subsidised meals in the form of breakfast and luncheon clubs.

In terms of the operation of food banks in the city we would pay tribute to the selfless and committed work of the volunteers who help provide the service. The findings of the recent Feeding Britain report show the city to be at the vanguard in terms of the organisation of the service.

However, for many the increase in the use of Food Banks represents a fundamental failure in the system of welfare in the UK and a symptom of a general growth in poverty and in particular food poverty. This increase brings with it the danger that Food Banks could become an institutionalised phenomenon, leading to dependency and effectively covering weaknesses in the welfare system. The Panel considers that it is important to tackle the root cause of the increase in the use of food banks such as benefit delays, benefit sanctions and low income.

In conclusion, I would like to thank my colleagues on the Panel and all of the officers and staff involved for their hard work during the course of the review and thank them for their valuable contribution.

Councillor Ronny Davison, Lead Scrutiny Member for Responsive and Customer Care Services

2

2 INTRODUCTION

2.1 During recent years there has been a massive increase in the number of food banks operating in the UK and the number of people using them. This increase and the reasons behind it, has been the subject of considerable debate and controversy.

2.2 The purpose of this report is to look at the current position in Sunderland. It will also include consideration of the implications of the Feeding Britain report published in December 2014.

2.3 The current review has limited itself primarily to the operation of food banks operating as part of the Sunderland Foodbank Network. It is recognised that there exists many smaller food banks and providers of subsidised meals in the form of breakfast and luncheon clubs. The Panel notes that the Food Bank Network is currently undertaking an audit of such services which should be reporting in mid 2015. This will provide an opportunity to obtain a clearer and more balanced picture of free or subsidised food provision in the city.

2.4 The report follows on from the Panel's earlier review into the impact of welfare reform on the people of Sunderland.

3 AIM OF THE REVIEW

3.1 The review will consider the operation and development of food banks in Sunderland.

4 TERMS OF REFERENCE

4.1 The Panel agreed the following terms of reference for the review:-

(i) To consider what we mean by the term food bank;
(ii) To look at the operation of food banks in Sunderland;
(iii) To consider implications of the Feeding Britain report;
(iv) To assess the challenges facing local food banks in the city

5 MEMBERSHIP OF THE PANEL

5.1 The membership of the Responsive Services and Customer Care Scrutiny Panel consisted of Councillors Ronny Davison (Lead Member)

6 METHODS OF INVESTIGATION

6.1 The following methods of investigation were used for the review:

3

(a) Desktop Research
(b) Evidence from relevant Council officers
(c) Evidence from Food Bank Providers
(d) Visit to a number of Food Banks including Salvation Army at Austin House, Streetcare at St Gabriel's Church and St Bethany's at Bede Tower.
(e) Attendance at Feeding Britain:Feeding Sunderland Event

7 FINDING OF REVIEW

Findings relate to the main themes raised during the Panel's investigations and evidence gathering.

7.1 What is a Food Bank?

7.1.1 Food banks are non-profit making organisations that provide food parcels to those in crisis who have insufficient money to buy food. They may be operated by a range of voluntary and public sector bodies but are often associated with church based organisations. Food banks differ in size and scale; from large national operators such as the Trussel Trust to smaller independent food banks run from premises by a handful of volunteers.

7.1.2 Indeed, many bodies providing food may not formally recognise themselves as food banks with the number of establishments being prone to frequent fluctuations. Food aid may also be focused on the needs of particular groups such as disabled people, asylum seekers.

7.1.3 Food banks are not the only source of emergency food. Free or subsidised breakfast or luncheon clubs also provide a network of food for the hungry. It is noted that the Food Bank Network is currently undertaking an audit of such providers in the city which should be reporting in June 2015.

7.1.4 Most food banks aim to provide:-

(a) emergency food help to those in crisis
(b) a signposting service to agencies who could help with a client's underlying problem.

7.2 Food Banks – Operation in Sunderland

7.2.1 There are currently around half a dozen major food banks operating in Sunderland including:-

- Salvation Army at St Austin House, Southwick;
- Bethany Church in Houghton
- Bethany Church Bede Tower, City Centre
- Hetton New Dawn
- StreetCare St Gabriel's
- Washington Food Bank

4

- Gentoo

7.2.2 Smaller food banks operate from a number of locations throughout the city most notably Shiney Row and Houghton. The Panel was informed that while this provided for a fairly even geographical coverage of the city, there is a gap in provision in the Silksworth area which the Food bank Network is currently looking to address.

7.2.3 The Council itself operates an emergency food aid service as part of the transfer of the Crisis and Community Support Schemes from the DWP to local authority control in April 2013.

7.2.4 The Council's scheme provides food and other emergency aid to residents based on local eligibility criteria that has recently been reviewed in order to respond to the Welfare Reform changes that are emerging. We were informed that the food aid provided by the Council is modelled on the systems operated by the voluntary sector food banks. Given the limited resources available, the Council has been clear that only by pooling available resources can an adequate emergency food aid service be provided across the city.

7.2.5 While emergency food provision has always existed, the number of food banks and scale of demand has increased drastically over the last few years. Figures from the Trussell Trust indicate that nationally the number of people receiving three days' emergency food increased significantly from 346,992 in 2012-13 to 913,138 in 2013-14. In the North East, they estimate that food banks have helped 36,273 adults and 22 873 children in 2013-14.

7.2.6 Over recent years, this increase in demand for Food Banks has also been replicated in Sunderland. While detailed figures for the city are not available, the Salvation Army estimates that they have provided around 500 food parcels in 2014. Canon Bamber of the Sunderland Food Bank Network estimated that this represented around half of the parcels provided by the Food Bank Network. Combined with the approximately 1100 items awarded by the Council through its Crisis and Community Care Support Schemes, this represents a city wide figure of at least 2,000 during 2014 – though it is likely that the number is far greater.

7.2.7 A breakdown of the number of people dealt with by the Salvation Army at St Austin's together with information such as the referring agency is attached for information.

7.2.8 In view of the importance of understanding more about the prevalence of food poverty and the use of food banks in the city, the Panel welcomes more the development of more accurate city wide data on outlets.

7.2.9 During the review, the Panel met with Canon Bamber from Sunderland minster and several other members of the Sunderland Food Parcel Network in order to discuss the way in which food banks operate in the city. The Panel heard that the Network was set up by the main food banks to help develop a citywide provision for food parcels, work collectively and coordinate

5

resources. From the beginning it has been emphasised that the food bank services should be a "hand up and not a hand out".

7.2.10 Referrals are made by frontline care professionals (such as doctors, health visitors, social workers, Citizens Advice Bureau staff, welfare officers, the police and probation officers) who will identify that a person is in crisis. The Network operate a triage system whereby requests for food come through Sunderland Minster and are then referred on to an appropriate food bank provider. It was estimated that around 5/6 call per day are received.

7.2.11 Clients eligible for help are usually referred to the geographically nearest Food Bank though this will depend on factors such as individual opening hours and ensuring the most effective use of resources. There is also scope for partners to share information advice and foodstuff with other providers depending on need.

7.2.12 Every effort is made to try to ensure that the system is not abused while retaining flexibility. It was noted that there are circumstances in which people are refused if they are felt to be simply abusing the system. We heard that the Food Banks try to limit people to 3 food parcels in to avoid the danger of dependency.

7.2.13 Most providers can accommodate home delivery for those with mobility issues though this can provide major operational and practical issues and is generally discouraged.

7.2.14 During our discussion with the food bank providers, there was a consensus that the triage system operates very successfully in the city and in many ways represented an example of good practice. With any voluntary system there were occasional operational issues. Some food banks have limited opening hours, some operate at weekends while some do not. However, it was felt that the triage system can help promote a relatively coordinated service.

7.2.15 The Panel considers that the Network has clearly engendered a strong sense of joint working and cooperation between the main providers which is to be commended.

7.2.16 While every effort is made to keep bureaucracy to a minimum, records are kept by the Minster and some of the individual food banks themselves to help to provide a basis for follow up work to address an individuals long term needs and to highlight any trends in usage.

7.2.17 For people attending food banks some are asked questions on their personal circumstances, the reason they are seeking assistance and sign posted to those who can help further.

7.2.18 All of the food banks we spoke to considered it important that food banks do not operate in a vacuum and therefore every effort is made to develop links or refer people to appropriate bodies who can help with long term problems.

6

7.2.19 In this sense there was a repeated commitment that food aid should be seen as a means of a "hand up rather than a hand out".

7.2.20 It was noted that many people who are dealt with have multiple needs and it is vital that there is good partnership working in place for this and close links with a range of statutory and voluntary agencies in order that underlying issues can be addressed.

7.2.21 All of the food bank providers were keen to foster the co-location of One Stop/Food Bank Plus model in which food assistance providers work with hubs that can address the root causes of the problem such as debt, addictions, access to benefit, coping with a low income, leaning cooking skills.

7.2.22 It was stressed that if a person is in extreme economic distress then it is difficult for them to think constructively of issues such as training and job search. It is therefore important to meet their basic needs so they are able to bring order and stability into their lives and build for the future.

What is in Food Parcel?

7.3.1 The contents of food parcels tend to be similar across the different food banks we spoke to including that of the Council.

7.3.2 Most parcels are designed to last 2-3 days and provide a range of often long life products such as tinned soups and meat. The emphasis is on filling food that is easy to prepare and popular with clients. While not necessarily fitting in with a 5 a day philosophy, it was felt that this approach tied in with the emergency nature of the food being provided. For example, clients tend not to want products such as pulses and lentils as they can be time consuming and costly to cook.

7.3.3 Fresh foods such as bread, eggs, butter and fruit/vegetables are provided by some food banks such as the Council's but for the majority of the food banks their use is constrained by the ability to store. It was felt that the provision of fridges and freezers for food banks could help to overcome some of these difficulties (subject to satisfactory business cases being made). Based on our discussions with the food bank providers, the Panel would therefore suggest that the Council looks into the practicalities of offering to purchase fridges and freezers for those food banks who express an interest.

7.3.4 However, food banks are not just limited to the provision of foodstuffs. All of the providers we talked to just wanted to help people who are in genuine need and were very willing to go the 'extra mile' to expand their provision, if possible to include practical necessities such as can openers, cooking equipment, toiletries and baby items, clothes.

7.3.5 We note that most of the food banks do provide deliveries to the disabled people but there are major issues around the access to a driver and associated costs such a service is kept to a minimum.

7

7.3.6 During our visit, it is clear that the storage facilities at our food banks are often basic. While in many ways this is seen as adequate for the needs of what is an emergency service, the Panel does feel that there is scope to improve storage facilities at Council and other food banks. We suggest that this may be an area in which the Council could help by way of spare office furniture and equipment.

7.3.7 Food Banks exist on public food donations sourced through churches, companies, schools, public bin collections at supermarkets and food donated by supermarket.

7.3.8 A number of supermarkets in the city such as Sainsbury and ASDA make surplus or waste food available to food banks. Such food in not out of date but rather is excess food ordered that cannot be returned to the supplier.

7.3.9 Most of the food banks confirmed to us that food supplies are not a major problem. A bigger problem is the storage, transport and distribution of food that can be made available by supermarket. The Salvation Army referred to occasions where food supplies had to be refused because of a shortage of storage space. The intention is to work with the Network to help them in solving this issue; potential solutions involve supporting an approach to the supermarkets that are making food available in order to persuade them to assist with transport for delivery.

7.3.10 Essential to the work of the food banks is the work of the volunteers who help run the food banks by packing, sorting and distributing the food. Based on our discussions with the food bank providers there appears to be an adequate number of volunteers at the present time though it was recognised that more could always be done to ensure a sustainable supply of volunteers in the long term. More of an issue for the Food banks was access to resource to help them coordinate the work of volunteers and provide support in areas such as transport and storage of food stuff.

7.3.10 During our visit, the Panel met with some of volunteers and most impressed by the high levels of enthusiasm and commitment shown.

7.4 Why Do People Use Food Banks

7.4.1 One of the more controversial aspects of the operation of food banks rests with the reasons why people use them.

7.4.2 During our visit and discussions with food bank providers, the Panel was told that there is no one particular section of society that uses food banks. Food bank clients include individuals and families in crisis situations, and working and non-working households there were various reasons why people may need to use a food bank, including:-

  o Delay in receiving benefits
  o Changes or reductions in benefits

- o Effect of benefit sanctions
- o Low income (including zero hours contracts)
- o Delayed wages
- o Homelessness
- o Unexpected loss of job
- o Unemployment
- o Sickness (including mental health issues)
- o Debt
- o Domestic violence
- o Refused crisis loan

7.4.3 These reasons have been echoed by the recent reports of the Trussell Trust and the All-party report into Feeding Britain which have argued that at least half of all food bank users are referred because they are waiting for benefits to be paid, because they have been sanctioned or because they have been hit by the bedroom tax or removal of working tax credits.

7.4.4 The reports also refer to the increasing number of working people using food banks citing low pay and rising cost of living. In this sense food banks are acting as a buffer zone for families experiencing sudden drops in income helping people over a financial emergency and allowing time to deal with any deep seated issues.

7.4.5 During our visit, we heard anecdotal evidence that benefit delays, changes and sanctions penalise those in the most difficult of circumstances and can cause extreme financial hardship and temporary lack of food. In some cases people are left with choices to make, such as whether to pay a heating bill or buy food.

7.4.6 We were told that many food bank users were also not made aware by the DWP of the various crisis payments available in different circumstances and that more could be done to better inform claimants of the options available.

7.4.7 We were also told that for many for many people, turning to a food bank was a last resort and one particular concern we heard was that the over-65s were often too embarrassed to access food banks.

7.4.8 However, there is at this time no consensus on the reasons why people use food banks. For some the growth in the use of food banks reflects a breakdown in personal household and budgeting skills. Others have contended that the rising demand was simply the result of there being more food banks in existence. Still others have seen the growth as in part reflecting the withdrawal of other sources of emergency aid.

7.4.9 The Panel would therefore join with others in recommending that the Government undertake more research to find out more about the reasons why people are increasingly using food banks.

7.5   Implications of the Feeding Britain Report

9

7.5.1 Our review has coincided with the publication of the Feeding Britain report into food poverty published in December 2014. The report was produced by the Church, food providers, food industry and voluntary sector and represents a comprehensive piece of research into not only into the growth of food banks in the UK but also the way in which the service might be best developed into the future.

7.5.2 As mentioned earlier the report makes a series of recommendations based on analysis that food poverty is primarily caused by rising prices, a low national minimum wage, income poverty, and a flawed benefit system hampered by complex programmes and criteria.

7.5.3 The report calls for reform of the utilities market in order to control price rises and ensure that rises do not disproportionately affect the poorest in society. It also calls for action to deal with excessive interest charges and action to tackle the problem of low pay. The report highlights the effect so of delays in benefit payments and the inappropriate use of sanctions. The report call for action to deal with the food waste in our society and measures to improve the use and distribution of surplus food. Also measures to improve housekeeping skills.

7.5.4 A central recommendation of Feeding Britain report is the creation of a national network of food banks and food assistance providers whose membership would be composed of the food bank movement and other providers of food assistance, the voluntary organisations redistributing fresh food surplus, the food industry and representatives of Government.

7.5.5 The local Network is seen as having a number of functions:-

   o Redistribution of surplus food
   o Coordinate food waste prevention by working with supply chains of food retailers and manufacturers
   o Build on knowledge of local arrangements
   o Develop centres of excellence Information on debt – access to benefits
   o Foster the colocation of the One Stop/ Food bank Plus Model
   o Measures the take up of free school meals in schools

7.5.6 As an initial step the report recommends the establishment of 12 pilot projects – one in each region of the UK.

7.5.7 The Panel notes that the models set out in the report in many ways reflects the kind of work already going on in Sunderland in terms of partnership working, cooperation and the concept of the colocation based on a Food Bank Plus model.

7.5.8 The Panel also highlighted that high profile given by the report to the need to pilot and implement schemes to maximise the take up of free school meals and tackle holiday hunger. For example the report refers to a spike in Food Bank use that can occur at times when children do not access to free school

10

meals. A Working Group is being formed to learn from good practice elsewhere and identify specific actions/pilots.

7.5.9 The report also refers to the potential role of local authorities in working with local food organisations to free up land for food production, retail and storage. The panel would suggest that this recommendation is looked at in further detail in order to consider its potential implications for the Council.

8 Conclusions

8.1 During the last few years, we have seen a rapid increase in the number and use of food banks both nationally and within the city. While food banks and emergency food aid has always existed in some form the recent increase has been unprecedented.

8.2 For many this increase represents a fundamental failure in the system of welfare in the UK and a symptom of a general growth in poverty and in particular food poverty. They also point to the danger in the provision of such food becoming an institutionalised phenomenon, leading to dependency and effectively covering weaknesses in the welfare system. Instead it is important to tackle the root cause of the increase in the use of food banks such as benefit delays, benefit sanctions and low income.

8.3 For others, it is an example of individuals and volunteers coming together to provide help and charity for they neighbour. Whatever, the viewpoint, we do feel that it is important to gain a better understanding of the numbers using food banks in the city, any trends that are emerging and an understanding of the reasons why people use food banks and free or subsidised meals.

8.4 We also feel that given the rise in the number and use of food banks it would be useful to have a clear definition of what we mean by the term food poverty and what we mean when we say that people are living in food poverty.

8.5 In terms of the operation of food banks in the city we would pay tribute to the selfless and committed work of the volunteers who help provide the service. The findings of the Feeding Britain report show the city to be at the vanguard in terms of the organisation of the service.

8.6 The Council should look to work with the Network to where possible assist with such issues as transport and storage and distribution to help broker discussions with the supermarkets on ways of helping them to meet their food waste targets in return for assistance with distribution.

8.7 The Food Network provides a sound basis for the coordination and on-going development of food banks in the city. They provide a platform for the coordination of work of the main food providers and the exchange of information and best practice and the development of a database as to who are using the service and why again Jim, some the network are not developing data bases of who is using their service and why, and don't intend to – I understand why Members would want it all tied up nicely, but we have to trust providers, and they will deliver in manner they see fit .

8.8 During our discussions the Network reiterated that view that they would generally dissuade the opening of further food banks as there was the danger of hampering effective coordination and creating additional demand and dependency. As a Panel we would concur with this view.

12

8.9 We do not suggest that food banks should take the place of statutory welfare provision but one of the strengths of the food bank movement has been its ability to reach "the hardest to reach" groups using food as a gateway to help solve more deep seated problems. Therefore food banks can be seen as a start of a journey for some people, helping them with benefit advice, job search, training needs drugs and alcohol issues.

8.10 In this way we can see a significant overlap in relation to hot food and the need for wider adult social care. Many of those using food banks are people with physical, mental health and social isolation issues.

8.11 As mentioned earlier, benefit related problems are seen as the single biggest reason given for food bank referrals by most food banks. Lengthy delays in the administration and receipt of benefit payments have caused severe hardship for new claimants. However, it would appear that avoidable problems are occurring with DWP in the administration and processing of social security benefits and that people are not always aware of their entitlement to hardship payments. We need to ensure that claimants are that payments are available, how to apply for them, and the eligibility.

8.12 We heard that the Council is currently working with the DWP to develop an information leaflet explaining the operation of the sanction system and providing straightforward advice and guidance. We feel that such joint working is a very constructive step forward. However, we do have concerns that the introduction of Universal Credit could bring with an increase in delays and a resulting increase in the demands on emergency aid such as food banks. This was certainly the feedback that we received when speaking to food banks on this issue, and we welcome the changes made to the Council's Crisis Support Scheme to help those left without support due to Universal Credit.

8.13 We feel that there is a key role for the Council in continuing to develop volunteering in the city. It is noted that a revised volunteering Strategy is currently being prepared for the city which should help to ensure a sustainable supply of volunteers into the future.

8.14 One area where the Panel has considerable concerns is in the growth of holiday hunger in the city and we are pleased that this issue was highlighted in the Feeding Britain report. We feel that more work needs to be done to consider the reason and implications of its growth and the ways in which we can best combat it. We would therefore suggest that a further piece of work could be undertaken into the options available for dealing with the issue of holiday hunger in the city.

9   RECOMMENDATIONS

9.1   The Panel's recommendations are as outlined below:-

(a)   that the Council looks into the practicalities of offering to purchase freezers for those food banks who express an interest;

(b)   that the Council work with the Network to help to broker discussions with those supermarkets who provide surplus food on ways of providing transport for delivery;

(c)   that more research be undertaken by the Network into the number and location of food banks, luncheon clubs and subsidised food outlets in the city;

(d)   that joint working continue with Jobcentre Plus to make claimants more aware of the operation of welfare benefit sanctions, short term benefit advances and the existence of emergency payments;

(e)   that the Council works with the Network to help to dispel myths surrounding use of food banks.

14

**Skills Economy and Regeneration Scrutiny Panel
Policy Review 2014/15**

Future Proofing of Skills - Draft Report

Contents

1

1 Foreword from the Scrutiny Lead Member for Skills Economy and Regeneration

It gives me great pleasure to introduce the Skills Economy and Regeneration Scrutiny Panel's policy review into the future proofing of in Sunderland.

The changing nature of the global economy and the impact of technological and demographic change has resulted in accelerating changes to future skills demands. In this changing economic environment, any growth in the local economy will be highly dependent on the workforce possessing the right skills and in the right numbers

There has been a persistent concern that our national skills system has not been supplying the right type and level of skills. This weakness in skills has manifested itself in a low rate of productivity and low wages compared to other advanced economies

The ability of Sunderland to increase its supply of highly skilled workers is driven primarily by the extent that the city and region is able to grow the overall size of its economy. It is important to encourage growth in all areas of the economy. We need the right quantity and quality of job. We need to increase economic growth generally and in a number of key growth areas in order to increase demand for high skills. It is not enough to prepare individuals for work; we must ensure that quality jobs are available.

In order to respond to these challenges, the city needs to focus on both long standing sectors of the economy such as automotive, manufacturing and contact centres while supporting new and emerging sectors such as software and IT and creative and media.

The review therefore examines the opportunities and challenges for the city in seeking to improve its skills base and meet future skill demands in the city. In doing so, the Panel has spoken with a wide range of organisations from the private and public sector in order to understand the impact of economic change on the people of Sunderland.

In conclusion, I would like to thank my colleagues on the Skills Economy and Regeneration Scrutiny Panel and all of the officers and staff involved for their hard work during the course of the review and thank them for their valuable contribution.

Councillor Dianne Snowdon, Lead Scrutiny Member for Skills Economy and Regeneration

2

2 INTRODUCTION

2.1 During the period up until the late 1970's Sunderland was a city heavily reliant for its prosperity on the shipbuilding and coal mining industries. When these industries fell into decline, the city suffered a sharp economic downturn and a period of severe unemployment.

2.2 Since then Sunderland's economy has been transformed through the development of automotive and advanced manufacturing and financial and customer services (contact centres). This has resulted in a dramatic change in the skills required of the workforce of the city.

2.3 However, the changing nature of the global economy and the impact of technological and demographic change has resulted in accelerating changes to future skills demands. In this changing economic environment, any growth in the local economy will be highly dependent on the workforce possessing the right skills and in the right numbers.

2.5 There has been a persistent concern that our national skills system has not been supplying the right type and level of skills. This weakness in skills has manifested itself in a low rate of productivity and low wages compared to other advanced economies.

2.6 While levels of participation in further and higher education have increased in recent years there is a widely held view that this increase is still not enough and that the UK faces the prospect of having a under qualified workforce which will constrain future growth. In effect there are still too many adults and young people who lack basic skills including literacy and numeracy which will be increasingly required in the future.

2.7 This has been accompanied by a belief that the UK has historically failed to provide sufficient vocational training to meet skill demands in the workplace and that vocational training has been undervalued by individuals and employers.

2.8 This review therefore examines the opportunities and challenges for the city in seeking to improve its skills base and meet future skill demands in the city. In doing so, the Panel has spoken with a wide range of organisations from the private and public sector in order to understand the impact of economic change on the people of Sunderland.

3 AIM OF THE REVIEW

3.1 The purpose of the review is to consider the measures being taken to future proof jobs in the city.

3

4 TERMS OF REFERENCE

4.1 The Panel agreed the following terms of reference for the review:-

(a) to consider the background to skills development at a national and local level;
(b) to assess the current and anticipated future demand for skills in the city;
(c) to consider the work being done to develop the city's skills base focusing particularly on the anticipated growth sectors of advanced manufacturing, engineering; software, professional and financial services and creative industries.

5 MEMBERSHIP OF THE PANEL

5.1 The membership of the Skills Economy and Regeneration Scrutiny Panel consists of Councillors Dianne Snowdon (Lead Member), Michael Dixon, Len Lauchlan, Christine Marshall, Bob Price, Billy Turton, Mary Turton, Peter Wood and Tom Wright.

6 METHODS OF INVESTIGATION

6.1 The following methods of investigation were used for the review:

(a) Desktop Research
(b) Evidence from relevant Council officers
(c) Discussions with key stakeholders from the public and private sectors including Iain Nixon, Executive Director - Sunderland College, Denise Wilson - Springboard Sunderland, Ian Green – NISSAN, Ian Fawdon, Local Response Fund Project, Gemma Taylor - City Hospitals Sunderland, David Dunn - Sunderland Software City, Simon Marshall, Head Teacher Highfield Community Primary School and member of the Education Leadership Board, David Donkin, Assistant Director University of Sunderland.
(d) Attendance at the Advanced Manufacturing Sector Work Discovery Day held at the Skills Academy for Sustainable Manufacturing and Innovation (SASMI), Washington – hosted by NISSAN
(e) Attendance at the Software Sector Work Discovery Day held at the Sunderland Software Centre – hosted by Sunderland Software City.

7 FINDING OF REVIEW

Findings relate to the main themes raised during the Panel's investigations and evidence gathering.

7.1 National Skills Agenda

7.1.1 In order to help understand the background to the development of skills in the UK, the Panel looked at the legislative and policy framework shaping skills policy nationally, regionally and locally.

4

7.1.2   In terms of the national agenda, numerous strategies, white papers and Acts of Parliament have been introduced aimed at ensuring the UK has a highly skilled workforce equipped to meet the challenges of global competition. These include the Leitch, Wolf and Richard reviews, the Further Education and Training Act 2007; Education and Skills Act 2008; Apprenticeships, Skills, Children and Learning Act 2009; and the Education Act 2011.

7.1.3   Since 2009, the Department for Business Innovation and Skills (BIS) has been responsible for national skills policy in England, while the Skills Funding Agency provides around £4bn funding each year for skills training for further education (FE). This funding supports over 1,000 colleges, private training organisations and employers.

7.1.4   A growing theme of the national agenda has been the perceived gap between the skills needed by employers as compared to the skills provided by the education, skills and employment system.

7.1.5   In recent years, national policy has increasingly focused on a number of key objectives to close this gap including:-

- o   Transferring funding for apprenticeships from training providers to employers;
- o   Ensuring that adult qualifications are fully relevant to the needs of industry;
- o   Developing the links between training targets and labour market needs;
- o   Forming industrial partnerships between groups of employers;
- o   Providing work experience as a central part of vocational training;
- o   Incentivising employers to invest in training institutions.

7.2   Regional Skills Agenda

7.2.1   As well as the national picture, there is also a regional element to the skills agenda; one that looks likely to grow during the next few years with the recent establishment of the North East Local Enterprise Partnership (NELEP) and the North East Combined Authority (NECA).

7.2.2   The North East LEP is a business led strategic vehicle responsible for promoting economic growth in the North East. The North East LEP is the fourth largest in the UK covering the local authority areas of Sunderland, County Durham, Gateshead, Newcastle, North Tyneside, Northumberland and South Tyneside.

7.2.3   The North East Combined Authority brings together the same local authorities and has been formed to promote jobs and growth focusing on strategic planning, inward investment, skills and transport.

7.2.4   The North East Local Enterprise Partnership (NELEP) has responsibility for providing tailored and integrated responses to skills and employment issues at regional level. The NELEP has recently published a Strategic Economic

Plan for the North East which aims to create 100,000 new jobs by 2024. The Plan looks to address a number of key weaknesses in the north east economy. These include closing the skills gap between the north east and other areas, tackling the comparative lack of private sector jobs and looking to secure better quality jobs to increase productivity.

7.2.5 Through the European Structural and Investment Fund, the North East LEP has been awarded an indicative allocation of £460m of European Regional Development Fund (ERDF) and European Social Fund (ESF) to support this work for the period 2014-2020.

7.3   Local Skills Agenda

7.3.1 The Sunderland Economic Masterplan sets out the direction for the city's local economy and identifies the key actions that public, private and voluntary sector partners need to take to ensure a prosperous and sustainable future.

7.3.2 One of the main themes running through the Masterplan is the need to tackle the prevalence of low skills in the city, improve the range of industries and careers opportunities and the number of well-paid jobs.

7.3.3 The Economic Masterplan refers to a number of key sectors which represent the main opportunities for growth for the city. These priority sectors are:-

- Software
- Creative Industries
- Advance Manufacturing/Low Carbon Vehicles

7.3.4 The remainder of the report will go on to look at the likely future demands for skills in the city and the measures being taken to secure their supply. In doing so the report will refer to the issues highlighted by our partners from the public and private and voluntary sector during our review.

7.4   Future Skills Demands

Global Economy

7.4.1 Given the complexity and speed of change in the global economy, it is can be extremely difficult to anticipate the future demand for skills. For example, how many people could have foreseen the rapid development of technologies such as computers and internet and the extent to which they have transformed the global economy. Indeed, during out discussions it was highlighted that around 65% of today's school children will eventually be employed in jobs that have yet to be created.

7.4.2 However, there are number of global, national and local trends that can help us to gauge the general direction of skill needs in the future.

6

7.4.3   Increasing global competition encourages and makes it easier for businesses to locate in the most competitive areas. Increasingly more straightforward low skills industries are being transferred to countries with lower wage costs.

7.4.4   It is forecast that demand will rise for those able to fill jobs in more highly skilled occupations. The major occupational groups expected to expand in the coming years are managers, professionals and technical. Among engineering high tech IT and science firms there is particular concern that there will be insufficient people to fill their high skilled jobs. Employers will increasingly want more high qualified people and fewer people with low or no qualifications.

7.4.5   Employers are looking for an ever widening skill set. In addition to numeracy and literacy they are looking for science, IT skills, creative and social skills. These skills are increasingly required in high value sectors which will be a key to rebalancing the economy.

7.4.6   Today's young people face increased competition from more experienced workers to access entry level positions. Traditionally lower skilled jobs have served as labour market entry points for many moving out of unemployment and their declining number emphasises the need for everyone to have a strong platform of basic skills on which to build.

7.4.7   The prevalence and rapidity of technological change is altering the way we live and work. The development of new technologies and the digital revolution will fundamentally affect the labour market. For example advanced robots are able to perform an increasing number of manual tasks and the workforce will be increasingly susceptible to automation. The skills of the local population must be able to adapt to new uses of technology and stay at the forefront of changing technological demands. There will also be the need to find new employment for people affected by technology which does away with jobs at the lower end of the skills spectrum.

7.4.8   A further challenge for most advanced western economies is the emergence of an older working population. An ageing population brings with it different capabilities within the local labour force that need to be integrated within the local economy. It also leads to requirements for new skills to meet the demands of older people for healthcare, social care and transport provision.

7.4.9   It is estimated that approximately 80% of the people who will be in the workforce in 2020 have already left compulsory education. If we are to meet the demands of the future we must also improve the skills of our existing workforce.

Local Factors

7.4.10   As well as the global and national development there are a number of factors more specific to Sunderland that will affect future skill demands in the city. These include the resurgence of some parts of the advanced manufacturing and engineering base and the expanding digital economy.

7

7.4.11 The Panel heard from Ian Fawdon who was undertaking a Local Response Fund Project into the training needs of the existing workforce. This had involved working closely with SMEs in the engineering and manufacturing industries. Ian noted that it was encouraging that most of the companies in the area do have long term strategic plans for growth.

7.4.12 The Sunderland economy has also seen some encouraging signs of growth in the performance of its knowledge-intensive industries and professional and managerial services. Skills shortages were being reports in areas as varied as welding, design skills, mechanical engineering marketing, project management and digital marketing.

7.4.13 During our review we met with representatives from a range of public and private sectors bodies in order to consider in more detail the potential growth areas of the local economy and the potential skill constraints.

Advanced Manufacturing and Engineering

7.4.15 As part of the review, the Panel attended an Advanced Manufacturing Work Discovery Sector Day held at Nissan Car Plant. The event was attended by representatives from Nissan and a number of manufacturing/engineering firms based in the city including Calsonic Kansai, Grundfos and Liebherr.

7.4.16 We heard that manufacturing remains a key sector within the Sunderland economy (17,700 jobs) despite declining trends nationally. Since 1998 Sunderland has seen employment in motor vehicle and transport equipment manufacturing rise to 7.2% of the city total, well above the regional (1.5%) and national (1.2%) equivalents. Of particularly significance is the presence of Nissan and its supply-chain activities.

7.4.17 Nissan is now the biggest UK car maker of all time. In 2013 it made over 500,000 cars for the second year running. Around 81% of its cars are exported to mainland Europe representing 1.4% of the UK's total exports abroad.

7.4.18 Nissan makes a major contribution to the city and the region. Since its inception, around £16bn has been invested in the Washington plant. About 7,000 people work in the Nissan factory and in all 21,000 jobs are supported in the northeast by way of the regional supply chain.

7.4.19 Nissan is also the market leader in Electric Vehicle technology with recent investment in the Sunderland plant to produce the all-electric Leaf and the battery plant.

7.4.20 However there are a number of other developments in the city that are increasing demand for manufacturing and engineering skills.

7.4.21 The City Deal builds on the success of Sunderland's car industry with an International Advanced Manufacturing Park to boost the local supply chain

8

and attract further investment. It is estimated that City Deal will bring in £295m of private sector investment in advanced manufacturing and create 8,000 jobs in Sunderland by 2051 through projects such as the new bridge crossing the Wear and the International Business Park.

7.4.22 The new International Business Park is located to the west of the A19 and crosses the border of Sunderland and South Tyneside. It will consist of a new International Advanced Manufacturing Park and have automotive, offshore and other high tech investments. The international advanced manufacturing park is due to be completed by 2027 creating 5,000 manufacturing jobs.

7.4.23 The city has also been allocated a £12m grant from the Regional Growth Fund to boost business growth around the city by improving transport links. This funding will improve transport infrastructure at all key points. It will also will include new infrastructure around Sunderland's Low Carbon Enterprise Zone and create links in busy areas to pave the way for expansion of its business sectors. These include new roads linking the location of the new bridge with the city centre and infrastructure at the Port of Sunderland to support more offshore and marine engineering activity

7.4.24 While welcoming these developments it is clear that they will create additional demands for skilled workers. All of the firms we spoke to told of particular shortages in technical skills such as welding, tool making, design skills and mechanical engineering. One of the most pressing problems are the implications of a relatively aging workforce; many of whom will be retiring at around the same time. Unless these employees and the skills they possess are replaced then this could result in a major brake on growth. There is also the need to continue to upskill the existing workforce in order to adapt to new processes and technical innovation. For example, Nissan's increasing use of robotics in the construction process has led to more emphasis on IT skills and programming with the resulting need for further training in these areas.

7.4.25 These concerns were repeated by Liebherr and Calsonic Kansai. Like Nissan, these firms are beginning to experience difficulties in attracting staff with the necessary skills. The firms also have an aging workforce with many employees and their skills needing to be replaced in the near future.

7.4.26 Manufacturing and engineering firms in Sunderland are also increasingly facing competition for skilled workers from other parts of the region as exemplified by the Hitachi factory at Newton Aycliffe. It was felt that this could intensify the skills shortages currently being experienced in the advanced manufacturing sector of the economy.

Software

7.4.27 During our review we met with David Dunn, Chief Executive Officer of Sunderland Software City on the challenges facing the software sector in the city.

7.4.28 We were told that the software sector was currently the fastest growing part of the knowledge based economy. It was felt that the potential existed for it to grow still further but that such growth was in danger of being constrained by a shortage of skills. This was a problem not just for Sunderland but for the north east and the country generally.

7.4.29 It is estimated that there are currently 140 companies operating in the city's software sector in Sunderland, employing around 850 employees and generating £29m in revenue. This represents around 10% of software companies operating in the region. Most are smaller companies and the number and size of these firms are growing.

7.4.30 While the software industry is currently a small sector in terms of turnover and employment there do exist real opportunities for growth. Furthermore software sector is an areas where nearly 75% of employment is highly skilled. The sector is therefore associated with relatively well paid jobs, good future job prospects and a rapidly expanding national and international market.

7.4.31 It was emphasised that the impact of the software sector cannot be looked at in isolation contributing as it does to the success of other sectors such as creative, media and manufacturing. In fact, the sector was perhaps best viewed as a form of virtual manufacturing.

7.4.32 During recent years, the city has continued to build upon its work developing physical infrastructure to support the development of technology, software and manufacturing, most notably the state of art facilities available at the Software Centre, Evolve at Rainton Bridge and Washington Managed Workspace.

7.4.33 The Sunderland Software Centre is a £12m state of the art building on the edge of the city centre. The three-storey centre offers space for more than 60 businesses and is purpose built for businesses in the technology field..

7.4.34 Washington Managed Workspace is a £6m investment funded by the Council and ERDF. It offers a mixture of managed offices and workspaces and is anticipated to create 200 new jobs and 25 new businesses.

7.4.35 The Evolve Business Centre is a state of the art e-commerce centre designed specifically to meet the needs of the area' technology based companies. The Centre is intended as a developing hub for knowledge based information and communication technology businesses.

7.4.36 However, the potential of such physical assets will only be fully maximised if the city can deliver staff with the necessary skills.

Health and Care

7.4.37 During our review, the Panel heard from Gemma Taylor of City Hospitals Sunderland about the skill shortages being faced by in the Health and Care

10

Sector. This sector is a major employer in the city and is likely to be a growing sector in the future.

7.4.38 Most of these shortages are in the fields of nursing and health care. New City Hospital is taking part in a National Pilot scheme which gives people the opportunity of spending 1 year as a nursing assistant then starting a course at Northumbria University. It was noted that it can take four years to train a nurse and therefore it was difficult to plug skills gaps in the short term. There is also an increasing need to train staff in the use of IT and digital services.

Creative

7.4.39 Creative Industries represents a diverse set of activities ranging from architecture, crafts, design, music, film, the performing arts, publishing, media, fashion and advertising.

7.4.40 It is estimated that there are approximately 640 companies in the creative industries sector employing around 2,500 people and with a turnover in the region of £136m. While still relatively small the sector has the potential for substantial future growth.

7.4.41 The City has an impressive set of cultural assets which include a history of glass making, the University with its range of Arts, Design and Media facilities (including the National Glass Centre) which have been recognised for its quality, along with new Innovative Creative businesses setting up in the City.

7.4.42 While the sector is still relatively small, the Panel referred to the growing vibrancy and potential of the cultural and creative sector, the contribution it can make to the attractiveness of the city as a place to live and work and its potential for future growth. It is considered important for the sector to look to increase business support with key partners such as the University, improve business skills for start-up and existing business and help with specialised training and advice.

7.4.43 The development of Keel Square should have a highly positive effect on the growth of the cultural and arts sector in the city. But once again this will only be fully exploited if the city has necessary skills base. In this regard, the University can have a major impact in helping to meet these demands.

Professional and Financial

7.4.44 Over the past fifteen years, Sunderland has also developed a growing specialism in financial and related business services, mainly through call centres, especially for life insurance and banking. Although these are not highly paid jobs, they call for skill and interpretation, and are rewarded accordingly.

7.4.45 However, the city has also begun to plan for the development of more high level financial and professional services. Central to this aim will be the establishment of a Central Business District on the Vaux site which should help to bring more high value financial and professional jobs to the city as well as other jobs in retail and the leisure sector. It is hoped that the new Central Business District could generate up to 4,000 jobs in a variety of sectors, increasing spending in the city centre and supporting the development for a broader urban economy. However, the development of the new central business district will be a term development that should reach full fruition over a 10-15 year period.

7.5 Future Skills Supply

General

7.5.1 During our review we heard about the range of sectors experiencing skills shortages within the city. As the next stage in our review, we went on to look at the measures being taken to meet these shortages both in the long and short term.

7.5.2 In doing so we heard from a range of organisations including schools, the University and the FE collage, local training providers and employers. During our discussions a number of general issues were highlighted:-

o There is a need to raise the skill levels of the whole city in order to satisfy the long term trend for a shift in demand for higher skills;
o We must improve transferable skills to maintain a flexible workforce;
o We must tackle the problem of young people and adults who are excluded from training and the jobs market through a lack of basic skills;
o We must increase the supply of intermediate and technical skills to overcome shortages and improve the supply of high level skills;
o We must increase the number and quality of apprenticeships within the city;
o The area continues to have a higher proportion of its workforce qualified to NVQ levels 2 and 3 than the national average. The area lags behind in the terms of the highest skills levels NVQ 3and 4;
o The most effective way of increasing the supply of highly skilled people will be through the retention of graduates;
o We need to improve maths and science achievements by 16 yrs olds and strengthen technology skills;
o Employers believe that it is important for children to start developing employability skills including self-discipline, team working and effective communication skills.

Employers

7.5.3 As we have previously mentioned, the role of employers in the development of skills is a key one.

7.5.4 For many years, employers have been critical of the role of schools and colleges in preparing young people for the world of work. For the business sector, the skills possessed by those leaving full time educations and training do not adequately meet their requirement and has therefore contributed to persistent skill shortages.

7.5.5 Many employers have been critical of the literacy and numeracy skills of young people entering employment. There is also concern at the lack of young people with so called STEM skills (Science, Technology Engineering and Maths).

7.5.6 While many employers regard qualifications and high standards of literacy and numeracy as essential they also strongly value certain attributes that they feel are sometimes lacking in job applicants. Such employability skills include skills in teamwork, problem solving, communication, time management and information technology as well as qualities such as self-confidence, creativity, flexibility and empathy.

7.5.7 During our review, employers also expressed concern at the low level of interest among women for jobs in growing sectors such as advanced manufacturing, engineering, IT and software. It was felt that more could be done to change the perception of these sectors in order to make them a more attractive career option for women.

7.5.8 We heard that there is a commitment that the local business community will enable every school and learning provider to establish a strong link with at least one employer. This will help bridge the gap between education and employment enrich the curriculum and provide positive role models. Employers are being encouraged to offer first-hand experience of the world of work, broaden the horizons of children and their families, and inspire learners to success.

7.5.9 One initiative designed to help the skills challenge is the Skills Academy for Sustainable Manufacturing and Innovation located next to Nissan which is a £9.8 million state of the art facility. It is the only one of its kind in Europe and is dedicated to training and development in the Low Carbon Vehicle sector.

7.5.10 We also heard that Nissan is trying to reach out to the community and create an environment to encourage engineering training. A school engineering event for 2,000 children is held every year in order to encourage young people to be more interested in a career in engineering and manufacturing.

7.5.11 During our review we heard that Nissan is continuing to look to develop links with schools and make schools, parents and pupils more aware of the opportunities available in engineering and advanced manufacturing. However, it is recognised that while Nissan have the resources and capability to work with schools, many smaller firms struggle to free up resources for such work.

7.5.12 David Dunn highlighted a number of initiatives taking place in the software sector to ensure that there are a sufficient number of skilled young people

13

entering the sector. The software businesses in the city have developed a close relationship with University of Sunderland and this relationship continues to develop. Software City also does a lot of work with schools aimed at boosting the image of the software sector and dispelling the myth that there are few opportunities in the software sector.

7.5.13 With regard to IT and software, it is felt that many people are not entering the sector because of lack of understanding of the opportunities and an awareness firms located in the area. It was felt that more could be done to publicise these firms and the range of jobs opportunities available.

7.5.14 A lot of work was currently going on to link firms with schools within the city. For example the Panel was invited to attend a Software Sector Work Discovery Day held at the Sunderland Software Centre. During the event secondary school children were given the opportunity to meet with local software firms operating in the area and learn more about the range of opportunities available.

Apprenticeships

7.5.15 Another area where employers play a key role in skills development is in the creation of apprenticeships.

7.5.16 As mentioned previously, apprenticeships can play a significant role in improving the city's skills base and are increasingly becoming the norm for those going into work via the vocational route.

7.5.17 An apprenticeship can be defined as a real job with training. As employees, apprentices earn a wage and work alongside experienced staff to gain job-specific skills. Most of the training is 'on the job' but usually includes off the job training to work towards a nationally recognised qualification, such as a National Vocational Qualification (NVQ) provided by a local college or by a specialist learning provider.

7.5.18 There are three age groups for apprenticeships; 16-18 yr olds, 19-24 yr olds and those aged 25+. Apprenticeships can take between one and four years to complete depending on the level of apprenticeship, the apprentices' ability and the industry sector.

7.5.19 All apprenticeships operate to a rigorous framework of requirements. All require a competent level of English and Maths, IT skills and technical certificate. Employers are involved in their development and they can be tailored to meet the specific needs of the business.

7.5.20 Based on the figures presented to us and our discussion with representatives of employers and providers, there is clearly a shortage of apprenticeship places available within the city.

7.5.21 We need to increase the overall number of apprenticeships, particularly the number of high level apprenticeships and ensure that apprenticeships are

particularly targeted at those areas of the local economy that suffer from skills shortages that is constraining economic growth. Apprenticeship recruitment tends to be higher among the city's larger employers, such as Nissan, Rolls Royce and Gentoo, whereas recruitment among small and medium sized businesses is much less prevalent.

7.5.22 For Nissan there remains a pressing need to increase the number of apprentices, together with the number of firms offering apprenticeship schemes. In 2009, 15% of companies had apprentices. In 2013 this had grown to 27%. So while there has been a significant increase there is still considerable room for improvement. Indeed, it is estimated that 29% of all engineering companies in the north east have done no training in the last 12 months.

7.5.23 There remains the question of whether the message is getting out to smaller employers about the potential benefits of apprenticeships and whether they are being made sufficiently aware of the incentives available. Many smaller employers are wary of apprenticeship scheme because of the perceived cost and bureaucracy involved. We need to make apprenticeship more accessible for smaller businesses.

7.5.24 There is also a belief that young people, parents/carers and schools are not receiving adequate information on apprenticeships and that more needed to be done to raise the awareness of the benefits of apprenticeships. We need to ensure that all schools offer informed and impartial guidance to young people and are fully aware of the value of apprenticeships.

Further Education Sector

7.5.25 The Panel heard from Iain Nixon Executive Director of Sunderland College about the contribution being made by the College to improving the skills of the city.

7.5.26 Based on exam results, Sunderland College is one of the most successful colleges in England and provides training in skills directly relevant to the city's economy, including retail and manufacturing.

7.5.27 The Panel heard that in last two years the college has been more outward facing. While always strong academically, a greater emphasis was now being placed on vocational and apprenticeship training. The College was looking to developing key growth sectors such as digital, IT, health, advanced manufacturing and work more closely with local employers. This included receiving input from employers on courses to make them more tailored to their needs and providing more specialist training. In the experience of the College, employers are increasingly looking for employees with the skill set to make an immediate contribution to their business.

7.5.28 We heard that the College is increasingly playing a central role in the provision of apprenticeships; work based training lifelong learning and upgrading adult skills. They are increasingly involved in the development of

15

industry designed short courses often involving shorter courses that meet employer needs.

Training Providers

7.5.29 The Panel heard from Denise Wilson from Springboard Sunderland, one of the largest training providers in the North East who work with unemployed people. She emphasised that in the future the nature of work make it essential to be literate, numerate, have good communications skills and the ability to adapt.

7.5.30 Overall it was felt that weaknesses in literacy and numeracy can be a huge barrier to getting a job. It was therefore important to ensure that a young person gets a job early and is able to find an entry point in the jobs market. It was important that the apprenticeship scheme was expanded and support provided to ensure that NEETS are able to gain entry to the job market.

7.5.31 Springboard are currently working with schools to raise aspirations. But it is also important to manage expectations and ensure that people are realistic about the jobs that they can access in the jobs market. While there will be less demand for unskilled jobs in future, some demand will still exist and it is important that young people aware that they may need to start at bottom of the ladder and work up.

Higher Education Sector

7.5.32 The Panel heard from David Donkin on the contribution being made by the University of Sunderland in developing out skills base of the city.

7.5.33 A great deal of work was going on to try to anticipate where jobs will be in the future and help to equip people with the necessary skills. This could only be done by widening the participation agenda and building on the existing strong links with schools.

7.5.34 It was recognised that many students were choosing courses that are not associated with strong job prospects. The University are keen to encourage more people to be looking to choose courses relating to computing, IT, science engineering and maths by making such courses attractive to young people through initiatives such as the Fab Lab; the first digital fabrication laboratory. His was an innovative project started by the Massachusetts Institute of Technology (MIT) in the States, which enables people to prototype and try out new product ideas. FabLabs are packed with 3D printers, CAD software, scanners, and CNC machines which allow entrepreneurs, small businesses, students and schools to experiment with new products, with the support and expertise to bring them to market.

7.5.35 It was felt that moving the influence for training to the hands of employers can have a potentially positive effect and it would be important for employers to develop links with Universities in activities ranging from sandwich years to other placements, internships. Indeed some employers are involved on a

more direct role in shaping the content of degree courses by partnering with universities

7.5.36 The University has a relatively high number of students who are from the local area and quite a few from disadvantaged backgrounds. They do a lot of work with schools to encourage aspiration and encourage young people to see the see benefits of going to University. The University is interested in going into the area of degree level apprenticeships which should help to promote vocational training within the city.

7.5.37 The economic impact of the University will obviously be greater if the city is able to retain a high proportion of its graduates. The University has 70% student retention rate in the area and the principal reason why students choose to leave is because of the conditions of the local labour market. In essence, the problem for Sunderland and the whole of the North East is that they often do not have enough high quality jobs for graduates who are thereby forced to move.

7.5.38 The University has undertaken a number of specific initiatives that are contributing to the development of the skills base of the city. These include Institute of Automotive and Manufacturing Advanced Practice, the Sunderland Media Centre, Knowledge Transfer Partnerships and the Graduate Internship Scheme.

7.5.39 The Panel also heard about the Hatchery Business Incubator which provides support for people who were interested in starting a business. The scheme allows students to set up mini projects and work with other students to support one another. The scheme was designed to develop useful and practical projects but also develop a person's employability skills and make them more attractive to potential employers. The Software Hatchery provides office space, facilities and mentoring to graduates and entrepreneurs with innovative software business ideas. It also provides the opportunity for networking with potential funders, developers and partners. While student start-up companies were currently small in numbers they did have the potential to grow particularly in terms of start-ups in the software and creative and cultural sectors of the economy.

Schools

7.5.40 The Panel heard from Simon Marshall, Head Teacher Highfield Community Primary School on the role of schools in developing skills within the city.

7.5.41 Over the past 10 years we have seen an increase in educational attainment figures in schools. However, employers still contend that our young people are lacking the necessary skills to be prepared for the work place. There are on-going concerns regarding the standards of literacy and numeracy and the low number of pupils following STEM subjects and new technology.

7.5.42 It was noted that in many ways our school curriculum is still close to an almost Victorian model with a few concessions to modernity such as IT and

17

technology. The focus is on a narrow set of subjects and it could be argued that a broader curriculum would better reflect the needs of job market.

7.5.43 Many schools are understandably reluctant to take risks given the emphasis on performance tables. However, this may be the time to look again at the system of league tables for schools and look at ways of seeing success as reflecting more than just qualification but also other factors such as employability skills and preparation for work. It was also suggested that it may be an appropriate time to approach Ofsted to include in their assessments consideration of the work going on in schools to prepare our young people for the world of work.

7.5.44 There was general agreement that the quality of careers advice provided in our schools was of major importance in helping guide young people towards occupations in growth sectors of the economy. We need to make sure that our young people receive high quality and impartial careers advice grounded in information about the local jobs market to allow them to make informed choices about their future careers.

7.5.45 There is a feeling that there is a lack of high quality careers advice in many schools. Young people need help to gain a better understanding of the varied routes open to them.

7.5.46 It was also important to acknowledge the influence that parents can have on their children's career choices. We therefore need to look to engage with parents in order to develop their knowledge of the labour market.

7.5.47 It was also suggested that schools should take the lead in working together to sharing of good practice careers advice.

Council Education and Skills Strategy

7.5.48 During our review, the Panel was consulted on the contents of the Council's emerging Education and Skills Strategy for the city. The Strategy has been developed by the Education Leadership Board which includes representatives from the private and public sectors.

7.5.49 The Education and Skills Strategy – 'Get Ready…', seeks to raise achievement throughout the education system and to close the gap in attainment between those suffering disadvantage and the rest of the population. This includes a major focus on science, technology, engineering and mathematics (the STEM subjects) and also the so called soft skills such as communication, team working and problem solving. The strategy recognises that while attainment has significantly improved in the city there are still too few Sunderland residents with higher level skills and too many without any qualifications and skills.

7.5.50 The emphasis is on ensuring that children, young people and adults can be prepared for different phases of their lives – in order that they are ready for school, ready for work and ready for life.

7.5.51 The Strategy considers that all families with young children in Sunderland will have access to high quality, inclusive and affordable early year's education and childcare. There is also a commitment that schools will reach out into communities, working closely with families, nurseries, childcare providers and other services to ensure that they are ready for every child and the transition into school is as smooth and as seamless as possible.

7.5.52 The Panel consider that the strategy can make a major contribution to the development skills in the skills base in the city. We support the emphasis on addressing issues at an early stage of a young person's development and also the impact of stressing flexibility and adaptability to meeting the needs of the changing jobs market.

8   CONCLUSION

8.1   The ability of Sunderland to increase its supply of highly skilled workers is driven primarily by the extent that the city and region is able to grow the overall size of its economy. It is important to encourage growth in all areas of the economy. We need the right quantity and quality of job. We need to increase economic growth generally and in a number of key growth areas in order to increase demand for high skills. It is not enough to prepare individuals for work; we must ensure that quality jobs are available.

8.2.   In order to respond to these challenges, the city needs to focus on both long standing sectors of the economy such as automotive, manufacturing and contact centres while supporting new and emerging sectors such as software and IT and creative and media.

8.3   We have had an improvement in skills but much still needs to be done. In future global demographics and technological change will demand a greater skilled workforce. We need to tackle the number of adults with low numeracy and literacy skills, invest in more intermediate skills and increase the number of adults holding degrees. Within this economic environment is it is essential that the workforce is able to constantly refresh their skills.

8.4   The city needs to encourage the development of its skills base through high quality schools, good career opportunities and career advice and vocational routeways to employment such as apprenticeships and graduate internships. We need to recognise the importance of increasing youth apprenticeships. While there has been an overall growth in apprenticeships and the number taking up opportunities, it is important that we increase the number of apprenticeships in the Advanced and Higher categories and also 16-18 age range. It is vital that apprenticeships reflect the needs of the economy and target areas of economic growth, such as manufacturing and new technologies.

8.5   With an aging workforce, it is important that we work with schools, colleges and the University to promote the lifelong development of skills and replacement skills for those that are lost through retirement. It is important to ensure as far as possible that the people of Sunderland are in a position to benefit most from the jobs created in the city.

8.6   We need to look to find a compromise between two conflicting aims: training people to work in a specific occupation, and ensuring that individuals' training is broad enough so that their occupational choices are not limited.

8.7   It was also important that the work going on between business, schools and the Council is joined up and coordinated and that the key people are talking to each other. We need to ensure that information sent to schools was disseminated as broadly as possible – to heads, governors and teachers to ensure that the message is being heard.

8.8   The University and Sunderland College has an important role in the future of the local economy. They have a central role in promoting skills, innovation, research and development and providing high quality training in the city.

8.9   We need to capitalise on regional structure framework such as the North East Local Enterprise Partnership (NELEP) and the North East Combined Authority (NECA) and the prospect of greater regional influence over skills policy in the future.

8.10   We need to raise the profile of vocational education and ensure that it is held in the same esteem as academic based qualifications. We need more apprenticeships and of better quality. We must work with employers to encourage the take up of apprenticeship particularly among the SME's. It is important that we celebrate the success of firms, large and small, operating in the city and continue to work to publicise the importance of firms such as Nissan to the national economy.

8.11   Improving skills can help to break the cycle of deprivation and help people to gain employment and move out of poverty. Those most at risk of the changes to the global economy are the long term unemployed, those with low qualifications and those with disabilities and health problems. We must make sure that they are not left behind. There is the danger that the future will create social and economic divides with the workforce polarising between those in relatively well paid secure jobs and those in lower paid lower skill jobs. Too many jobs being created are insecure and temporary with poor access to training and low rates of pay. What we need is more highly skilled and well-paid jobs with long term prospects.

21

9   RECOMMENDATIONS

9.1   The Panel's recommendations are as outlined below:-

(a)   Look at measures to improve the engagement of local businesses, the health and care sector and other public employers in primary and secondary schools, such as the work currently being delivered through the Economic Leadership Board's Work Discovery Sunderland programme.

(b)   that the Council and its partners continue to work to raise the profile of firms operating in growth areas such as advanced manufacturing and software sectors;

(c)   that the Council and its partners look at ways of raising the profile of apprenticeships and vocational training for example through highlighting local successes stories;

(d)   that further work be undertaken to look at measures to increase the interest of girls and young people in areas such as advanced engineering, software and information technology.

PUBLIC HEALTH, WELLNESS AND CULTURE SCRUTINY PANEL

POLICY REVIEW 2014/15

STRATEGIES FOR THE PREVENTION OF SUICIDE

FINAL REPORT

Contents **Page**

1

Foreword

Every suicide is both an individual tragedy and a loss to society. Each one affects a number of people directly and indirectly and can have a devastating effect emotionally, spiritually and economically. Suicides are not inevitable. There are many ways in which services, communities, individuals and society as a whole can help to prevent suicides.

The number of people who take their own lives in England had been reducing in recent years; however, more recently numbers have started to rise.

In 2011 4531 people were registered as taking their own lives – that is approximately one death by suicide every 2 hours.

Through this review we hope to refresh the overview of what is known about suicide, including factors that impact on levels of suicide, identification of those who may be at higher risk and the evidence for effective prevention.

In September 2012 the national suicide prevention strategy was published. This report reflects the content of the strategy and provides an update on the focus of the local response and achievements since publication.

The number of suicides is very small compared to smoking or obesity but deaths by suicide show up the ultimate loss of hope, the ultimate loss of meaning of purpose. They may be small numbers, but they have a very big ripple impact and they may be an indicator of what is happening further down through the health support services.

The Panel wishes to extend its thanks to all the witnesses who gave up their time to attend and gave interesting insights into the work they and their colleagues do and the challenges they face.

Councillor George Howe
Lead Scrutiny Member

2.   Introduction

2.1   Suicide is preventable and partners have a role in ensuring that preventing suicide becomes everyone's business. The economic cost to England was measured as £1,450,000 per case in 2009 to the Local Authority, Police, Third Sector, Coroner and NHS. In the North East there were 238 cases of suicide and injury undetermined in 2009 which totals £345,100,000.

2.2   In response, suicide prevention policy is experiencing great change. Since the publication of a national strategy to prevent suicide in September 2012[1] the government has called for a fundamental overhaul of how public services tackle suicide prevention.

2.3   Local action, in the context of this national coordination, is essential to suicide prevention. This report assesses the local response to the national strategy and the help that is available in the local area to focus on the most effective things that can be done to reduce suicides.

3.   Aim of Review

3.1   To review strategies for local suicide prevention.

4.   Terms of Reference

4.1   The Panel set out to :

1. Examine and help identify the main determinants of suicide in Sunderland
2. Review the adequacy of suicide prevention services
3. Assess whether existing sources of data on suicide are sufficient
4. Look at how the various statutory and voluntary agencies should work together to implement the suicide strategy.

5.   Membership of the Panel

Lead Scrutiny Member, Cllr George Howe
Cllrs Louise Farthing, Fiona Miller, Julia Jackson, Rebecca Atkinson, David Errington, Richard Bell, John Cummings and Shirley Leadbitter.

6.   Method of Investigation

6.1   The Scrutiny Panel met monthly to take evidence from officers within the council and support organisations in the community. They also considered information contained in national legislation, regulations, guidance and research. The Panel funded their own session of A Life Worth Living training which was held on 6 November 2014 and invitations were extended to other scrutiny members as well as frontline workers.

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[1] September 2012, a cross Government National Strategy *"Preventing Suicide in England*

3

7.   Findings of Review

Suicide Rates in Sunderland

7.1   The North East has the highest age standardised death rates from suicide and injuries of undetermined intent in both males and females aged 15 and over. The rates for males (20.4 per 100,000) are significantly higher than the England average (16.4 per 100,000).

7.2   In Sunderland, in terms of actual numbers, deaths from suicide/self-harm have gone up from 17 in 2007 to 32 in 2012. (The most up-to-date data published during the work of the Panel is attached at Appendix 1 and shows a decrease for the year 2013).

	2009	2010	2011	2012
M	15	27	23	25
F	2	9	6	7
All	17	36	29	32

7.3   The numbers are very small compared to smoking or obesity but any death by suicide shows up the ultimate loss of hope, the ultimate loss of meaning of purpose. Every death by suicide is both an individual tragedy and a loss to society. Every suicide can have a devastating effect. They may be small numbers, but they have a very big ripple impact. Suicides are not inevitable. There are many ways in which services, communities, individuals and society as a whole can help to prevent suicides.

7.4   A government report in 1999 set a target of a 20% reduction in the all age suicide mortality rate between 1996 and 2010. Both Gateshead and South Tyneside exceeded the reduction in 2007. Sunderland did not meet the 2010 target. It is also useful to consider the health inequality gap. Only in Sunderland has the health inequality gap widened. The Sunderland rate was 10% higher than the England rate in 1996 but is now 16% higher.

Local Prevention Strategy

7.5   The national strategy provides a framework which can be used by local public health teams to implement a local suicide prevention action plan.

7.6   Within Sunderland, the public health team facilitated the development of a suicide prevention action plan which is overseen by a multi-agency suicide prevention group, chaired by a voluntary sector organisation.

7.7   From a wider health strategic perspective, the health and wellbeing board is responsible the strategy which sets out how the health needs of the local population will be met.   The strategy, informed by a Joint Strategic Needs

4

Assessment (JSNA) determines the needs of the local population including for those at risk of self-harm and suicide. The Panel was informed that a suicide needs assessment is currently being undertaken for Northumberland Tyne & Wear which will help to provide more detailed information for focused prevention strategy and wider health strategy.

7.8   The national strategy provides examples of possible interventions, many of which are in place in the city.

- Suicide prevention training for front line staff within key public services
- A&E treating individuals following an attempted suicide or act of self-harm provide a psychological assessment and follow up care
- Signs displaying contact details for Samaritans are displayed at hotspots.

7.9   Despite these local activities, with no mandatory requirement for local authorities to deliver suicide prevention and with a heavy reliance upon the voluntary sector, the Panel is concerned that there is a very real risk that suicide prevention is not high on the agenda.

7.10 There is no formal mechanism by which a local suicide prevention group would report directly to a health and wellbeing board. The director of public health may do this on behalf of the group but the Panel felt the existence of a local champion may be the determining factor in how much focus is given to suicide prevention.

7.11 While there is a connection between the suicide prevention group and the safeguarding board, it is important that the local suicide prevention group has links with decision-making bodies – specifically, the health and wellbeing board.

7.12 There is a danger that the suicide prevention group will not be able to ensure suicide prevention is a priority on the agenda and services are commissioned, which undermines their value. Also, the health and wellbeing boards will not have access to vital information to inform future strategies.

7.13 The Panel noted that focused leadership at political level would support the championing of suicide prevention as a priority, with strategic leadership and community-based solutions to drive forward the prevention plans. This lead champion role could include taking a lead role in the suicide prevention group, acting as the link between the group and other bodies within the wider health remit.

Factors relevant to suicide

7.14 The Panel heard that there are a wide range of factors that impact on a local suicide rate. The most obvious of these being the relative level of deprivation. A higher than average rate is not necessarily a reflection on the quality of mental health services or suicide prevention initiatives. Rather it may be a

5

consequence of wider issues such as higher levels of unemployment or deprivation or related to specific demographic factors

7.15 The link between suicide and difficult economic circumstances is well established. Recession has been shown to be accompanied by an increase in suicide rates with unemployed men being most at risk. A Samaritans research report published in 2012 emphasised that men in lower socio-economic position in their mid-years are particularly vulnerable to death by suicide.

7.16 The Panel was informed that men are at greater risk for a number of reasons. Many of the clinical and social risk factors for suicide are more common in men. Cultural expectations that men will be decisive and strong can make them more vulnerable to psychological factors associated with suicide. Men are more likely to be reluctant to seek help from friends and services. Linked with this, providing services appropriate for men requires a move away from traditional health settings. Men are also more likely than women to choose more dangerous methods of self-harm, meaning that a suicide attempt is more likely to result in death.

7.17 Locally, other risk factors include:

- Barriers to accessing health care (81% of people are registered with a GP. 45% have had mental health episodes, 11% were in contact with mental health care in one week). 79% of people who had attempted suicide had a known mental health condition and 25% had significant drug and alcohol problems.

- Access to the means to complete suicide - two thirds of suicides in Sunderland were by hanging (61% hanging, 14% poisoning, 9% substance overdose, 7% drowning, 7% jumping from a height.)[2]

- Conflict in people's lives – stress, discrimination, trauma, abuse

- Relationships - people living alone or people with relationship issues were in high risk categories. One third of people in Sunderland reported stress-related problems.

- Individual risk factors included people with previous suicide attempts (22% in Sunderland have a history of self–harm). Working with schools to identify risk factors such as family break ups and exams is important. Men were identified a high risk, with 35-55 year olds being the largest at risk group currently. Chronic pain is also a factor (9% of cases) and a new service for psychological wellbeing supports those in need.

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[2] Data from September 2014 Audit

Case Study - Monkwearmouth Bridge

Monkwearmouth Bridge attracts more people in distress than the Alexandra Bridge and, although both have been used, the Wearmouth Bridge has been a particular hot spot in the city.

Police were called to the Bridge 222 times in three years between 2010–2013 in response to reports of people being sighted and threatening to jump. In total, there were seven deaths as a result of those incidents. The police, expert negotiators, paramedics, fire brigade, and Sunderland RNLI are often called to the scene. Samaritans signs with helpline numbers are in place on the Bridge in a bid to prevent the numbers increasing.

7.18 Public Health England will soon be publishing a guidance document for local areas on the prevention of suicides in public places (including hotspots) which will provide information on the practical steps local areas can take to reduce risks. In the meantime, a new Bridge for Sunderland is at project planning stage and the Panel expressed a view that risk factors with a specific focus on suicide prevention should be considered with appropriate safety measures incorporated at the design stage.

7.19 The Panel was informed that incidents of self-harm have increased significantly in Sunderland. We know that across the country a record number of youngsters are being admitted to hospital for self-harm, eating disorders, depression and other psychological disorders. Emergency admissions for psychiatric conditions soared to 17,278 last year, double the number four years ago. There were 15,668 admissions of young women aged 15 to 19 for cutting, burning or harming themselves, compared with 9,255 admissions in 2004. A total of 2,965 children were treated on wards for anorexia and other eating disorders, a 12% jump in one year and double the number treated a decade ago.

7.20 Experts say that exam stress, social media, bullying and the pressure to look slim and attractive are combining to make children's lives unmanageable. At the same time, the Panel heard that mental health services for children and young people in England need a "complete overhaul".

7.21 The evidence follows a review of services by a government taskforce which has found that too many young people are not getting the help they need[3].

7.22 The report recommends a five-year plan to improve services. To tackle the problems, the report is recommending a host of measures. These include:

- A comprehensive set of waiting-time targets for services
- The launch of a hard-hitting anti-stigma campaign
- One-stop shop services in the community to direct young people to places that can help

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[3] Children and Young People's Mental Health and Wellbeing Taskforce published 17 March 2015

7

- Continued support throughout teenage years and into the early 20s to avoid the "cliff-edge of lost support" at 18
- Greater use of online tools and apps to encourage self-help
- Improved care as close to home as possible for children and young people in crisis
- Extra training for GPs and other who work with children, such as staff in schools

7.23 The Panel welcomes this national recognition of the need to make dramatic improvements in mental health services. Nowhere is that more necessary than in support for children, young people and their families. Need is rising while the services aren't necessarily keeping up.

7.24 Around half the people who die from suicide have a history of self-harm therefore increased community awareness and understanding of self–harm whilst breaking down the taboo and stigma associated with self-harm/self-injury is vital.

7.25 People with a history of self-harm are identified within the suicide prevention strategy for England. While there is no obligation for local plans to include self-harm, the Panel felt that the local plan should include measures to address self-harm prevention.

7.26 The comprehensive collection of suicide data through meaningful research is generally considered to be the foundation for the development of an effective suicide prevention plan. The Panel was informed that annual research is carried out by the Public Health Locality team to identify patterns and trends via the Senior Coroner who permits controlled and confidential access to records on request by appropriate individuals on an anonymised basis. The research has identified some trends in risk factors relating to depression, self-harm and alcohol.

7.27 The Public Health team will prioritise the use of their finite resources based on public health issues that can be identified from this local research and from the risk factors identified locally.

7.28 The Panel commented that it is of course vital to consider not just whether the data is collected but also how it is used with data being used to inform where and how resources and interventions should be targeted and to support good local action planning.

Effective Support and Intervention

7.29 We took evidence from those in contact with people with suicidal thoughts to see what interventions make the most impact.

7.30 The partners who work with people accessing services all reported the numbers of referrals increased. Exploration of suicidal thoughts with support workers can help and individual to access the appropriate support. This support varies from accessing debt advice, making GP appointments,

8

providing helpline and crisis support numbers, contacting the Initial Response Team (IRT) and on occasion contacting the emergency services.

7.31 Sunderland Samaritans are incredibly proud to have served the people of Sunderland for over 40 years. They opened in 1970 and their service is needed as much today in 2014 as it was then - every year, they take nearly 10,000 calls from people going through tough times.

7.32 The service aims to alleviate emotional distress and reduce the incidence of suicidal feelings and behaviour. It is run by volunteers and leadership is provided from the national Samaritans.

	2012-2013	2013-2014
Numbers of calls	9344	10854
Calls where suicide was discussed	937	1045
Calls where suicide was In progress	37	318

"Speaking to Samaritans gave me the reassurance I needed that everything would be ok."
Charlie

"The volunteer I spoke to was very kind, and within five minutes I felt completely comfortable. He let me talk and never once tried to tell me what to do."
Dawn

7.33 Washington Mind has seen the number of referrals (people accessing our services) increase. They confirmed this is likely to have a connection to economic circumstances affecting people's state of mind.

7.34 The numbers in the table below show the number of users of the LIFE Suicide Prevention Model. The numbers identify individuals who have raised concern about suicidal thinking and planning.

	Total referrals	Counselling – Use of LIFE	Face to face Support – Use of LIFE	Telephone Support Use of LIFE	Training Support Use of LIFE
April 12 - March 13	848	511	6	47	4

7.35   From the data the Panel can clearly see the demand for volunteer-led services just in just one year.

7.36   In addition to the work of the voluntary sector, the Panel recognised the role of employers and businesses in providing in-house support for employees who may be demonstrating signs of mental health problems. The Panel noted this could be achieved at an operational level with the introduction of initiatives such as Mental Health First Aiders.

Partnership working

7.37   The focus of our evidence gathering has been within the local authority as the public health lead agency but it was clearly evident from all evidence that suicide prevention strategies must have a multi-agency approach.

7.38   We were informed that public health brought together key service providers to formulate an action plan to improve a range of services which can identify and support people at risk of attempting suicide at the earliest stage.

7.39   The multi-agency group, formed in 2013, leads on the operational implementation of the local suicide prevention action plan and leads on the A Life Worth Living Campaign. The group is chaired by a voluntary sector organisation with the intention of taking a community approach. The remit of the group is to develop and implement a local action plan which supports the national aspiration goals. A three year action plan for Sunderland has been completed for 2014/15 to 2016/17.

7.40   The group reports to the New Horizons Partnership[4] which in turn, reports into the Sunderland Safeguarding Board.[5] These all have the ambition of keeping adults, particularly those who are more vulnerable, safe from the risk of abuse, harm or exploitation.

7.41   The development of the next 3 years action plan has been underpinned by a public health model of suicide prevention adopting a population based approach. This approach attempts to reduce the risk in the whole population by changing attitudes, knowledge, behaviours and norms that might predispose people to suicide.

7.42   The group identified the need for individual and multi-agency approaches including the need for those on the frontline of service delivery such as housing officers, transport staff, police, employment services and the voluntary sector to be involved as being 'fundamental' to the implementation of the strategy.

7.43   Although preventing suicide is a complex challenge, it was clear that partners are committed in having a coordinated community approach across multiple

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[4] The New Horizons Partnership oversees implementation of the Sunderland Emotional Health and Wellbeing (EHW) Action Plan and also receives progress on the Suicide Prevention Action Plan
[5] A multi-agency partnership made up of a wide range of statutory, independent and voluntary agencies and organisations.

10

organisations and acknowledge that this is fundamental to making a difference.

7.44 A Third Sector organisation (Washington Mind) was commissioned by the Public Health Team to design a local campaign and deliver training under the campaign brand, 'A Life Worth Living' (ALWL). The programme aims to train people who are best placed in the heart of communities to offer support and information to people who are experiencing suicidal thoughts.

CASE STUDY - A Life Worth Living

A community focused training programme which aims to train people who are best placed in the heart of communities to offer support and information to people who are experiencing suicidal thoughts.

It supports local people to identify 'a life worth living' and equip local workers and volunteers with the confidence, skills and knowledge they need to offer support and information to a potentially suicidal person and provide them with the knowledge to signpost to local services and access the relevant pathway of support; to reduce suicides.

The training places an emphasis upon how attitudes to suicide across societies can hinder suicide prevention and how by taking moral judgements out of the equation we can have open and honest conversations with a person who is contemplating taking their life as a realistic option to ending their pain.

"Attending the training has enabled me to be more open about the subject of suicide. I feel I can now support my customers through periods of change in their life"

"The training highlighted for me the importance of asking a difficult question and the need to talk about suicidal thoughts."

"The training proved beneficial to me to have the information and resources to actually make a difference."

"The training offered a valuable insight to helping those in real need."

11

7.45 At the time of the review, funding for the training had been renewed for a further 18 months with the likelihood that this would become part of the Health Champions Training, which is a positive development.

7.46 The Panel commissioned its own training session and the councillors who took part commented that it was a valuable session for all community leaders and recommended that all councillors make the time to take the training. A request has been made during the review for the ALWL Suicide Prevention Training to be incorporated into the member's development training programme so that all councillors have the opportunity to take part.

The Role of the Senior Coroner

7.47 If a Senior Coroner has reason to suspect a suicide in England and Wales there is always a public hearing - the Inquest. At the end of an Inquest hearing a Senior Coroner can give a number of conclusions, including death due to suicide, unlawful killing, drug related, alcohol related. To record a conclusion of suicide the Senior Coroner must be satisfied beyond reasonable doubt so as to be sure that the deceased has taken their own life and intended to do so. The Senior Coroner may record an open conclusion to reflect that there is insufficient evidence to support any other conclusion available.

7.48 The Panel was informed that people bereaved by suicide may see the inquest as an important opportunity to find out what happened to their friend or relative and to publicly state their version of events. This may be their one opportunity to ask questions about how a relative died.

7.49 The Senior Coroner in Sunderland investigates approximately 2,000 deaths per annum. Types of death that are investigated are those of unnatural cause, cause unknown, violent deaths, deaths in State Detention. The Coroner does not have to have a role in suicide prevention but has expressed views where this is relevant (the coroner is part of the regional public health suicide prevention group).

7.50 The Senior Coroner's office confirmed at present there is a tendency for more mature males with debt related issues to be amongst the suicide numbers. The Senior Coroner's cooperation is not well practised across the country and is a useful approach to add to the research material in Sunderland.

7.51 The Coroner has the power to issue a Regulation 28 – Report to Prevent Future Deaths. This is where the Coroner believes that future deaths may be avoided if preventative action is taken. Chief Coroner's Guidance No. 5 refers https://www.judiciary.gov.uk/wp-content/uploads/JCO/Documents/coroners/guidance/guidance-no5-reports-to-prevent-future-deaths.pdf

CASE STUDY – Regulation 28 report

Mr PG was a 51 year old male. The conclusion of an inquest was that he killed himself. The circumstances leading to the event were set out in a report to the Secretary of State for Health. Mr PG experienced multiple presentations to a number of professionals and agencies within a 72 hour period and had three mental health assessments, all of which placed him at low risk. Matters of concern reported under Regulation 28 on this case included: there appeared to be no mechanism to break the cycle of referrals and take him to a safe place for more detailed assessment; there were limitations upon the GP in being able to make a referral which would have required a further visit to the mental health team rather than the GP being able to make an admission to a place of safety, even if only for a limited period.

7.52   The Regulation 28 Report is a 'lessons learned' system - it can safeguard against future problems and can be the trigger for a review. The implications would be more serious however if a further similar death occurred and there had been no response to the Coroner's report. The Panel would recommend that these reports are also assessed in the local public health research.
https://www.judiciary.gov.uk/related-offices-and-bodies/office-chief-coroner/pfd-reports/

8.   Conclusion

8.1   In this report, we set out the context of suicide prevention nationally and actions in relation to the local preventative activity.

8.2   Recent Parliamentary research considers that there are three main elements that are essential to the successful local implementation of the national suicide strategy:

- Carrying out a "suicide audit" which involves the collection of data about suicides that have occurred locally from sources such as coroners and health records in order to build an understanding of local factors such as high risk demographic groups.
- The development of a suicide prevention action plan setting out the specific actions that will be taken based on the national strategy and the local data, to reduce suicide risk in the local community.
- The establishment of a multi-agency suicide prevention group involving all key statutory agencies and voluntary organisations whose support is required to effectively implement the plan throughout the local community.[6]

8.3   It also highlights how public health staff must ensure that services are joined up to respond to particular issues:

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[6]

The All-Party Parliamentary Group (APPG) on Suicide and Self-Harm Prevention Inquiry into the State of Local Suicide Prevention Plans in England, January 2015

13

- Recession – knowledge of the options for those at risk of suicide because of economic difficulties, from debt counselling to psychological therapy.
- Self-harm – ensure there are supports for young people in crisis who are at risk of self-harm.
- Men – ensure information about depression and services is available in "male" settings.

8.4 The Panel was thankful for the commitment of those dedicated individuals in the community who work with those most at risk. However, local suicide prevention is fragile; often relying upon the commitment of dedicated individuals.

8.5 The Panel would conclude that local suicide prevention depends upon several inter-connected factors including leadership and local champions, suicide prevention being treated as a priority, availability of resources and the sustainability and commitment of a suicide prevention group.

9. Recommendations

9.1 The Panel's recommendations to the Cabinet are outlined below:

1. The Health and Wellbeing Board should receive a report annually from either the director of public health (representing a suicide prevention group) or a representative of the group on delivery of the suicide prevention action plan.

2. There should be evidence that a Suicide Needs Assessment has informed a suicide prevention action plan in the city.

3. There should be evidence that the Suicide Prevention Action Plan is informed by the most relevant up-to-date intelligence specifically in relation to:
   - Measures to address self-harm prevention
   - Lessons learned from suicides in Sunderland

4. Appoint a Councillor Champion who would have the role of: facilitating communication between the suicide prevention group and other groups and bodies including the health and well-being board; facilitating regular communication about the work of the suicide prevention.

10. Acknowledgements

The Panel is grateful to all those who have presented evidence during the course of our review. We would like to place on record our appreciation, in particular of the willingness and co-operation we have received from the below named:-

(a) Gillian Gibson, Public Health Consultant
(b) Jackie Nixon, Promoting Health Engagement Lead, Public Health Team

14

(c) Karen Lounton, Bereavement & Registration Services Manager
(d) Brian Patterson, Director, Sunderland Samaritans
(e) Ellen Rowley, Chair, Sunderland Samaritans
(f) Jacqui Reeves, Services Manager, Washington MIND
(g) Kathy McKenna, LIFE Coordinator, Washington MIND

11. Background Papers

11.1 The following background papers were consulted or referred to in the preparation of this report:

(a) Preventing Suicide in England – A cross-government outcomes strategy to save lives' September 2012
(b) Sunderland Suicide Prevention Action Plan
(c) All-Party Parliamentary Group on Suicide and Self-Harm Prevention Inquiry into the State of Local Suicide Prevention Plans in England, January 2015
(d) Office for National Statistics: Suicides in the UK

12. Appendix 1 Trends in mortality rate due to suicide and injury of undetermined intent

Trends in mortality rate due to suicide and injury of undetermined intent, from Public Health Outcomes Framework tool

4.10 - Suicide rate (Male)   Sunderland

Directly standardised rate - per 100,000
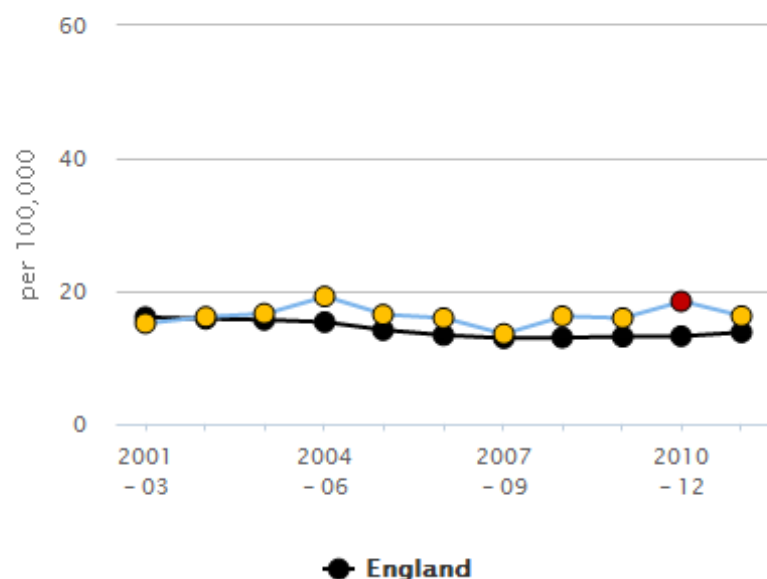
● England

Period	Sig	Count	Value	Lower CI	Upper CI	North East	England
2001 - 03	●	64	15.2	11.7	19.5	18.7	16.1
2002 - 04	●	64	16.2	12.3	20.8	19.3	15.9
2003 - 05	●	65	16.7	12.8	21.4	19.1	15.7
2004 - 06	●	77	19.2	15.1	24.1	18.2	15.4
2005 - 07	●	69	16.5	12.8	20.9	16.0	14.2
2006 - 08	●	68	16.0	12.4	20.3	15.2	13.4
2007 - 09	●	57	13.6	10.3	17.6	14.8	13.0
2008 - 10	●	66	16.3	12.6	20.7	14.7	13.1
2009 - 11	●	65	16.0	12.3	20.4	15.7	13.2
2010 - 12	●	75	18.5	14.5	23.2	15.8	13.3
2011 - 13	●	66	16.3	12.6	20.8	17.3	13.8

Source: Public Health England (based on ONS source data)

4.10 - Suicide rate (Female)   Sunderland

Directly standardised rate - per 100,000
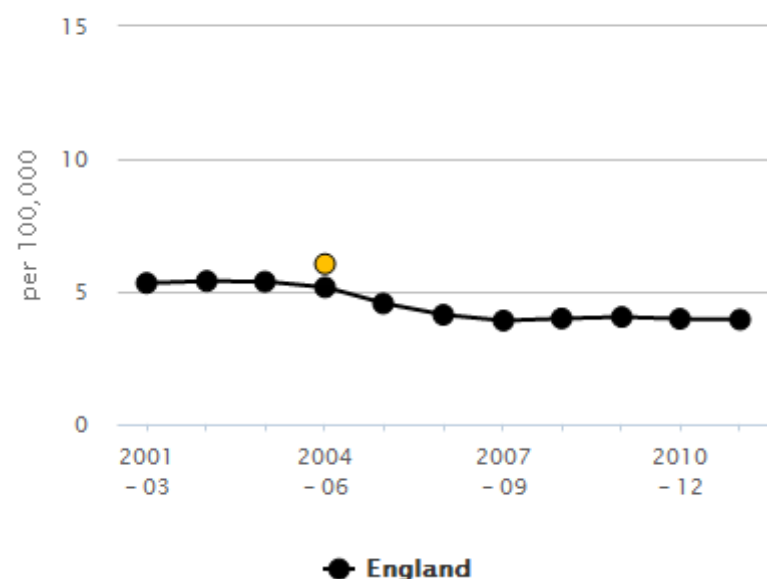
● England

Period	Sig	Count	Value	Lower CI	Upper CI	North East	England
2001 - 03		15	*	-	-	4.7	5.3
2002 - 04		22	*	-	-	5.4	5.4
2003 - 05		23	*	-	-	5.8	5.4
2004 - 06	●	25	6.1	3.9	9.0	5.8	5.2
2005 - 07		16	*	-	-	4.6	4.6
2006 - 08		12	*	-	-	4.1	4.1
2007 - 09		9	*	-	-	3.6	3.9
2008 - 10		15	*	-	-	4.0	4.0
2009 - 11		17	*	-	-	4.1	4.1
2010 - 12		22	*	-	-	4.2	4.0
2011 - 13		19	*	-	-	4.2	4.0

Source: Public Health England (based on ONS source data)

4.10 - Suicide rate (Persons) Sunderland

Directly standardised rate - per 100,000

Period	Sig	Count	Value	Lower CI	Upper CI	North East	England
2001 - 03	⬤	79	9.2	7.3	11.5	11.3	10.5
2002 - 04	⬤	86	10.4	8.3	12.8	12.0	10.5
2003 - 05	⬤	88	10.8	8.6	13.3	12.0	10.4
2004 - 06	⬤	102	12.4	10.1	15.0	11.6	10.1
2005 - 07	⬤	85	10.1	8.1	12.5	10.0	9.2
2006 - 08	⬤	80	9.4	7.4	11.7	9.4	8.6
2007 - 09	⬤	66	7.8	6.0	9.9	9.0	8.3
2008 - 10	⬤	81	9.7	7.7	12.1	9.2	8.4
2009 - 11	⬤	82	9.8	7.8	12.2	9.7	8.5
2010 - 12	⬤	97	11.7	9.5	14.3	9.8	8.5
2011 - 13	⬤	85	10.2	8.1	12.6	10.6	8.8
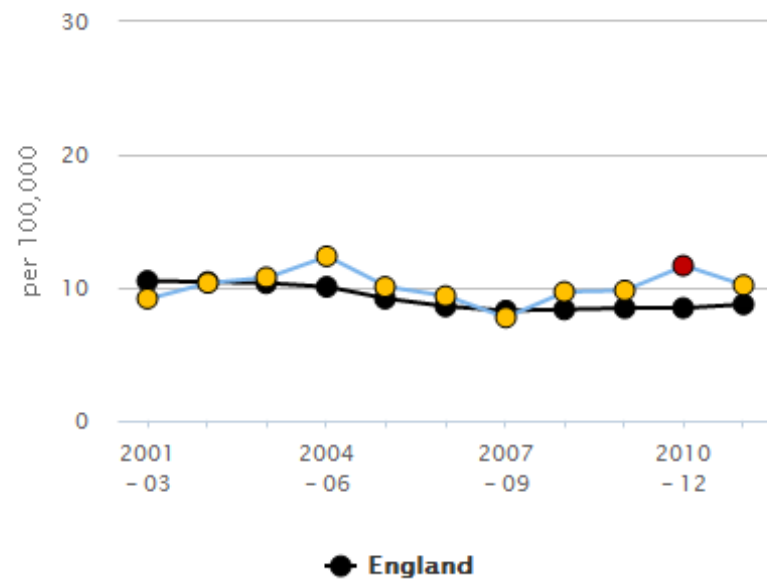
Source: Public Health England (based on ONS source data)

Outputs from: Public Health England, Public Health Outcomes Framework tool at www.phoutcomes.info

PUBLIC HEALTH, WELLNESS AND CULTURE SCRUTINY PANEL

POLICY REVIEW 2014/15

TACKLING NEW PSYCHOACTIVE SUBSTANCES

FINAL REPORT

Contents   **Page**

1

Foreword

In the last few years there has been nothing short of a revolution in the public health risks presented by new and unpredictable drugs. These so-called 'legal' highs present a challenge that cannot be ignored.

These drugs are designed to evade drugs laws, are widely available, have the potential to pose serious risks to public health and can even be fatal. Practitioners on the front line have witnessed first-hand the devastation these substances can do to individuals and their families. The harms are very often caused by ignorance of the effects of these untested drugs.

The Scrutiny Panel's evidence gathering aimed to gain a perspective on the challenges of the recent increase in NPS use in the Sunderland.   Witnesses identified key issues and challenges and discussed new and innovative ideas for greater collaborative working. We recognised that our current approach has real strengths but there is no doubt that more action is needed on a number of fronts. We need to continue to join forces to tackle what has been described as an epidemic. There is no single agency with definitive responsibility to tackle the issue therefore partnership working will be essential to establishing the best approach to address our unique local circumstances.

It is commonly believed that because the products are (mostly) legal, there is nothing that either the local authority or law enforcement can do. It is true that use of these substances present many challenges with no simple solutions. We all agreed that we must prevent the normalisation of drug use in our communities.

The rise of NPS should be a matter of concern to everyone. As a society, we should not just 'walk on by' when we see drug use and we must challenge the perception that drug taking is an acceptable activity or 'rite of passage' for young people.

The Panel has made recommendations across a number of areas including use of current legislation and the potential to bring in new legislation. The Panel hope that its recommendations will make a useful contribution to the ongoing response to NPS.

Councillor George Howe
Lead Scrutiny Member, Public Health Wellness and Culture

2

2. Introduction

2.1 The last few years have seen the emergence of new drugs that have similar effects to drugs that are internationally controlled. These drugs can be collectively called New Psychoactive Substances (NPS).

2.2 NPS are advertised and sold as 'legal highs', often under a variety of brand names, at low risk and significant reward for suppliers. There has been a rapid increase in the number and range of new substances, with their open sale in retail outlets and through the internet. These drugs have the potential to pose serious risks to public health and can even be fatal.

2.3 The Home Affairs Select Committee published a report *Drugs: new psychoactive substances and prescription drugs*, on 20 December 2013. The report concluded: "*There is currently an epidemic of psychoactive substances and it is highly likely that the creation of new psychoactive substances will continue to increase in the future unless immediate action is taken*".

2.4 The Panel was tasked with looking at the legislative framework for responding to these new drugs, as well as looking at our health and education responses. The Panel hope that its recommendations will make a useful contribution to the ongoing response to NPS.

3. Aim of Review

3.1 To explore the options for local partners to work together to tackle the problems which may arise such as risks to health, the actual legal status of substances used, and increased risks to public health and anti-social behaviour.

4. Terms of Reference

4.1 The review set out to:

a) Analyse the problem;
b) Consider the nature of the new psychoactive substances market;
c) Assess the effectiveness of the current legislative and the implications of the response to the review;
d) Consider the opportunities and risks, informed by legislative options for enhancing our approach.

5. Membership of the Panel

Lead Scrutiny Member, Cllr George Howe
Cllrs Louise Farthing, Fiona Miller, Julia Jackson, Rebecca Atkinson, David Errington, Richard Bell, John Cummings Shirley Leadbitter

6. Method of Investigation

The Scrutiny Panel held a half-day evidence gathering session in December as well as considering Government guidance and case studies from other council areas.

3

7. Findings

<u>What are 'legal highs'?</u>

7.1 New Psychoactive Substances (hereafter shortened to NPS), known as "legal highs" are drugs which mimic the effects of illegal drugs. There is a common, but mistaken, perception that because such drugs are not legally controlled or banned they are safe. None of them, however, have been subjected to the stringent testing procedures which are required before a new medicine for human use is granted a license and, consequently, there is a significant risk of short and long-term adverse effects resulting from their use.

7.2 There is a global market in their manufacture and sale. Because they are not covered by the available legislation they can be sold openly. They are not sold surreptitiously on street corners but openly in "head shops" though also in places such as garages, petrol stations and over the internet.

7.3 The chemical makeup of these substances and the potential impact on those who consume them may not be known creating a challenge for health workers required to treat individuals. Reported serious side effects include depression, panic attacks, and difficulty breathing. Some, such as Spice, are equivalent to highly potent cannabis, while others are designed to imitate drugs like LSD or even heroin.

7.4 Marked "not-for-human-consumption", they are packaged like sweets and labelled "research chemicals" or "plant food". The marketing and definition of these substances gives people the impression they are safe. This is extremely misleading.

<u>How many people are using Legal Highs in Sunderland?</u>

7.5 Reliable data on the prevalence of use of NPS is difficult to obtain. Surveys of young people from the British Crime Survey suggest that 20 to 40% have tried NPS. This is similar to information gathered locally which indicates that from the 1st October 2013 to September 2014 in Sunderland, 41 out of 210 young people surveyed (20%) had used NPS on one occasion. The previous year this was 6%.[1]

7.6 While the extent of use in Sunderland cannot be precisely defined we know that Sunderland has had the highest increase in usage in the last year, although overall use is higher in Newcastle which has approximately 20 premises selling NPS.

7.7 The measures we can use are for those who access services or who may commit a crime associated with use of NPS. Research by the Centre for Social Justice showed that in England, the number of incidents involving a legal high rose from 1,365 in 2013 to 3,664 in 2014, an increase of 169%.

7.8 In the Northumbria Force area in 2012, 54 incidents were linked to the use of legal highs. This rose to 704 in 2014. In Sunderland the number of incidents rose from 19 in 2012 to 130 in 2014. Police time spent dealing with legal high incidents increased from 271 hours in 2012 to 2025 hours in 2014.

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[1] Evidence from Sunderland YDAP

7.9 In terms of health services, clinical responses to these substances via front-line services are a developing area. Drug toxicity is a common reason for presentation to hospital services. It appears that, generally, the pattern of toxicity associated with NPS is broadly similar to that seen with 'traditional' stimulant recreational drugs such as cocaine and amphetamine.

Attendance Data from A&E in Sunderland

Legal High Stats - Drug Taken
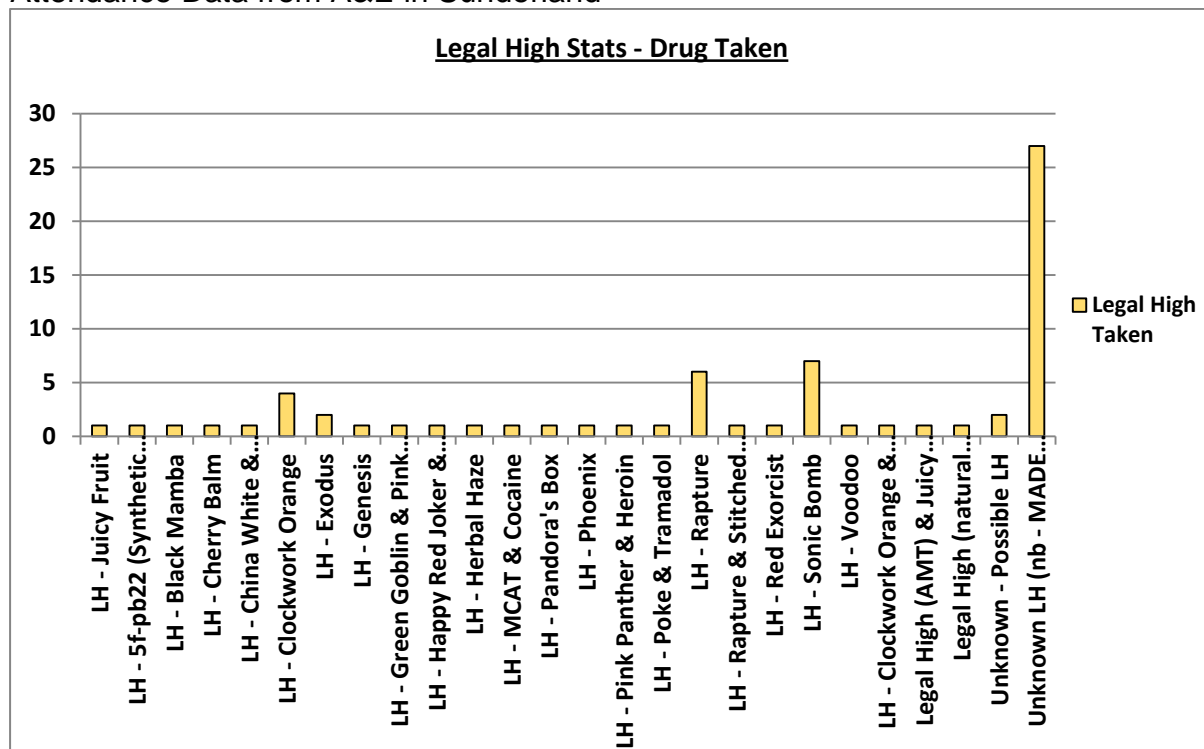
7.10 The Panel was informed that 81% of NPS users were male and over the last 4 months, there has been an increase in young people using NPS. High usage is reported amongst the LGBT community. YDAP reported that usage had risen from 6% to 42% in one year. A&E staff are currently building an intelligence database of incidents and usage. Many of those admitted to A&E are 'repeat offenders'.

7.11 Given that the NPS market is estimated to be worth some £1bn, it is clear that we need to capture data that gives a complete picture. What we know for certain is that harm levels are increasing. To develop effective prevention and education strategies, we must understand who is using NPS and what drives that use.

Identifying the Legal Highs problem

7.12 The Home Office funded Forensic Early Warning System (FEWS) was set up in January 2011 in response to the emergence of NPS. The main aim of FEWS is to forensically identify NPS quicker and more effectively, to inform the Advisory Council on the Misuse of Drugs' (ACMD) considerations and the Government's wider response through UK health and other warning systems. FEWS results are also fed into the UK-wide Drugs Early Warning System to inform Government's efforts to tackle the threat from NPS.

7.13 Some of the drugs advertised for sale as NPS are already controlled or 'illegal' under the Misuse of Drugs Act 1971 (the 1971 Act). So far the Coalition Government has controlled over 350 NPS.

5

7.14 In the Northumbria police area 220 substances are currently being tracked. All substances for sale are marked 'not for human consumption'.

7.15 Locally, older teens tend to use Mephedrone and white powders while younger teens go for synthetic cannabis with lurid brand names – 'Annihilator', 'Rapture'. Younger people in Sunderland favour cannabinoids which have a higher THC content. Popular ones include Clockwork Orange, and Sonic Boom, which is odourless and similar to cannabis. Odourless cannaboids which can't be detected are also used in prison. £1.50 can buy one packet of Clockwork Orange. The depressants mimic the effect of Diazepam and are popular. Stimulants are now not widely used; an example was M Cat which is now illegal and difficult to treat. There was no significant reported usage of hallucinogens in the city.

> Sunderland Case Study – 10 days in May 2013
>
> - 5 NPS incidents over 10 days in May 2013
> - All used Exodus Damnation in the same way
> - Each incident resulted in hospitalisation of users
> - The first three incidents involved males aged over 20
> - In the last of the 5 incidents a 15 year old and a 17 year old were hospitalised
> - One of the 15 year olds in the last incident had witnessed the first four

Where are people buying legal highs in Sunderland?

7.16 In Sunderland NPS can be bought from head shops (two at the time of evidence gathering), friends, dealers and the internet. The internet is less used with younger people as they may not have access to credit cards and would not want packages delivered. There is evidence that dealers are buying from head shops, mixing the substances and selling them on. Dealers will give credit to children in care and pay-back of debt can involve sexual exploitation. NPS is sold in youth friendly packaging and head shops offer incentives such as multi deals costing as little as £1.50 each for four people.

Targeted Prevention

7.17 Drugs find those least able to cope – the lowest common denominator. Targeted support is necessary.

7.18 The 2010 drug strategy[2] places an emphasis on early intervention for young people at increased risk. This applies particularly to those least able to cope - those who are truanting or excluded from school, looked after children, young offenders and those at risk of involvement in crime and anti-social behaviour, those with mental ill health, or those whose parents misuse drugs or alcohol.

7.19 The Panel was informed that locally incidents involving people in some form of care accommodation is high - 32% of all incidents in the Northumbria Force involve people in some form of institutional accommodation. Incidents involving people in care have risen from 6 in 2012 to 192 in 2014. Ten of those individuals were in either

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[2] The 2010 drug strategy, 'Reducing demand, restricting supply, building recovery: supporting people to live a drug-free life' sets out the government's approach to tackling drugs and addressing alcohol dependence.

6

Hostel or Care Homes and two were under 18 years. One of the 17 year olds has been found collapsed 13 times in 16 months.

7.20   The Government funded FRANK service recognises that to reduce the demand for all drugs, young people in particular need quality education on the effects and harms of drugs and to develop the skills and confidence to reject them.

7.21   PHE has launched a *Rise Above* campaign for 11 to 16 year olds which aims to help young people to build resilience and prevent them from engaging in risky health behaviours. Prevention approaches that target generic risk factors (for example, truanting, unstable home environments, build resilience and social capital (for example, good social networks, stable homes) have been shown to increase the likelihood of preventing people from developing harmful drug using behaviour. These approaches build resilience by supporting people; giving them opportunities for alternative healthier life-choices; and improving their skills, decision making and social capital.

7.22   The Panel was informed that resilience building, more so than specific drugs prevention activity, has the best evidence for helping people to avoid drugs. Programmes focused on building skills and attitudes to health are also worth considering.

7.23   The Panel supports targeted prevention interventions in institutional settings for those who have begun to use NPS – to deter use and prevent use being harmful or developing into dependence.

7.24   This approach could include tailored information, brief interventions, on-site advice or referral pathways. Such prevention initiatives may require 'up-skilling' of those in contact with NPS users with NPS information, advice, emerging prevention, brief interventions and referral for treatment for those that need it.

Health Consequences in Sunderland

7.25   Since 2005, NPS have been blamed for 70 deaths in the UK. As yet, no deaths have been linked to legal highs in Sunderland however; their use has been a cause of significant health problems for some users.

7.26   The harms of NPS are multi-faceted and may be physical or social. We are definitely starting to see health and other problems caused by regular use of NPS affecting NPS users' employment and education.

In the local media….

A former legal high addict says the drugs ruined his life (May 2014)
"I was like a zombie' – the legal highs addict lost his job, home, and freedom to the drugs – going to prison after becoming hooked on the drugs, which can be bought for as little as £5 a bag. He said: "I could not sleep and it stripped all the weight off me. "Legal highs ruin your body and ruin your head. I was like a zombie. I would go to sleep standing up.

Legal high' taken off shelves after substance landed teenager in hospital (September 2012)
A city shop owner has taken a legal high off his shelves after the substance hospitalised a 15-year-old Wearside girl. The teenager was taken ill after using Annihilation, a type of incense. A website which claims to sell the drug say it has "explosive strength".

Sunderland teenage thief 'flatlined' twice after taking legal high (May 2014)
A teenage thief almost died because of his addiction to legal highs. The 17-year-old had "flatlined" twice after taking the drugs. It comes after police issued a fresh warning recently when a man needed hospital for taking a substance known as Rapture.

Sunderland man taken to hospital after taking legal high (May 2014)
A 30-year-old man was spotted on Wearmouth Bridge in a heavily intoxicated state. Police and ambulance attended the scene and the man was taken to hospital. He had taken a herbal incense substance called Rapture.

They can kill' – police warning over legal highs (April 2013)
Northumbria Police has pleaded with people to shun the drugs after three teenagers began to vomit blood. "I would like to stress that the use of legal high drugs is not safe and can kill or have a devastating impact on people's health. These substances often contain potentially dangerous chemicals." Two girls and a boy, all aged 15, were taken to hospital after falling ill and vomiting blood after taking a substance called Clockwork Orange Herbal Incense.

7.27 The Panel understands that most people using NPS are not coming to the attention of specialist drug treatment services or general health services. Further, most people currently obtain information about NPS from their peers or from internet sites where drug using experiences are shared. Despite the recent rapid increase in use, currently only 4% (73 of 1984) of the service users in local adult substance misuse treatment services report use of NPS amongst problem substances.

7.28 To make sure the systems in place are suited to each potential user group, we need to understand how each group accesses specialist services. We may then determine that different systems may need to be in place to support users of all ages, wherever they are in life.

CASE STUDY - Sunderland YMCA - MAD4U DVD

Making a difference To You or MAD4U is a peer education programme that has been in operation in Sunderland for several years and is run and organised by those that have been homeless or who may have various other issues including family breakdown.

The group has produced a piece of work on legal highs which includes a presentation which has already been seen by professionals and service users.

The DVD warns of the dangers of the drugs, which campaigners have linked to over 50 deaths in the UK, to be shown around the country.

The centre's training manager, said: "It is quite hard-hitting, but really effective and everyone who has seen it hopes it might stop young people from using. Abuse of the substances – sold as over-the-counter tablets and powders – has taken a devastating toll on some of the young residents of the centre, where drugs and alcohol are banned.

"They are stealing to fund addictions; they are not paying the rent or bills or buying food. We went through a stage of having the ambulance here once a day, but we seem to have got through the worst of it.

7.29 The Panel believes it is vitally important that there are accurate public health messages on NPS to allow potential users to understand the choices that they are making and the harms associated with NPS. Users may be unaware of the risks that they are taking with such substances. Existing mechanisms for delivering public health messages and drug education should include reference to NPS including public campaigns e.g. FRANK and public information campaigns.

8

7.30 The main piece of legislation used in relation to both NPS and controlled substances is the Misuse of Drugs Act 1971, which describes, explains and classifies prohibited substances. The problem is that 'mimic' drugs – new substances created by chemically altering controlled substances but which retain very similar physiological actions – fall outside the descriptions and, therefore, fall outside the Act.

7.31 As a consequence, other pieces of legislation are considered: the Drugs Act 2005, which again relates only to controlled drugs; the Medicines Act 1968, which manufacturers try to circumvent through 'Not for Human Consumption' labelling; and, the Intoxicating Substances (Supply) Act 1985, which prohibits the sale of certain substances to those under the age of 18. There is even the Offences Against the Person Act 1861, under which it an offence to knowingly administer a poison to another person, however, the overall opinion of law enforcement is that current legislation is, at best, only partially effective.

7.32 A number of barriers to action have been identified. Although testing is an essential part of any action, there is a lack of testing kits and scarce resources to pay for laboratory testing services. A number of prosecutions have been brought in relation to NPS but sentencing has been low. In addition to the work that the police undertake – for example, regular attendance at premises as a deterrent – other options identified for public services include:

- Partnership is essential in order to share information and experience, and develop a coordinated response;
- More research is needed to better understand what's happening on the ground. This research will inform government, senior law enforcement and Police and Crime Commissioners and help them to decide what actions needs to be taken.

7.33 The Panel is aware that NPS pose a significant legislative challenge. The Government's response to date has been wide ranging but it recognises that there is more to be done. In December 2013, the Home Office appointed an expert panel tasked with looking at whether the legislative framework for responding to these new drugs could be enhanced beyond the current approach under the Misuse of Drugs Act 1971, as well as looking at how our health and education response needs to be developed.

7.34 The report concluded that the Government's existing approach under the Misuse of Drugs Act 1971 should be built on, not disregarded. Notwithstanding this recommendation, the report put the case for an enhanced legislative approach for NPS. The NPS market is in a constant state of evolution, and in the absence of a comprehensive legal framework, it will remain "a significant reward enterprise".

7.35 Some attempts in the use of non-drug-specific legislation have disrupted the market to some degree but do not provide a complete solution to tackle the availability of non-controlled NPS.

7.36 The report's key legislative recommendation focuses on stemming the supply, rather than on those using NPS. The main challenge will be to continue to manage the criminal market, whether through the internet, international retailers or organised crime and street dealers

9

CASE STUDY - IRELAND

The Criminal Justice (Psychoactive Substances) Act 2010 (the 2010 Act) was introduced in response to the proliferation of headshops in Ireland. It made it a criminal offence to advertise, sell, supply, import or export a psychoactive substance knowing that it was for human consumption. The Act focuses exclusively on substances intended for misuse. There are appropriate exemptions for tobacco, alcohol, food and medicines.

The Irish Police Force were given powers to investigate offences and the legislation provides for an escalation through the use of prohibition notices, court issued 'prohibition orders' and 'closure orders' for failure to comply, with non-compliance of a 'prohibition order' punishable by up to five years in prison.

In terms of penalties, any person found guilty under the 2010 Act is liable to a fine or imprisonment.

An inventory of headshops in Ireland indicated that prior to the introduction of the Act there were 102 headshops. Following the introduction of the Act, in effect the headshop trade in Ireland has virtually disappeared with only a negligible amount of such outlets, which continue to be monitored by the police authorities for any breaches of the law.

7.37   The 2010 Drugs Strategy also set out a commitment to review evidence about what works in other countries. During 2013 and 2014, ministers and officials undertook a programme of international fact-finding visits to review different approaches to the misuse of drugs and consider them against the approaches taken in the UK.

7.38   Findings show that many countries are to a large extent acting along the lines of the three strands at the core of the 2010 Drugs Strategy: reducing the demand for drugs, restricting supply, and supporting drug users towards recovery. However, there are sometimes stark differences in emphasis and variations in policy and operational responses.

7.39   Where there are differences in practice between one country and another, these are often informed by different social and legal contexts. What works in one country may not be appropriate in another. In many cases, they illustrate the complexity of the challenge, and demonstrate why the UK cannot simply adopt another country's approach.

7.40   The UK's legislative approach to drugs misuse continues to be based on the Misuse of Drugs Act. In light of the constraints of using the current legislation, the Panel believes the Council should join the lobby requesting the drafting of legislation to outlaw the sale and distribution of legal highs to create a blanket ban for it to be a criminal offence knowingly to advertise, sell, supply, import or export legal highs.

7.41   The Anti-Social Behaviour, Crime and Policing Act 2014 came into effect on 20 October 2014.   The Act introduces some radical changes to how local bodies deal with anti-social behaviour so that they can be more effective.   The following three notices are available and may be useful in tackling legal highs:

- *Community Protection Notices (CPNs)*
  CPNs can be issued by police and local authorities to individuals, organisations or businesses if the issuing agency is satisfied on reasonable grounds that their

10

conduct is having a detrimental effect on the quality of life of those in the locality, is persistent or continuing in nature *and* is unreasonable.

- *Closure of premises associated with nuisance or disorder etc*
  The police or council can issue a closure notice if the use of particular premises has resulted or is likely to result in nuisance to members of the public, or there is likely to be or has been disorder near the premises which is associated with the use of that premises.

- *Public Spaces Protection Order* can be used when '*Behaviour has to be likely to or has had a detrimental effect on the quality of life of those in the locality; be persistent, unreasonable and justifies the imposed notice'*. Councils have started to use this new prohibition order in relation to NPS.

  Case Study – Use of PSPO in Lincoln town centre

  In February 2015, Lincoln Council became the first in the country to impose a PSPO in an area in the city centre. Lincoln had become well-known for having "a ready and cheap supply" of legal highs leading to what the authority described as "legal high tourism".

  The order, to be introduced on 1 April 2015, would prohibit people in a defined area to "ingest, inhale, inject, smoke or otherwise use intoxicating substances including alcohol and 'legal highs'. Anyone who breaches the order would be committing a criminal offence and could receive a Fixed Penalty Notice or face a fine in court. Police and council enforcement officers would have the power to demand the surrender of the intoxicating substances.

  A consultation was held with the public and local business and over 200 responses were received, with 97% supporting the proposed PSPO.

7.42   In terms then of the role of the police they are law enforcers, not educators, or experts in health or harm reduction. If no law exists that prohibits an activity, the police have problems in taking action.

7.43   The Panel felt that we should explore the options for an enforcement strategy using new Anti-Social Behaviour powers, recognising that 'legal highs' are being consumed in Sunderland City Centre and that this is having a detrimental effect on the quality of life for people in the community.

Local Enforcement

7.44   Home Office guidance recognises the importance of the role of local government to enhance the response in relation to intervention and treatment, prevention and education, as well as information sharing. However, as we heard through evidence, local authorities find it challenging to take action because current legislation was not designed to deal with the sale of these products. We are very much in an exploratory phase, looking to take action through other pieces of legislation, the so-called 'Al Capone' approach.

7.45   The Panel considered the council's role as an enforcement authority through the role of Trading Standards.   Legislation is available through consumer regulations, but there are stumbling blocks. Firstly, there is no standard compliance tool for these products. Regulations require showing that an 'average consumer' has been

11

influenced by misleading information, such as when NPS are labelled as 'plant food', or 'bath salts', yet, most consumers know exactly why they are buying these products and so are not being misled. Secondly, the 'average consumer' test must be applied, and those taking NPS are not average consumers as they have a better understanding of this environment.

7.46   A further issue is the availability of resources. If local authorities are to take action against head shops, they need to the financial resources to test products on sale, as they would with a pint of beer in a pub or food in a supermarket. Testing shows whether a product contains a controlled substance, information which could be passed on to the police or used as leverage to tackle head shop owners.

7.47   Other avenues to explore include looking at the safety of these products under the General Product Safety Regulations 2005. These require manufacturers to provide sufficient information to enable a product's safe use and that the 'Not For Human Consumption' labelling does not constitute sufficient information.

7.48   Finally, there is the option of 'technical issues', such as the requirement that products carry a manufacturer's name and address or that a 'chemical' product has a technical file listing the active ingredients and the testing regime.

7.49   The situation is evolving rapidly. In the past, when labelling was very poor, there was a better chance of seizing goods but, manufacturers are one step ahead and NPS are becoming much harder to 'screen test' on a site visit. The internet also presents issues as it is difficult to engage with a business hiding behind a webpage and trends are difficult to track.

7.50   Looking forward, local enforcement could include a licensing approach. From a local authority perspective, a system that regulates head shops would need to be very robust as a licence gives a clear signal that the products on sale are safe. Such a system would need to ensure that the substance inside the container was the same as the label and that it was safe, as well as looking at issues like dosing and interactions with other substances, including alcohol.

7.51   At present, as well as it being very difficult to prove if a product is dangerous, few local authorities are in a position to be able to resource such a comprehensive licensing regime. Something from central government would be needed to demonstrate that a product had been properly tested and was safe, which would in turn require a robust testing regime.

7.52   The Panel recognises and understands that proving through laboratory testing that the substances are harmful is a challenge, particularly as there is little research on NPS and their effects on people. However, the Panel notes that, as yet in Sunderland, there has been no laboratory testing of the contents of NPS sold within the city to identify the psychoactive substances.

7.53   The use of the consumer regulations to tackle the sale of NPS is a developing area, and the Panel heard that a number of local authorities have been making innovative use of some of the provisions. This will require laboratory testing to identify the psychoactive substances and the Panel was aware that the University of Sunderland's School of Pharmacy had made an offer to carry out a trial test of NPS purchased locally.

12

7.54 The Panel feels that this first step in identifying that what is being sold locally does contain psychoactive substances would be a useful first step in establishing that the substances may be harmful and that this would, at the very least, contribute towards a campaign of non-acceptance of the availability of NPS in the city.

8. Conclusion

8.1 The Panel is clear – these so-called legal highs present a challenge that cannot be ignored.

8.2 The Government has responded in a number of ways – putting in place a forensic early warning system, banning more than 350 substances and encouraging local authorities to use existing powers under drugs, medicines and consumer protection legislation to disrupt NPS supply. There has been evidence-based messaging on the risks of NPS through guidance to schools, FRANK (the government's online drug awareness service) and targeted communications activity.

8.3 Despite all of this, the problem is still on our streets and there is more to do to tackle the supply of NPS.

8.4 When we started the review we took evidence from agencies to better understand the situation on the ground. This revealed that there was good awareness of the impact and consequences of using NPS but that the ready availability of the substances means that we are left dealing with the consequences.

8.5 An effective partnership approach to the problem will cover treatment and intervention, prevention, education and information-sharing; helping dependent individuals through treatment and wider recovery support and underpinning of all this - ensuring that law enforcement protects society by interrupting the supply.

8.6 Finally, we need our communities to be less tolerant of drug use. We must resist the normalisation of NPS and put out a message that using these substances is not acceptable in this city.

9. Recommendations

9.1 The Panel's recommendations to the Cabinet are outlined below:

The Council should:

1. Explore the options for an enforcement strategy including
   - the use of new Anti-Social Behaviour powers and;
   - the use of all available local powers.

2. Join the lobby requesting the Government to draft legislation to outlaw the sale and distribution of legal highs by creating a blanket ban for it to be a criminal offence knowingly to advertise, sell, supply, import or export legal highs.

3. As a priority, pursue targeted prevention interventions with children and adults at high risk of use or current users in institutional settings. This will include work in hostels (including targeted activity by the Substance Misuse Service), children in

13

care, and support for schools to detect and prevent the use of NPS on their premises.

4. To investigate the options for maintaining a profile of incidents, intelligence and data on NPS to support decision making.

10. Acknowledgements

10.1 The Panel is grateful to all those who have presented evidence during the course of our review. We would like to place on record our appreciation, in particular of the willingness and co-operation we have received from the below named:-

a) Allan Brown Crime Prevention Design Adviser, Northumbria Police
b) Ben Seale, Public Health Commissioning Manager
c) Gary Roberts, YDAP Risk and Resilience Team Leader Locality Team East
d) Richard Reading Trading Standards & Licensing Manager
e) Stuart Douglass, Lead Policy for Community Safety
f) YMCA MAD4U group

11. Background Papers

11.1 The following background papers were consulted or referred to in the preparation of this report:

a) 2010 Drug Strategy, 'Reducing demand, restricting supply, building recovery: supporting people to live a drug-free life'
b) Home Affairs Committee - Drugs: new psychoactive substances and prescription drugs December 2013
c) Government response to the Home affairs committee session: Drugs: new psychoactive substances and prescription drugs May 2014
d) Home Office NPS: A review of evidence October 2014
e) NPS: Report of the expert panel
f) HM Government Response to NPS Review expert panel report October 2014
g) Guidance for local authorities on taking action against 'head shops' selling NPS

14

CHILDREN'S SERVICES SCRUTINY PANEL

POLICY REVIEW 2014/15

TACKLING CHILD POVERTY IN SUNDERLAND

FINAL REPORT

Contents   **Page**

1

Foreword

The starting point for this review was an acceptance that the issue of child poverty is everybody's business.

This is because a high level of child poverty in an area has both social and economic costs for local authorities, who often have to deal with its consequences. The Child Poverty Action Group carried out a study in 2012, which estimated the cost of poverty for each individual local authority, and reports that Sunderland spends an extra £187 million per annum on the effects of child poverty.

The size of the challenge facing Sunderland in trying to both reduce the numbers of families at risk of poverty and providing the support needed by families already experiencing its effect should not be underestimated.

The level of child poverty and the effectiveness of the work being done to improve the situation therefore matters. A sustained reduction in the number of children growing up in poverty is a key part of efforts, nationally and locally, aimed at breaking the 'poverty cycle' – where children of poor parents, become poor adults themselves.

The review has focused on prevention and early intervention, especially in the early years. There is compelling evidence that early intervention to prevent problems further down the line is one of the most effective forms of action both in terms of improving outcomes for children and young people and cost effectiveness.

A review of the child poverty is timely when those agencies working with families are finding that resources are being reduced significantly

The review recognises that a multitude of activities are currently being undertaken by the Council and other agencies to respond to the challenge. We are aware that early intervention to support younger children in poverty is only part of a much bigger picture around economic prosperity and material deprivation.

The findings and recommendations in this report are intended to contribute positively to achieving a better start in life for children, if only by ensuring they are accessing everything that they are currently entitled to.

I would like to thank members of the review for their contributions and also the various witnesses who supported the review.

Councillor Debra Waller
Lead Scrutiny Member, Children's Services

2.   Introduction

2.1   Child poverty affects all local authorities. The Child Poverty Act (2010) (CPA) makes a commitment to reducing child poverty and places specific duties on local authorities to work towards ending child poverty. Specifically, it placed a duty on Local Authorities to:

- Co-operate with partners and other bodies to reduce child poverty and work to mitigate its effects.
- Produce an assessment of the needs of children living in poverty in its area (a child poverty needs assessment), and
- Prepare a joint Child Poverty Strategy with relevant partners.

2.2   Child poverty is officially defined as follows: '*A household falls within the relevant income group, in relation to a financial year, if its equivalised net income for the financial year is less than 60 per cent of median equivalised net household income for the financial year*' (Child Poverty Act 2010). Children who are living in severe or persistent poverty are defined as 'either in low income for long periods or are going without the basic goods and services which are considered essential to maintain an acceptable standard of living' (DWP, 2011, p.1).

2.3   Local authorities are, on the one hand, committed to reducing and mitigating the effects of child poverty, while on the other they will experience the impact of welfare reforms that are predicted to increase child poverty.

2.4   The Frank Field review[1] is clear that what happens to children in the very early years – the way they are nurtured by their parents - is more important than tackling income poverty increases in benefit levels. The messages about the importance of early social and emotional development are repeated in the interim report of a further independent review led by Graham Allen into early intervention, which emphasises the importance of the very early years and nurturing by parents in determining later outcomes for children.[2]

3.   Aim of Review

3.1   To raise awareness of child poverty and investigate the robustness of the local approach to the reduction of child poverty.

4.   Terms of Reference

a) To investigate what is having the most impact on addressing child poverty in Sunderland;
b) To review the ways that services can demonstrate that they are helping to improve outcomes for those families experiencing poverty;

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[1] Frank Field Independent Review of Poverty and Life Chances December 2010
[2] Graham Allen (January 2011), Early Intervention: Next Steps – An Independent Report to Her Majesty's Government

3

c) To review the ways that services are able to identify and engage those experiencing poverty;

d) To assess how services intervene early and at the points in children and young people's lives when support is most needed;

5. Membership of the Panel

Lead Scrutiny Member, Cllr Debra Waller
Cllrs Florence Anderson, Linda Williams, Doris MacKnight, Anthony Farr, Philip Tye, Jacqui Gallagher, Bob Francis and co-opted member Rose Elliott

6. Method of Investigation

6.1 The Panel gathered evidence at monthly meetings between July 2014 and February 2015 as well as carrying out desk-based research.

7. Findings of Review

Child and Family Poverty in Sunderland

7.1 The Panel collected evidence of child poverty at a local level. The evidence provides a snapshot of what child and family poverty looks like across the city, based on the relative poverty indicator.

7.2 The Panel was informed that almost one in four children in Sunderland (23.4%) are living in poverty. This is slightly higher than the North East average (22.6%) and considerably higher than the national average (18.6%).

Child and Family Poverty Indicators

Indicator	Sunderland	National	Better ⬆ Worse ⬇
Children in low income families	23.4%	18.6%	4.8 ⬇
Lone parent families in low income	67.5%	69.5%	2.0 ⬆
Couple families in low income	32.5%	30.5%	2.0 ⬇
Children in workless households	17%	15%	2.0 ⬇
Children in working households	47%	51%	4.0 ⬇
Average gross weekly income	£450.60	£520.70	£70.10 ⬇
Working age population with no qualifications	29.1%	22.5%	6.6 ⬇
Youth people aged 18-24 claiming JSA	7.2%	3.7%	3.5 ⬇
Long term sick rate	33.1%	21.4%	11.7 ⬇

7.3 As in many other local authorities, poverty is more extreme in some areas of the city than others, with Hendon and Southwick wards having the highest levels of poverty at 39.5% and Fulwell the lowest with only 3.2% (Figure 1).

4

Figure 1 – Child Poverty levels in Sunderland, by ward

Ward	% of all children (0-19) in Sunderland in low-income families	
	2012[3]	**2011**
Barnes	16.4	17.8
Castle	27.6	28.3
Copt Hill	23.3	25.5
Doxford	10.0	13.5
Fulwell	3.2	5.1
Hendon	39.5	44.0
Hetton	27.3	29.1
Houghton	20.1	22.2
Millfield	27.2	31.4
Pallion	35.8	36.2
Redhill	33.8	36.5
Ryhope	20.3	21.3
Sandhill	31.5	31.0
Shiney Row	20.7	18.1
Silksworth	23.5	24.8
Southwick	39.5	40.0
St Anne's	31.5	34.2
St Chad's	20.7	20.5
St Michael's	10.7	15.3
St Peter's	13.4	13.6
Washington Central	17.3	16.6
Washington East	17.1	19.9
Washington North	27.5	31.0
Washington South	13.7	14.4
Washington West	19.0	19.0

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[3] These figures were released October 2014

7.4 Eleven out of the 25 wards in the city have a greater proportion of children living in poverty than the city average.

7.5 The majority of children living in poverty in Sunderland are below the age of 10, with a little over half of these aged 4 or under. This is in line with the UK, Great Britain and England averages. The Panel was informed that over the last five years, poverty levels in the 0-4 age group have risen steadily.

7.6 These figures reiterate the need to support families with very young children, to provide them with the best start in life and to lift themselves out of poverty.

7.7 For this reason, the Panel focused its evidence gathering on the provision of early year's services where Children's Centres and other early year's services play a key role.

Sunderland's Approach to Child Poverty

7.8 There are a number of initiatives that are already underway in Sunderland not only to mitigate the impacts of poverty, but also to combat it. Linked to the city's strategic priorities of People, Place and Economy, these include:

- Developments for economic growth in the city
- Improving the infrastructure and communities
- Supporting people to develop individual, family and community resilience

7.9 The Panel was informed that the Children's Trust revised the Children and Young People's Plan in 2014 and in doing so the partnership adopted responsibility for improving Children and Family Poverty across the city. The Trust agreed strategic objectives and priority areas for improvements where the Board felt it could add real value and were clearly linked to child and family poverty.

7.10 The review focused on the latter point in terms of how effectively we are currently delivering family focused services and which family prevention and early intervention services/programmes are effective. This included consideration of specialist intervention services working with the most disadvantaged families experiencing multiple risks i.e. families with the most complex problems.

7.11 Each Local Authority has a statutory responsibility to publish a Child Poverty Needs Assessment followed by a Child Poverty Strategy. The Panel took evidence on the needs assessment which was in development as the Panel carried out its review.

7.12 The needs assessment seeks to understand the depth of poverty in the city by exploring employment levels, household income, characteristics of those living in poverty, the cost of living and outcomes for children and young people. It

6

sets out actions to improve families' circumstances and mitigate the impacts of poverty for families.

7.13   The Panel believed that, overall, the needs assessment supports the development of a strategic direction which could be adapted across all mainstream universal services. The Panel favoured the setting of clearly specified outcomes for disadvantaged children and families and the setting out of expectations for improving outcomes for children and young people in poverty.

The Case for Prevention and Early Intervention

7.14   There is compelling evidence that early intervention to prevent problems further down the line is the most effective form of action both in terms of improving outcomes for children and young people and cost effectiveness.

7.15   Best start in life indicators are set out below:

Indicator	Sunderland	National	Better ↑ Worse ↓
Life expectancy (age in years)	77	79.2	2.2 ↓
Infant mortality per 1000 live births	3.1	4.3	1.2 ↓
Low birth weight	8.7%	7.3%	1.4 ↓
Smoking during pregnancy	18.5%	12.7%	5.8 ↓
Breastfeeding – initiation rate	60.3%	73.9%	13.6 ↓
Breastfeeding at 6-8 weeks	27.8%	47.2%	19.4 ↓
Immunisation rates:			
• MMR Vaccination age 2	94.9%	92.3%	2.6 ↑
• Dtap / IPV / Hib vaccination (2 years)	98.2%	96.3%	1.9 ↑
Children aged 5 with one or more decayed, missing or filled tooth	36.9%	27.9%	9.0 ↓
Prevalence of obese children in Reception	11%	9%	2.0 ↓
Prevalence of obese children in Year 6	21%	19%	2.0 ↓
A&E Attendances (0-4 years) per 1000 of the population	1,282.1	510.8	771.3 ↓
Mothers aged 18 or less as a percentage of all deliveries s	2.7%	1.2%	1.5 ↓

Early Intervention Support – The Offer

7.16   The Panel was informed about the support available to families through the Early Intervention Service. The service both signposts to and delivers a range of support and intervention to alleviate the likelihood and impact of poverty both generally and for specific target groups. This includes accessing to support available through Government funding.

7.17   The Government provides 'pupil premium funding' to schools to intensively support pupils from disadvantaged backgrounds. This is calculated using free school meals eligibility as the main measure. Funding for 2014 to 2015 is set at £1,300 per eligible primary-aged pupil and £935 per eligible secondary-aged pupil.

7

7.18   In addition, from April 2013, free nursery education was offered to disadvantaged two year olds. These places were available to children who are entitled to free school meals from the term after the child's second birthday, with three intakes per year in line with school terms.

7.19   From April 2014, the criteria widened to include children who were in receipt of Disability Living Allowance, those who are adopted and looked after, and those from families with an annual income of £16,190 or less. Places are available with participating childminders, day-care nurseries, some nursery schools and primary schools with childcare on site.

7.20   The Panel heard that Sunderland is adopting an 'assumed consent' model for free school meals. This means that when an application for Housing or Council Tax Benefit is awarded, services will ensure that where there are children living in households they will automatically be registered for free school meals and the families and school will be informed. This approach is aimed to encourage maximum take up of a healthy meal for children who are eligible, but it also supports schools to claim their full pupil premium entitlement.

7.21   The Panel discussed access to free schools meals in the contexts of the impact on family budgets and the quality of food consumed by children in Sunderland. Figures released by the Child Poverty Unit in October 2014, show that:

-    0.6% children in Reception were underweight, compared to 0.9%
-    11% of children in Reception were obese, compared to 9% nationally
-    1.1% of children in Year 6 were underweight, compared to 1.3% nationally
-    21% of children in Year 6 were obese, compared to 19% nationally.

7.22   The Panel recognised that early childhood is a critical time for good dietary health, as many lifestyle habits around diet and physical activity are established in the first years of life. There is a need to focus on both universal and targeted prevention across a range of settings, with action being taken as early as possible – and with the whole family – when risks are identified.

7.23   The loss of Free School Meals in the school holidays means that families must find extra money to feed their children. This markedly increases food poverty at these times of year. This issue, like all aspects of child poverty, needs to be seen in the context of the wider patterns of child poverty and attempts to alleviate its damaging effects

Parenting and family support

7.24   Programmes introduced in Sunderland include:

- Nurture Programme
  Ten week course for grandparents, parents and carers.

8

- The Strengthening Families, Strengthening Communities Programme Parenting programme designed to help parents make changes. Issues such as domestic violence, gangs, crimes, drugs are tackles as well as praise, boundaries and consequences.

- Triple P (Positive Parenting Programme)
  Five week programme to help parents understand the way their family works to help create a stable and supportive family.

7.25 The Panel emphasised the importance of ensuring that the support provided is co-ordinated and takes account of how individual problems affect the whole family. For example domestic violence in the home may lead to mental health issues for children who are witnesses; children of adult offenders may need additional support to prevent themselves becoming involved in youth crime. In these examples family-centred approaches should lead to the early identification of at risk children and young people.

7.26 The Panel noted that a key challenge is to ensure that all agencies who come into contact with parents know how to spot early warning signs and respond to the early identification of risk. In the current economic climate where support for the most disadvantaged families through existing family based interventions projects may under threat, the Panel wanted to see resources prioritised for parenting and family support, particularly for the most disadvantaged families.

7.27 A study commissioned by the Department of Work and Pensions[4] set out to explore the characteristics of children from poor backgrounds who 'buck the trend' and go on to escape poverty and achieve economic success as adults. The findings support the case for parental engagement, with poor children whose parents read to them and are interested in their education being more likely to go on to adult success.

Children's Centres

7.28 The Panel considered the provision of high quality early years experiences, where Children's Centres aim to impact on child poverty. There are five designated Children's Centres in Sunderland acting as locality hubs and supported by a range of other delivery sites within each locality.

7.29 Evidence was provided that:

- All Children's Centre activities are free and can therefore support low income families to access activities that support child development and promote social inclusion and wellbeing

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[4] Blanden, Jo (2006), *'Bucking the Trend': What enables those who are disadvantaged in childhood to succeed later in life?* DWP Research Report No.31. Department for Work and Pensions.

- Family support through the early intervention family team provides support to families around financial issues – referral to specialist debt advice, applications for grants for household equipment
- Sunderland North Community Business Centre (SNCBC) are commissioned to deliver a contract to provide training for parents, especially workless parents. This includes low level training, accredited training, basic numeracy and literacy and support with writing CVs. This supports parents to apply for work or further training.
- SNCBC also deliver a contract to support parents into being volunteers with the aim of increasing their confidence, skills and competencies and thereby becoming more employable. For example volunteers are placed in schools and external organisations as well as within Children's Centres as Children's Champions, Bosom Buddies or Community Parents.

7.30   Families identified as needing additional support can receive home visits from the Early Intervention Family Team, who can bring play and learn type activities to the home for families who do not have the confidence to attend group activities. They can then encourage the family to attend group activities. Families that need more intensive support receive support from the child and family service which can support families to access grants for furniture and support from debt counselling services.

Childcare in Sunderland

7.31   The take up of formal childcare by low-income families in Sunderland is 14%, compared to 15% nationally[5].

7.32   The latest local Childcare Sufficiency Review 2012/13, shows that there were sufficient childcare places in all sectors across the city except for day care spaces for 2-3 year olds in the Coalfields area, which is just 5 places under sufficiency. However, all childcare providers across the city were under-occupied.

The average weekly costs of the different types of childcare in the city are:

Type of childcare	Average Weekly Cost
Day care	£147.60
Out of school childcare	£31.56
Childminder	£127.66
Holiday childcare	Not available

7.33   From 1 April 2013 there were 817 children eligible for a childcare place under the government's scheme to provide places for disadvantaged 2 year olds. Analysis shows that there are sufficient places to meet the demand in the first year, with the exception of the north area of the city, where an additional 5 places were required.

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[5] Child Poverty Unit, October 2014

10

7.34   Draft data shows that 707 children took up places in 2013, equivalent to 87%. The number of places required from 1 April 2014 was 1,634 places.

<u>Targeted support</u>

7.35   The Panel emphasised the need to be confident that we know we are working with the most disadvantaged families.   Evidence was taken on 'Family Focus', the name given to the approach to deliver the national Troubled Families initiative in Sunderland.

7.36   The Department for Communities and Local Government (DCLG) estimates that there are 120,000 Troubled Families nationally by using research which identified the proportion of families who suffer from at least five of the following characteristics (all which are linked to child poverty):

- No one in the family is in work;
- Living in poor or overcrowded housing;
- No parent has any qualifications;
- Mother has mental health problems;
- At least one parent has a longstanding illness, disability or infirmity;
- A low income;
- An inability to afford a number of food, clothing items.

7.37   Using these criteria DCLG estimated that in Sunderland there are 805 such families with an estimated cost to the taxpayer in reacting to the issues in these families of £60,375,000. It is estimated that considerably less would be needed to be spent try to turn around their lives in a targeted, positive way.

7.38   As at August 2014 it was reported that Sunderland had 'turned around' 58% of the families it was working with through the programme and was in a good position to continue on this trajectory and turn around all 805 families by the end of the programme in March 2015.

7.39   Building on Family Focus, the Strengthening Families Framework seeks to ensure that families in Sunderland can easily access the right support at the right time. The emerging approach to strengthening families in Sunderland is:

- Asset based;
- Reduces dependence on public services in the longer term;
- Family-focused;
- Personalised and responsive;
- Pro-active, seeking to identify and address issues;
- Integrated, working across services to achieve more for families;
- Locally responsive, planning at a locality level where appropriate.

<u>Wider Picture</u>

11

7.40 'Due North'[6] reinforces the health inequalities between those living in the North of England and those in the south, and highlights that the *"burden of local authority cuts and welfare reform has fallen more heavily…on the disadvantaged than the affluent areas; and on the more vulnerable population groups in society, such as children."*

7.41 The report confirms that the UK has some of the worst indicators for child health and well-being of any high-income country. Within England, the health of children is generally worse in the North, reflecting the higher levels of child poverty.

7.42 The report reinforces the large body of evidence that children who start behind tend to stay behind. For example, children living in poverty are more likely to: die in the first year of life; be born small; be bottle fed; breathe second hand smoke; become overweight; perform poorly at school; die in an accident; become a young parent; and as adults they are more likely to die earlier, be out of work, live in poor housing, receive inadequate wages and report poor health.

7.43 The report states that, in the North of England, where large proportions of children are growing up in poverty, it is critical that action to improve early child development takes place on a scale that is proportionate to need.

7.44 The report concludes that two strands of action are required to significantly reduce child health inequalities at a population level. Firstly, a universal system of welfare support is needed that prioritises children, in order to eliminate child poverty. Secondly, a system of high quality universal early years child care and education support is also necessary. This needs to be supported by routine support to families through parenting programmes, key workers and children's centres with integrated health and care services and outreach into communities. The evidence base for these early interventions is strong.

7.45 The report recommends that agencies in the north should work together to:

- Monitor and incrementally increase the proportion of overall expenditure allocated to giving every child the best possible start in life, and ensure that the level of expenditure on early years development reflects levels of need;

- Ensure access to good quality universal early years education and childcare with greater emphasis on those with the greatest needs, so that all children achieve an acceptable level of school readiness;

- Maintain and protect universal integrated neighbourhood support for early child development, with a central role for health visitors and children's centres that clearly articulates the proportionate universalism approach;

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[6] Due North report of the Inquiry on Health Equity for the North September 2014

- Collect better data on children in the early years across organisations so that we can track changes over time;

- Develop and sign up to a charter to protect the rights of children to the best possible health.

8. Conclusion

8.1 The Panel took as its starting point the need for every child and young person living in low income families to have access to the best universal services. They wanted to see a continued drive towards excellence in everything we do, because high quality services have been shown to be one of the most important factors in protecting children from disadvantaged backgrounds from poor outcomes.

8.2 The Panel recognised that all services will need to be geared more explicitly towards those who need them most i.e. children in families with low incomes and those at greatest risk, with the most complex problems.

8.3 The Panel therefore wanted a Child Poverty Strategy to reflect that all mainstream services should be able to demonstrate that they are reaching and benefiting children and families living in poverty, and those at greatest risk. Mainstream services include schools, children's centres and other early years services, youth services, GPs, health centres, midwifery services, health visiting services, library and sports services, parks, planning, housing, revenue and benefits services and employment and training services including Job Centre Plus.

8.4 In conclusion, there is a large body of evidence confirming that early disadvantage tracks forward, to influence later life. We can have the biggest impact by intervening in the early years, with these years being formative for establishing healthy lifestyle choices. This is not only important in terms of the immediate impact on children's health and development, but the benefits also extend into adulthood with the associated savings for adult services.

9. Recommendations

9.1 The Panel's recommendations to Cabinet are outlined below:

1. The Child Poverty Needs Assessment should continue to be developed in a way that is evidence based and is informative about local deprivation data, to encourage officers and Members to use it to inform local planning and strategy.

2. Opportunities should be taken to maximise the take up of entitlements available to disadvantaged families. This includes

13

- the take up of free nursery education offered to disadvantaged two year olds and;
- the number of children taking up free school meals, using an assumed consent model (thereby ensuring schools claim their full pupil premium entitlement).

3. Options for disadvantaged children to access to a nutritious meal during school holidays, where they meet the criteria for free school meals, should be explored.

4. To consolidate all 'key worker' style approaches across the city to ensure that families can work with one key mediator and are given consistent messages

5. Locally based services should be available for parents, such as parenting support, which encourages and enables parental behaviour change where needed.

10. Acknowledgements

The Panel is grateful to all those who have presented evidence during the course of the review. We would like to place on record our appreciation, in particular of the willingness and co-operation we have received from the below named:

a) Sandra Mitchell, Head of Community & Family Wellbeing
b) Simone Common, Service Manager, Risk & Resilience
c) Nicola Appleby, Senior Policy Officer, People & Neighbourhoods
d) Helen Lancaster, Family Focus Coordinator
e) Bev Chismon, Parenting Coordinator
f) Rachel Putz, Service Manager, Locality Services, Children's Centres (and Coalfields Locality Operational Manager)
g) Tim Hakim, Children's Centre Manager
h) Marie Roberts, Children's Centre Manager

11. Background Papers

11.1 The following background papers were consulted or referred to in the preparation of this report:

(a) The Child Poverty Act 2010
(b) Sunderland Child Poverty Needs Assessment
(c) Due North – Inquiry on Health Equity for the North September 2014

14

Item 7

SCRUTINY COMMITTEE   **16 April 2015**

ANNUAL REPORT 2014/15

REPORT OF THE CHIEF EXECUTIVE

1.   **Purpose of Report**

1.1   To provide the Scrutiny Committee with the opportunity to consider the draft Scrutiny Annual Report for the municipal year 2014/15.

2.   **Background**

2.1   As outlined in the Council's Constitution, it is required of the Scrutiny Function to produce an Annual Report detailing the work of the Scrutiny Committee and supporting Panels during the preceding year. The report also contains proposed developments and improvements for the forthcoming year.

3.   **Draft Report**

3.1   The draft report is attached as **Appendix 1** for consultation and endorsement by the Scrutiny Committee. Members should note this is a 'draft' version and there is still the opportunity for Members to discuss and make amendments to the draft prior to the final version which will be presented to full council.

3.2   Each Lead Scrutiny Member has contributed a short summary of their work over the year, including highlights from Panel meetings and the outcomes of major pieces of work commissioned by the Scrutiny Committee.

3.3   Following the endorsement of the report by members of the Scrutiny Committee at the meeting, the Annual Report will be presented to the first meeting of Council in the new Municipal Year and thereafter will be included on the Scrutiny web pages and circulated to key stakeholders for information.

4.   **Conclusion & Recommendations**

4.1   It is recommended that the Scrutiny Committee:-
       (a)   Considers the content of the draft Annual Report for 2014/15, and
       (b)   Endorses the report for submission to the first meeting of Council in the Municipal Year 2015/16 and for subsequent circulation to key stakeholders.

5.   **Background Papers**

5.1   No background papers were used in the preparation of this report.

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Scrutiny Annual Report

All together, working, playing, learning, growing, laughing, innovating, caring, sharing, living… Sunderland!

Contents

Foreword

As the Chair of the Scrutiny Committee I am pleased to be able to introduce this year's Annual Report. The Scrutiny Annual Report is a record of the work of the Scrutiny Committee and its Lead Scrutiny Members throughout 2014/15 and is testament to the activities that we, as scrutineers, carry out.

As many of you will know this was my first year as the Chair of the Scrutiny Committee and it has been an extremely busy one. I was also elected Chair of the North East Combined Authority (NECA) Scrutiny Committee for 2014/15. As the appetite for greater devolution of power gathers a growing voice across the country the Combined Authority provides an important step along this path.

It is also important, within regional arrangements, to have an effective scrutiny function that enables local councillors, on behalf of their communities, to scrutinise and challenge the North East Leadership Board (NELB), the Transport Sub-committee (TNEC) and Nexus. The Scrutiny function needs to investigate matters of strategic importance to residents within the Combined Area covered by the Constituent Authorities with a view to influencing the decisions of the NELB, TNEC and Nexus.

The panels have once again been very active and this is evidenced by the completion of a number of reviews by the Lead Scrutiny Members and their respective panels. Further details of these reviews are included in this report, and I know that the Members who took part in them found the work to be interesting and valuable.

A range of recommendations have been identified which are intended to have a positive outcome for the council and its residents, and the Scrutiny Committee will be interested to hear about the progress made over the coming year.

It remains essential that Scrutiny continues to contribute positively to supporting the delivery of the city's priorities through its critical friend role, its contribution to decision making and its unique role of bringing the public, partners and elected Members together to explore issues in greater detail and provide solutions.

It has also become increasingly important as we continue to navigate our way through this period of financial austerity, that we focus our Scrutiny resource on areas that matter most to the public and on issues where we feel we can help the council to work smarter and more efficiently.

I would at this point like to pay tribute to Cllr Christine Shattock, Lead Scrutiny Member for Health, Housing and Adult Services, who sadly passed away this year. Cllr Shattock was a keen advocate for scrutiny and certainly championed the voice of local people, providing an invaluable contribution not only to scrutiny but the council as a whole; she will be greatly missed.

I hope you find this Annual Report both informative and interesting, and that you will continue to follow the progress of the Scrutiny function at Sunderland City Council in the future.

Norma Wright

Councillor Norma Wright
Chair of the Scrutiny Committee

Scrutiny Arrangements in Sunderland

The democratic governance arrangements in Sunderland consist of the Leader of the Council, a Deputy, a Cabinet Secretary, five Portfolio Holders and five Project Lead Members. The decisions of the Cabinet are held to account by the Scrutiny Committee supported by the six Scrutiny Panels. In addition there are five local Area Committees and Place and People Boards in each area.

What is Scrutiny?

Scrutiny aims to ensure that public services and policies best meet the needs of the residents of the city. It does this through:

- Policy review and development;
- Holding the Council's Executive and its partners to account;
- Investigating issues of local concern; and
- Working with partners to improve services to the local area.

The Scrutiny Model

The Scrutiny Committee acts as the overarching Committee with responsibility for all matters in relation to the improvement, delivery and performance of public services. It considers all matters which impact on the economic, social and environmental well-being of those who live, work and visit the city and is the designated scrutiny committee for statutory purposes for health, flooding (when relevant) and crime and disorder scrutiny.

If the Scrutiny Committee requires more in-depth investigation of particular issues it will commission work to the six Scrutiny Panels chaired by a Lead Scrutiny Member. The Panels will contribute to and inform the scrutiny process significantly through focused policy review work and one-off policy reviews.

A Scrutiny Panel is a small group of councillors who carry out specific, time-limited work. Panels are informal and are commissioned by the Scrutiny Committee to investigate specific service areas and make suggestions on how they can be improved. This allows Panel members to gain a wider understanding of the issue and arrive at informed findings and recommendations.

Although the Panels are informal, they take a structured approach to the examination of a particular issue with the aim of identifying key issues and outcomes. Panels will carry out a scoping exercise to identify a detailed remit and terms of reference, resource implications, the need for additional expertise, existing research and supporting documentation.

Shorter "spotlight" reviews may be appropriate for specific topics in a shorter space of time. The approach may include an evidence gathering day, via "interviews" and discussion groups with officers, members and other stakeholders.

When the Panel has finished its investigation, the Lead Scrutiny Member will present the findings to the Scrutiny Committee. If the Scrutiny Committee formally supports the document, it will be sent to the Cabinet for consideration.

How does scrutiny make a difference?

On a regular basis the Scrutiny Committee will add value by investigative questioning of witnesses on the issues within the council's policy framework.The impact of the work of scrutiny will also be evidenced over time by the implementation of its recommendations.

The monitoring of delivery of scrutiny's recommendations over a period time builds up a portfolio of evidence of scrutiny's role in service improvement.

The Scrutiny Committee

The Scrutiny Committee has once again undertaken a full and active work programme. A healthy relationship continues to develop between scrutiny and the Sunderland Clinical Commissioning Group. This is evidenced by the discussions that have taken place around the Clinical Commissioning Group's two-year operational plan, its programme of reform work related to the pathways for urgent care in Sunderland and the implementation of the Better Care Fund.

The Scrutiny Committee continues to take a keen interest in Sunderland Care and Support Ltd, and during the year met with a number of staff who had transferred from the council to the trading company. The Committee also held one of its monthly meetings at Sunderland Care and Support premises on the Leechmere Industrial Estate.

The Scrutiny Committee also received reports around the on-going improvement activity with regard to safeguarding services in Sunderland and an overview of the Council's Corporate Parent Role as well as an updated position on the Corporate Parenting Board Performance Data. The Committee has recognised the importance of this particular area and has established a working group to monitor and support the work that is taking place around safeguarding in Sunderland.

I am pleased to report that Portfolio Holders continue to attend scrutiny meetings, where appropriate, to provide evidence or feedback to scrutiny members on a number of issues. The Scrutiny committee also continued its dialogue with senior Cabinet members as part of the Council's budget consultation process for 2015/16. This is an important part of the scrutiny

function particularly in light of the continued spending reductions and emphasis that is placed on austerity. The Scrutiny and Cabinet relationship continues to be one that benefits both parties.

Sunderland City Council like many local authorities across England continues to look at and explore new ways of delivering services against a backdrop of diminishing financial resources. Scrutiny can play its part in this by providing an opportunity to explore new ways of working, helping to develop services and providing evidence to assist the council in the future delivery of services.

Through attendance at various panel meetings and the monthly Lead Scrutiny Member updates, presented to the committee, myself, the Vice-Chair and other committee members are able to witness the quality of evidence gathering that takes place for the various reviews. The Panels, once again, have shown their creativity in the approaches taken to investigate the issues we have asked them to look at.

Finally I would like to extend my gratitude to all Members for their contribution to the scrutiny process, whether through membership of the committee or by undertaking detailed reviews through the scrutiny panels. My thanks are also extended to officers, partners and external organisations who have attended meetings and contributed to the work of scrutiny. Their input has been much appreciated and provides a valuable contribution to scrutiny in Sunderland.

Children's Services Scrutiny Panel

Lead Scrutiny Member: Councillor Debra Waller

Panel Members: Cllrs Florence Anderson, Linda Williams, Doris MacKnight, Anthony Farr, Philip Tye, Jacqui Gallagher, Bob Francis

This year the Panel investigated local responses to child poverty. The starting point for this review was an acceptance that the issue of child poverty is everybody's business.

This is because a high level of child poverty in an area has both social and economic costs for local authorities, who often have to deal with its consequences. The Child Poverty Action Group carried out a study in 2012, which estimated the cost of poverty for each individual local authority, and reports that Sunderland spends an extra £187 million per annum on the effects of child poverty.

The size of the challenge facing Sunderland in trying to both reduce the numbers of families at risk of poverty and providing the support needed by families already experiencing its effect should not be underestimated.

The level of child poverty and the effectiveness of the work being done to improve the situation therefore matters. A sustained reduction in the number of children growing up in poverty is a key part of efforts, nationally and locally, aimed at breaking the 'poverty cycle' – where children of poor parents, become poor adults themselves.

The review has focused on prevention and early intervention, especially in the early years. There is compelling evidence that early intervention to prevent problems further down the line is the most effective form of action both in terms of improving outcomes for children and young people and cost effectiveness.

A review of child poverty is timely when those agencies working with families are finding that resources are being reduced significantly

The review recognises the activities being undertaken by the Council and other agencies to respond to the challenge. However, the report also identifies areas of current practice and policy in early intervention that should be prioritised if a sustained reduction in the number of children living in poverty is to be achieved.

I would like to thank the members of the review for their contributions and also to thank all of the witnesses who gave up their time to attend and provide interesting insights into the work they and their colleagues do and the challenges they face.

City Services Scrutiny Panel

Lead Scrutiny Member: Councillor David Snowdon

Panel Members: Cllrs James Blackburn, Michael Essl, Stuart Porthouse, Steven Foster, Lynda Scanlan, John Wiper.

It has again been a busy year for the Panel.

In terms of our policy reviews, the Panel has looked at two issues of concern to the council's Bereavement Services function. Firstly, the condition and appearance of the council's cemeteries and in particular the effect of illegal kerb set which have proliferated in recent years and secondly the implications of government proposals to establish the position of Medical Examiner in the city .

As a result of our review, the Panel has suggested that the council undertake a review of the existing cemetery regulations in order to ensure that our cemeteries are well maintained and offer a dignified setting. The Panel has highlighted the need to balance the sensitive and potentially emotive nature of

the service with the wishes of many cemetery visitors who expect a well maintained and respectful area in which they can pay their respects. The Panel also stressed the importance of undertaking a comprehensive consultation process before amending our cemetery regulations.

The Panel has found that the proposed position of Medical Examiner could have significant cost and staffing implications for the city. The role of the Medical Examiner is to ensure that families receive an expert explanation of the cause of a death of a relative or loved one and provide an independent authority which will listen to and act on any concerns over the death certification process.

As part of its review, the Panel met with Mr Derek Winter, Senior Coroner, to discuss the respective roles and responsibilities of the council and its partners in working with the Medical Examiner. As a result of these discussions, the Panel is satisfied that the plans and preparations are in place in the event of the Medical Examiner Service being established and that the council and its partners are

clear on their respective roles and relationships.

During the year the Panel has also monitored the incidence of fly tipping in the city and trends in the collection of bulky waste. Recent figures show a continued downward trend with respect to fly tipping and a signs of a gradual increase in the take up in the service for bulky waste. The Panel has asked for a more detailed breakdown of information at an area level and will continue to monitor trends.

Toward the end of the year, the Panel revisited its review into alcohol licensing in the city in order to consider the progress being made in relation to licensing hours and the data being collected on drink related admissions to hospitals. The Panel also received an update on the work of trading standards in relation to the operation of rogue traders.

In conclusion, I would like to thank my colleagues on the Panel for all their support and assistance during the year and also to thank those officers and partners who have assisted and made such an important contribution to our work.

Health, Housing and Adult Services Scrutiny Panel

**Lead Scrutiny Member:
The late Councillor
Christine Shattock**

Panel Members: Councillors
Rosalind Copeland, Darryl Dixon,
Michael Dixon, Alan Emerson, Jill
Fletcher, Shirley Leadbitter, Barbara
McClennan, Dorothy Trueman and
Gemma Taylor

The Panel have investigated the
issue of loneliness and social
isolation and what role there is for
person-centred coordinated care.
The panel continue as part of their
review process to visit groups and
organisations that contribute to the
issue under investigation. Members
have met with, and visited
organisations including the
Salvation Army, Sunderland Clinical
Commissioning Group, Age UK,
Hetton New Dawn, the Campaign
to End Loneliness and Headlight to
name but a few. One of the key
themes to arise from this review is
just how easy it is for anyone to
become lonely or isolated through a

number of different factors such as
personal circumstances (e.g.
widowhood), life events (e.g.
moving away from home,
bereavement, moving into
residential care), poor physical and
mental health, or perceptions such
as the expectation of declining
health and dependency.

The review acknowledged, through
its evidence gathering, that
loneliness was estimated to have
the same impact as smoking up to
15 cigarettes a day, and that simple
interventions can make the biggest
of differences. The review also
recognised the efforts of providing
more co-ordinated care through
integrated services as well as a
focus on supporting individuals to
manage their own health had
shown positive impacts on health
and wellbeing outcomes. It is
hoped the review will not only
highlight the serious health
implications of loneliness and social
isolation but also provide
recommendations that further
enhance and compliment the
admirable work being undertaken
by so many organisations across
the city.

The Panel were also
commissioned, by the Scrutiny
Committee, to look at proposals to
procure a new integrated
Musculoskeletal (MSK) Service.
Through the commissioning role the
panel were able to explore and
satisfy themselves of the new
proposals. The commissioning role

of the Scrutiny Committee is of
considerable importance and
allows the individual Panels and its
Members to contribute to the work
of the Committee through each
Panel's specific remit and expertise.
In reporting back to the Scrutiny
Committee the HHAS Lead
Scrutiny Member was able to report
that the new MSK service would be
more responsive, ensuring greater
choice and control for the patient
along with a more equitable service
through efficient triage, greater
education of GP's and robust
monitoring arrangements.

The Panel would like to thank all the
officers, outside organisations and
people who have contributed to the
work of the scrutiny panel during
the year. Finally the Panel would like
to pay tribute to Cllr Christine
Shattock, Lead Scrutiny Member
for Health, Housing and Adult
Services, who recently passed
away. Cllr Shattock led the panel in
exemplary fashion and will be a
greatly missed scrutineer, colleague
and friend.

Page 211 of 294

Public Health, Wellness and Culture Scrutiny Panel

Lead Scrutiny Member: Councillor George Howe

Panel Members: Cllrs Louise Farthing, Fiona Miller, Julia Jackson, Rebecca Atkinson, David Errington, Richard Bell, John Cummings Shirley Leadbitter

I am very pleased to be able to report on the work of the Scrutiny Panel in this its 3rd year of operation. The Scrutiny Panel has had a very active year completing two reviews that have dealt with themes and issues important to both the council and the people of Sunderland.

Our first review was around how we support those at risk of suicide. Every suicide is both an individual tragedy and a loss to society. Every suicide can have a devastating effect. The numbers are very small compared to smoking or obesity but any death by suicide shows up the ultimate loss of hope, the ultimate loss of meaning of purpose. While the numbers may be small, they have a very big

impact. There are many ways in which services, communities, individuals and society as a whole can help to prevent suicides. Suicides are not inevitable.

The aim of our review was to refresh our view of what is known about the factors leading up to a suicide, including factors that impact on the number of suicides, identification of those who may be at higher risk and the evidence for effective prevention.

Our second review was on the use of so-called 'legal highs'. In the last few years there has been nothing short of a revolution in the public health risks presented by these new and unpredictable drugs.

These drugs are designed to evade drugs laws, are widely available, have the potential to pose serious risks to public health and can even be fatal.

The Scrutiny Panel's evidence gathering aimed to gain a perspective on the impact on

people's health and the challenges of trying to restrict the supply of legal highs in Sunderland. The Panel recognised that our current approach has real strengths but there is no doubt that more action is needed on a number of fronts. There is no single agency with definitive responsibility to tackle the issue and we need to continue to join forces to tackle what has been described as an epidemic. We must prevent the normalisation of drug use in our communities. If we work together, I believe we can make Sunderland a safer place.

The Panel hopes that its recommendations will make a useful contribution to the ongoing response to legal highs.

The Scrutiny Panel has delivered reports on important public health issues and this has only been possible through the contribution and dedication of panel members, officers and key stakeholders from across the city.

Skills, Economy and Regeneration Scrutiny Panel

Lead Scrutiny Member: Councillor Dianne Snowdon

Panel Members: Cllrs Bob Price, Michael Dixon, Christine Marshall, Mary Turton, Billy Turton, Len Lauchlan, Tom Wright, Peter Wood.

During the year, the Panel has undertaken a major review into the opportunities and obstacles faced by the city in meeting its future skills demands. The review stemmed from a frequently voiced concern that the local economy is being held back by a shortage of skills.

To this end the Panel met with a broad range of interested parties, including representatives from schools, colleges, local businesses and training providers. Panel members also attended two Work Discovery Days – one at Nissan on the topic of advanced manufacturing and the other at the Software Centre, Tavistock in relation to the IT and software sectors.

Our discussions have highlighted the growing skill shortages being experienced across a number of key sectors of the local economy including, engineering, advanced manufacturing, IT and software, building and construction and health and care.

All reported a growing challenge in replacing an aging workforce and up-skilling the existing workforce to adapt to new work processes and technological innovation. Our review has highlighted a range of measures that need to be taken to help tackle the skills deficit facing the city.

These include encouraging our young people to consider a career in engineering and advanced manufacturing, ensuring that they receive high quality career advice, developing links between local businesses and schools and continuing to expand the number and range of apprenticeships.

Reference was also made to focusing training and skills development on growth areas of the local economy and at sectors where the city has a comparative advantage. The city will also need to continue to develop its skills base in other sectors of the economy including creative and arts, professional and financial and software and IT.

At the start of the year, the Panel also conducted a short review into proposals to draw up a Digital Strategy for the city and key themes and issues that should be included. This includes how far the council and the city are currently making use of its digital assets and how best we can make use of new technology into the future.

The Panel has stressed the importance of partnership working in drawing up such a strategy and the need for partners to pool skills and resources. The Panel feel that the strategy should be clear and understandable to the lay man while being flexible to accommodate the development of technology into the future.

While the increasing use of digital services has enormous benefits in helping to reduce costs and promote choice and accessibility, the Strategy should also address the important issue of ensuring that our residents are not excluded from the benefits of the increasing use of digital services.

All in all, it has been a busy and productive year for the Panel. I would like to take this opportunity of thanking my colleagues for all their hard work and enthusiasm and I feel sure that the progress we have made can be built upon in the year ahead.

Responsive Services & Customer Care Scrutiny Panel

Lead Scrutiny Member: Councillor Ronny Davison

Panel Members: Cllrs Betty Gibson, Barry Curran, Anne Lawson, Iain Kay, George Thompson, Gillian Galbraith, Lee Martin, Margaret Forbes.

The Panel has focused on two major issues during the year; the implications of the Government's welfare reform legislation and the operation of food banks in the city.

The Government's welfare reforms programme has already had a considerable effect on the people of the city. The Panel heard about the work being done by the council and its partners to support people affected by changes to a range of benefits including personal independence payments, work capability assessments and benefits caps. The Panel was consulted at an early stage on the contents of the council's Crisis Support Scheme and Council Tax Support Scheme and has also

monitored the progress in the introduction of Universal Credit and the steps being taken to support those most affected.

As the next stage in its review, the Panel went on to look at the operation of food banks within the city. This has involved meeting with representatives from the food bank Network and visiting a number of food banks to discuss their operation at first hand.

As part of its work, the Panel also considered the recent report of the All Party Parliamentary Inquiry into Hunger in the UK entitled "Feeding Britain" and attended an event held at Sunderland Minster to consider the reports implications.

The need and growth for food banks is a sad state of affairs for a developed and relatively wealthy nation. All those we spoke to looked forward to the day when food banks would become unnecessary. While food banks have always operated on a small scale, in recent years there has been a rapid expansion and there was concern that the introduction of Universal Credit could see a period of continued growth.

Those operating food banks see them as very much a "hand up - not a hand out" being a symptom of other underlying problems rather than a solution. Much is being done to work with people to learn more about the reasons why they are using food banks and to provide

advice and support. The Panel has been impressed by the level of commitment and enthusiasm of those operating food banks and the way in which statutory and voluntary groups are working together to try to find a long term solution for those in need.

As part of its work programme, the Panel also briefly considered the implications of the Anti-Social Behaviour, Crime and Policing Act. The Act is intended to introduce simpler, more effective powers to tackle anti-social behaviour and establish a community trigger and community remedy to victims and communities, giving them a greater say in how agencies respond to complaints of anti-social behaviour. It was felt that this could be an issue which could be looked at in greater detail once the new legislations has had an opportunity to bed in.

In conclusion, I would like to thank Panel members for their support, contributions, and most of all for their active participation in our evidence gathering sessions. I would also like to thank officers and partners for their contribution to our work.

The year ahead

The Scrutiny Annual Report is largely retrospective in its approach, creating a record of the work the Scrutiny Committee, its Members and panels have undertaken during the previous year. However the annual report is also a chance to look ahead to what factors will influence the local government landscape generally, and scrutiny more specifically, over the coming year.

The hosting of the Annual Scrutiny Debate in June always plays a pivotal role in determining the Scrutiny work programme for the year ahead. Delegates include all Elected Members, Co-opted Members, key officers and representatives from our partner organisations to ensure that Scrutiny is able to focus its efforts on the key issues facing the city over the next 12 months. Although with a rapidly changing political and social landscape it is important that scrutiny has the ability to react to emerging local concerns and issues, the commissioning aspect of the scrutiny function will continue to allow for such a proactive approach.

With the abolishment of the Audit Commission there have been initiatives around community empowerment, transparency and sector-led self-improvement, and new forms of partnership-based governance from Combined Authorities to Health and Wellbeing Boards. Public governance needs to respond to an increasingly complex and challenging situation.

The principles and values that have informed scrutiny from initiation have not changed, and the challenges facing public services over the next few years, particularly at local level, mean that the work of scrutiny will remain just as relevant as ever. It will remain a challenge to ensure the effective contribution that scrutiny can contribute is understood in terms of delivering better outcomes for local people and communities.

It is clear that scrutiny provides an important function but as we move forward it will be increasingly important to ensure it is equipped and able to examine issues when things go wrong. The ability to commission one-off items of

interest or concern will remain an important tool for the Scrutiny Committee to be able to react as and when appropriate.

The social and economic landscape is continually changing and it is important that the local authority continues to serve the people of Sunderland by ensuring services meet their needs fully. Scrutiny's role will also remain important by continuing to act as the voice of local people in an effective mechanism for challenge and accountability.

Page 215 of 294

All together, working, playing, learning, growing, laughing, innovating, caring, sharing, living… Sunderland!

MONITORING THE DELIVERY OF AGREED SCRUTINY RECOMMENDATIONS

REPORT OF THE HEAD OF SCRUTINY AND AREA ARRANGEMENTS

1.   Purpose of the Report

1.1   To provide the Scrutiny Committee with progress in relation to the implementation of agreed scrutiny recommendations from previous policy reviews conducted by the relevant scrutiny committees during 2012/13 and 2013/14 respectively.

2.   Background

2.1   It is the responsibility of the Scrutiny Committee to monitor progress against the recommendations in relation to all previous policy reviews the scrutiny function has undertaken.

2.2   This report outlines progress on the 15 policy reviews undertaken in 2012/13 and 2013/14.

2.3   As part of the new scrutiny arrangements, in 2012 the Scrutiny Committee revised the monitoring arrangements in relation to policy reviews whereby only the previous two years worth of recommendations are monitored. Monitoring is done by exception, which in practice means that those recommendations that fall into the blue (not deliverable), amber (on schedule) or red (not on schedule) categories are the only issues considered by the Committee. This is to ensure that the Scrutiny Committee does not become over burdened in its capacity to monitor recommendations.

3.   Current Position

3.1   The recommendations, formerly agreed by Cabinet and partner organisations as part of the various policy reviews, will deliver a range of improvement activity. A full overview of progress is attached at **Appendices A-O**. The table overleaf provides a summary of the number and percentage of actions that have been achieved, are on schedule to be achieved, are not now deliverable, or are not on schedule to be achieved.

Policy Review	Rag Key			
	● **Green** (achieved)	● **Blue** (not deliverable)	● **Amber** (On schedule)	● **Red** (Not on schedule)
2012/13				
Tell us Once for Bereavement	5	0	2	0
Mental Health Pathways	8	0	0	0
Transition of Public Health and its Impact on Outcomes for the City	7	0	0	0
Reducing Reoffending	9	0	1	0
The Governments Work Programme	7	0	0	0
Delivery of Apprenticeships in Sunderland	6	0	2	0
Increasing Young People's Involvement in Service Design and Delivery	8	0	0	0
Domestic Violence	8	0	0	1
Waste and Recycling in Sunderland – Approach to Community Engagement	8	0	3	0
2013/14				
Childhood Obesity	2	0	2	0
Supporting Carers in Sunderland	2	0	1	1
Alcohol and Licensing	6	0	2	0
Diversification of the Local Economy	4	0	3	0
Volunteering: Unlocking Capacity	1	0	6	0
Flood Risk Management	3	0	4	0
Total	**84**	**0**	**26**	**2**

3.2   The Scrutiny Committee may ask the scrutiny lead member with the relevant remit to undertake further work on behalf of the Committee where any issues of concern are highlighted for those recommendations that are in the red, amber, blue categories.

4.   Recommendations

4.1   It is recommended that the Scrutiny Committee:-

(a) Notes the progress towards completion of the actions detailed within   the Action Plans appended to this report **(Appendices A-O)** and seeks clarification on content where felt appropriate; and

(b) Where issues of concern are highlighted, agrees to commission the relevant scrutiny lead member to undertake further work and report back to the Scrutiny Committee

5. Background Papers

5.1 Scrutiny Committee papers 2013/14 and 2014/15

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Appendix A

City Services Scrutiny Panel: Operation of the Tell Us Once for Bereavement Services – Policy Review Recommendations 2012/13

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	2	0	5	7

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	that whilst the level of take up for the Tell Us Once Service in Sunderland has been good to date, we consider that the Council should continue to look at new and innovative ways to promote the existence and potential benefits of the service to local residents and continue to monitor accordingly;	Take up of the Tell Us Once Service for both birth and bereavement is monitored monthly by comparing the number of births and deaths registered in Sunderland, to the Management Information reports received from the DWP which details the number of Tell Us Once notifications received from Sunderland City Council. This monitoring methodology will continue to be used as the most robust way to assess take up of the service.	Karen Lounton	Ongoing	●	Reports received monthly and information regarding take up reported back to staff. This is an ongoing process.
		Steps have already been taken to roll out publicity material across some GP practices, with the objective that all practices in the city will have received promotional material about Tell Us Once by March 2013.	Karen Lounton	March 2013	●	List of all GP practices across the city provided by Corporate Communications team. Distribution of material to remaining GP practices pending. Action completed.
		Promotional material relating to Tell Us Once for Bereavement is to be rolled out to the Bereavement Service at Sunderland Royal Hospital. The Tell Us Once model can be	Karen Lounton	January 2013	●	Publicity material provided to Sunderland Royal Hospital. Action completed.

City Services Scrutiny Panel: Operation of the Tell Us Once for Bereavement Services – Policy Review Recommendations 2012/13

B	that the Council should explore ways of building on the principles of the Tell Us Once Service in other areas of service delivery, transferring any 'lessons learnt' or best practice realised from TUO to other service areas;	adapted and used across other services, with longer term plans in place at the DWP to extend the principles of this project across other areas such as 'change of address'. Colleagues in the Transformation, Programmes and Project Team were involved with the implementation of Tell Us Once for birth and bereavement and have a full understanding of the benefits realised by the services involved, and how this established good practice can be built upon further.	Karen Lounton	Ongoing Ongoing	● ●	A proposal has been submitted to the Transformation Change Team which recommends building TUO into all of the CSN work (as this is the main contact point for customers). There is also a recommendation that TUO be included in the Alternative Service Delivery Model work where we ensure that any third party deliverer of services uses TUO. Work with the Transformational Change Team remains on-going. A meeting to review of progress to date is scheduled for 27 April 2015.
C	that the Council should continue to work closely with the DWP on a national level to ensure the TUO service, systems and databases continue to evolve and improve.	Regular communication is established between Gillian Priestley, the DWP Account Manager for the North East Tell Us Once project and the Bereavement and Registration Manager. This affords us an opportunity to continue to have input into the future development of the Tell Us Once service for birth and bereavement. Areas on the agenda for development include the introduction of connectivity between the General Register Office (GRO)	Karen Lounton	Ongoing	●	Regular communication is maintained with DWP via regular email bulletins from DWP to Local Authorities delivering Tell Us Once, as well as engagement with the DWP at the Regional Registration Service meeting held quarterly. Ongoing

City Services Scrutiny Panel: Operation of the Tell Us Once for Bereavement Services – Policy Review Recommendations 2012/13

		database and the DWP Change Reporting System (CRS). Developments in this area will speed up the birth or death registration and Tell Us Once interview process, allowing better use of resources in the Registration Service. Other development areas include extending the scope of Tell Us Once for birth and bereavement, and introducing new services and organisations to the list of 'end users' who receive information relating to birth and death events. This development area will be managed by DWP, but with input from Local Authority representatives. The DWP also have representation at quarterly Regional Registration Service Manager meetings where TUO is a standing item on the agenda. The Bereavement and Registration Manager attends these meetings as the representative from Sunderland City Council.	Karen Lounton	March 2013	•	Regional Registration Service meetings are scheduled quarterly, with Tell Us Once a standing agenda item. Meetings scheduled for 2014 in January, March, June and September. All North East and Durham authorities are represented on this forum. Ongoing

HHAS Scrutiny Panel: Accessing Mental health Services In Sunderland: Policy Review recommendations 2012/13

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	0	0	8	8

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	To develop the frontline councillor role to enable elected members to identify the signs associated with mental illness within their own communities and enhance their understanding of the mental health pathway and services available for people with mental health problems in their own wards.	Arrange members briefing sessions using 'No Health without Mental Health' material, including Mental Health first aid information, to be delivered by MH Managers and partner agencies.	Pippa Corner (left council Dec 13). Lennie Sahota Head of Personalisation.	September 14	●	Completed A briefing Session with members was held on 2nd December 2014 jointly delivered by NTW Mental Health Trust Partners and Council Managers.
		Link named MH social workers to each ward for locality working, inform members of nominated worker in their area.		May 14	●	Upon further consideration allocating a named MH social worker to each ward was an unrealistic action given the size of the mental health social work teams. Also since this policy review in 2012/13 agreement has been reached between health and social care to establish integrated teams within each of the 5 localities. The MH social workers will be linked to the 5 localities.
B	To develop and implement an awareness-raising strategy to ensure that all stakeholders across the city understand the services available to people with	Work with the Model of Care Programme Board (this board is changing in line with Sunderland CCG) to develop the strategy.	Neil Revely (Executive Director of HHAS) on behalf of	October 13	●	Complete

HHAS Scrutiny Panel: Accessing Mental health Services In Sunderland: Policy Review recommendations 2012/13

	mental health problems, including health practitioners, voluntary and community sector organisations and the Local Strategic Partnership.	The strategy would sit under the Health and Well-being Board as part of the HWBB strategy for Sunderland	HWBB			
C	To look at raising the awareness of the signs and symptoms of mental illness among local authority employees through mental health awareness sessions, held in partnership with VCS organisations, and promoting the benefits of awareness raising to the wider audience of employers in Sunderland.	Develop as part of the Wellness initiative for employees for the council; materials could then be extended for use in the economic forum	Julie Gray (Head of Community Services) working with Economic Forum	March 14	🟢	Health Champion modules have been developed that contribute towards raising awareness. These modules are available to all SCC employees to access as well as the broader population of Sunderland as part of the Health Champion Programme
D	To investigate an approach that ensures that all directorates operate in a way that is complementary to the access pathways to mental health services or support for potentially any individual coming into contact with local authority services, including the council website.	Ensure the council operating model for accessing the Council through the CSN has information relating to pathways for mental health services or support. Good information and advice should be part of that as standard	Lennie Sahota (Head of Personalisation)		🟢	Complete and operational
		Work with NTW to ensure the Council access routes are complementary to the recently developed Initial Response Team		May 14	🟢	Completed. Enquiries to the Council are received at Customer Services Network who then refer mental health queries directly to the point of access at the NTW Initial Response Service.
E	That the People Services Directorate looks at how it can actively involve frontline staff and	We have recently developed a plan with partners to develop a MH strategy for Sunderland. Engaging	Lennie Sahota (Head of		🟢	Completed. The integration agenda and MH PCP work both

HHAS Scrutiny Panel: Accessing Mental health Services In Sunderland: Policy Review recommendations 2012/13

	service users in future service design and delivery of mental health services.	staff and service users and carers in that work will be central to it.	Personalisation) Working with CCG and other partners			have and continue to encompass the inclusion of service users, carers and staff. Further, there is a Mental Health Programme Board chaired by the CCG which includes representation from the voluntary sector and user led groups which enables consideration of service user views within Mental Health development within the city.
F	That the Health, Housing and Adult Services Directorate monitor the appropriate use of the Government's additional funding prescribed for the expansion of the Improved Access to Psychological Therapies programme through the Council/CCG Joint Commissioning Group	The Joint Commissioning Group will include the recommendation within its work programme and monitor the use of funding reporting to the Scrutiny Committee as required	Graham King (Head of Strategic Commissioning) on behalf of JCG	September 2013	🟢	The Joint Commissioning Board receives regular reports from key programme boards; including MH Programme Board where the responsibility for IAPT services sits.

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	**0**	**0**	**7**	**7**

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
a)	All councillors to be fully engaged in the emerging public health agenda by being given both the skills and understanding of how to facilitate effective interventions in a public health framework.	People Boards to consider public health responsibilities, ensuring health inequalities and how these will be addressed at a local level. Consultation events held on development of Health Strategy priorities / Workshop held : improving life chances	Allison Patterson/ Nonnie Crawford Karen Graham	Feb 2014 Complete	●	Joint Health & Wellbeing Strategy now in place and being delivered through the Health and Wellbeing Board
b)	Robust local accountability structures should be developed for all relevant aspects of health and wellbeing decision-making and delivery.	Amendments made to the Council Constitution to detail procedure rules for HWBB (March 2013) Ongoing dialogue re joint commissioning with CCG	Karen Graham /Rhiannon Hood	June 2013	●	Constitution includes governance arrangements for Health & Wellbeing Board.
c)	The joint health strategy should demonstrate a tie in with community resilience at a time when our 'assets' are under serious threat of being destabilised by external factors.	The design principles of the Strategy have been closely aligned to the community resilience plan and will guide the support and development of assets to improve resilience in communities and individuals	Vince Taylor	Complete	●	Health and Wellbeing Board overseeing implementation of the Joint Strategy
d)	The local asset base should be increased by growing the number of Health Champions and maximising the use of community assets and settings to deliver health and well-being services.	Develop and implement plan for expanding Health Champions in under-represented areas and in neighbourhoods of greatest need. Develop new service specifications for health and wellbeing services that maximise the use of community assets and settings	Gillian Gibson Graham King/Gillian Gibson	Feb 2014 Dec 2013	●	The Health Champion Programme is now embedded in the new Integrated Wellness Service.
e)	A protocol for working together should be developed between key stakeholders.	Public Health, Wellness & Culture Panel to develop	Karen Brown	June 2013 Complete	●	Protocol designed and approved by Health & Wellbeing Board, authorised by all Board member

Page 1 of 2

						organisations
f)	Public health and regulatory staff should work together to explore what the regulations will allow in terms of health benefits.	One public health transformation workshop has been held to examine joining up regulation and public health	Gillian Gibson/Tom Terrett	Feb 2014	🟢	A workshop has been held and actions are being taken forward to develop new processes.
g)	Explore the integration of health impact assessments and equality analysis.	The Healthy Cities Phase 5 programme focuses on integrating health impact assessments	Gillian Gibson	Feb 2014	🟢	A draft framework for Integrated impact assessment has been developed but a process needs to be developed to ensure that there is value added to key decisions.

Responsive Services and Customer Care Scrutiny Panel: Reducing Reoffending: Policy Review recommendations 2012/13

Review Progress Summary				
● not on schedule	● on schedule	● undeliverable	● achieved	Total
0	1	0	9	10

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That the Council identifies ways in which existing housing related support can be better utilised, and that the intelligence currently being gathered through the Council's Gateway informs housing related support commissioning intentions in 2014, specifically taking account of accommodation issues for offenders and particularly women offender.	Ongoing monitoring of the Gateway outcomes to inform the commissioning intentions of the Council for the re –commissioning of Housing Related Support services in 2014.	HHAS Head of Strategic Housing / HHAS Lead Commissioner	April 2014	●	The tender process of Housing Related Support has been progressing on schedule with the new contracts commencing from June / July 2014.
B	That key policies in relation to housing, including the Housing Strategy, the Strategic Tenancy Policy and the Hostel Strategy have a specific focus on the accommodation needs of offenders informed by intelligence.	The accommodation needs of offenders have been included within the Hostel Strategy action plan informed by intelligence gathered from the Partnership Strategic Intelligence Assessment (PSIA). This work will continue to be overseen by the Hostel Strategy Working Group with particular focus on Camrex House and the Norfolk Hotel. The City Housing Strategy will capture the needs of vulnerable groups including offenders.	P&N, Safer Communities Officer P&N, Safer Communities Officer	Complete July 2013	● ●	The Hostel Strategy working group has completed the transition of residents from Camrex House (Feb 2014) and there is on-going work with partners, inclusive of hostel owners to ensure that the needs of those residing in the hostels are met. Initiatives around hospital discharge and Making Every Adult Matter are ensuring that a co-ordinated approach to presenting issues is being adopted which will help address behaviours and improve outcomes. The refresh of the Housing Strategy has been delayed however the key area of reducing concentration of hostel

Responsive Services and Customer Care Scrutiny Panel: Reducing Reoffending: Policy Review recommendations 2012/13

						accommodation remains a key area of work. Work with new probation arrangements in 2015/16 (Sedexo have recently commenced their contract from the Ministry Of Justice to deliver the new Community Rehabilitation Company element of probation services working with lower risk offenders) will continue.
C	That the Council works with the city's private landlords to meet the accommodation needs of offenders.	Build on existing relationships with Private Landlords to enhance the private rented offer for offenders specifically by – • Presenting the need to the Private Landlord Forum to try and engage with a small number of landlords to develop an approach. • Work in partnership with all relevant parties to develop an agreed application process to minimise risk • Pilot a number of tenancies to build confidence in this new approach.	HHAS Access to Housing Manager / Offender Accommodation Officer	Ongoing	🟢	Work continues with Private Landlords in relation to accommodating offenders. A presentation was provided to the Private Landlord Forum in relation to Lets Help You which is an advertising tool for their properties and on the back of this individual agreements have been made with particular landlords. This will be an ongoing action as the accommodation needs of each offender has to be considered on a case by case basis.
D	That the Safer Sunderland Partnership develops the appropriate channels and mechanisms to strengthen and embed its influencing role with the:- (i) Health and Wellbeing Board;	The membership of the Health and Well-Being Board includes The Leader of the Council who is also a member of the Safer Sunderland Partnership. Links are to be strengthened over the coming months to ensure the correlation between crime and disorder and	P&N, Lead Policy Officer, Community Safety	June 2013	🟢	Complete – cross membership of both Boards is now enhanced with the Director of People Directorate joining the Safer Sunderland Board and the Director Of Public Health remaining a member of both Boards. Recommendations from the Domestic Violence Health Needs Assessment in

Responsive Services and Customer Care Scrutiny Panel: Reducing Reoffending: Policy Review recommendations 2012/13

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
	and (ii) Clinical Commissioning Group;	health are considered within relevant policies and strategies. The SSP will engage with the Joint Commissioning Group to identify the most effective ways to build relationships with CCG's.	P&N, Lead Policy Officer, Community Safety	February 2013	🟢	2013 were accepted by both Boards. Complete – the CCG have engaged actively with Safer Sunderland Partnership since undertaking the lead responsible authority role for the NHS following the transfer of Public Health to the City Council.
E	That the Safer Sunderland Partnership improves the transition from custody to the community by:-					
	(i) Ensuring effective relationships with all prisons in the NE.	The SSP will continue to work with ANEC & NOMS on improving the relationship between the local authority and NE prisons identifying gaps in delivery.	P&N, Safer Communities Officer	June 2013	🟢	This recommendation has largely been superseded due to significant reform. The ANEC work has been superseded given the scale of change to the agenda with external contracting of some prisons including HMP Northumberland in 2014 and the reform of Probation Services into a new National Probation Service and externally contracted Community Rehabilitation Company. Building relationships with new providers is key in 2015/16 and elements of the ANEC plan can be reviewed in light of these changes. SSP retains a responsibility around reducing reoffending though now has no full time dedicated resource. The Safer Sunderland Board in April 2015 gave direction to focus on local arrangements regarding joint working in relation to

Responsive Services and Customer Care Scrutiny Panel: Reducing Reoffending: Policy Review recommendations 2012/13

							prolific offenders.
	(ii)	Utilising the IOM Prison Officer roles of Durham and HMP Northumberland, to improve information sharing and links with community provision.	Meeting to be arranged with both IOM Prison Officer Links to develop an improved information sharing pathway.	P&N, Safer Communities Officer, HMP Durham, HMP Northumberland	February 2013	🟢	Completed – effective information sharing between prison estate and Sunderlands Integrated Offender Management Unit in place
	(iii)	Improving accommodation outcomes for offenders through the 'Through the Gate' project.	Sunderland to nominate a rep for the Through the Gate steering group to ensure the needs & views of Sunderland are fully represented. To establish clear operational procedures between Through the Gate and the Access to Housing Team to enable the most successful outcomes for offenders returning to Sunderland.	HHAS Access to Housing Manager / Offender Accommodation Officer	July 2013	🟢	The Offender Accommodation Officer was nominated to become part of the Through the Gate Steering Group and was involved until commencing Maternity Leave in October 2013. Since that time the Access to Housing Manager has fed into the Regional Homelessness Manager's Meeting as the commissioner of Through the Gate. This has been achieved by gaining regular performance reports from Through the Gate providing scrutiny to its impact and success.
F		That the Safer Sunderland Partnership and the Council seek to improve outcomes for women offenders, in particular accommodation and accommodation related support.	The needs of women Offenders will continue to be addressed as part of the Women Offenders Sub-group Led by Probation and overseen by the Reducing Re-Offending Delivery Network.	Probation, Director of Offender Management	July 2013	🟢	Complete – transferred into ANEC action plan and considered in retendering of key housing support contracts due for implementation in July 2014.
G		That the Safer Sunderland Partnership and the Council ensures it fully understands the needs of current and future veteran offenders by engaging with relevant bodies and	SSP to strengthen links with the HHAS Veterans Champion to identify any issues regarding offenders.	P&N, Safer Communities Officer, HHAS Head of Strategic Housing	August 2013	🟢	Head of Housing and Community Living has an identified lead role with veterans organisations through the Armed Forces Network and the Veterans' Forum ensuring that intelligence is gathered and appropriate actions taken.

organisations.					A Veterans' Centre is being progressed with a third sector provider which will provide accommodation and support for veterans.

Skills Economy and Regeneration Scrutiny Panel: Delivery of the Work Programme – Policy Review Recommendations 2012/13

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	2	0	5	7

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That the Council and Work Programme providers continue to develop formal and informal channels of communication in order to inform and influence the delivery of the Work Programme for the benefit of Sunderland residents.	Council representatives will continue to participate in/provide input to the regional working group, facilitated by ANEC, which forms the primary link with the Work Programme prime contractors at a strategic level. At an operational level, continue to maintain regular contact with prime contractors and their sub-contractors, to provide intelligence on current and future job opportunities to inform Work Programme delivery.	Karen Alexander, Employment and Training Manager	March 2013	●	Officer representatives from the Policy team continue to attend the regional working group facilitated by ANEC. On an operational level, regular contact is made with the Prime and Sub contractors of the Work Programme, in order to identify suitable candidates for vacancies which come to the attention of Council officers (for example as a result of Social & Economic clauses in contracts).

Skills Economy and Regeneration Scrutiny Panel: Delivery of the Work Programme – Policy Review Recommendations 2012/13

B	That the DWP be encouraged to produce regular and tailored performance data for the Council and its partner organisations at city-wide level and across Regeneration Areas	Agreement will be reached on the terms of the Data Sharing Agreement with the Work Programme prime contractors, Avanta and Ingeus. Officers within Strategic Policy and Performance Management will incorporate Work Programme data returns within the Quarterly Performance Report for Aim 4 Group of the Economic Leadership Board.	Karen Alexander, Employment and Training Manager Head of Performance SPPM	Sept 2013 Dec 2013	🟢	Following advice from legal, it was decided Sunderland Council would not sign the Data Sharing Agreement with the prime contractors. The benefits of doing so were not clear and the risks relating to compliance were viewed as being too high. Performance data is published with sufficient regularity and depth to suffice the current needs of the Economic Leadership Board members.
C	That Work Programme providers look to develop their role and involvement in local economic policy at a strategic level – for example through involvement in the North Eastern LEP, the development of Sunderland Economic Masterplan and the Local Strategic Partnership	This recommendation be communicated to the providers Members of Aim 4 Group will consider how best to integrate the activities of the Work Programme prime contractors into strategic planning and the shaping of local economic policy, as part of the Employment Strategy.	Karen Alexander, Employment and Training Manager Vince Taylor, Head of Strategy, Policy and Performance Management (via the Chair of Aim 4 group)	April 2013 July 2013	🟢	This recommendation was communicated to the Work Programme prime and sub-contractors operating in Sunderland and welcomed by them. Providers joined discussions at Aim 4 Group which were helpful to its work. Economic Leadership Board currently reviewing sub group structuring and replacing the four Aim Groups with three Result Groups.
D	That the Council examines ways of informing Work Programme providers of potential new	Council officers will continue to participate in regular network meetings with Work Programme	Karen Alexander, Employment	March 2013	🟢	Information continues to be cascaded.

Skills Economy and Regeneration Scrutiny Panel: Delivery of the Work Programme – Policy Review Recommendations 2012/13

	investment in the city at the earliest possible opportunity in order that they are able to prepare for potential sectors of employment growth	representatives where information about inward investment opportunities and growth sectors is cascaded.	and Training Manager			
E	That the Council looks to continue to do everything in its power to maximise local employment opportunities through the operation of its procurement process	When relevant to the subject matter, social value benefits will be considered for services (specifically over the EU threshold) at the pre-procurement stage and during the procurement. A systematic tool to be developed to consider social value when setting evaluation criteria, contract scope and performance regimes. Colleagues within Business Investment and Corporate Procurement will work closely with commissioners to ensure a value for money approach is followed when assessing contract opportunities.	Karen Alexander, Employment and Training Manager	Sept 14	🟢	A systematic process is in place to consider the suitability of including a requirement for Social & Economic clauses to be built into procurement contracts. A current example of this is the building of the new Washington Leisure Centre.
		Led by the Aim 4 Group, steps will be taken to encourage other partners in the city to incorporate Social and Economic clauses in development contracts.	Vince Taylor, Head of SPPM (via the Chair of Aim 4 Group)	Dec 2014		See D above re Economic Leadership Board review of sub group structures.
F	That the Council as a major employer in the city continues to maximise the use of work placements	Consideration will be given to how a greater number of work experience placements can be offered across all Council directorates, to benefit both NEET young people and	Dave Rippon, Head of HR and OD	June 2014	🟢	Apprenticeship vacancies have been created under Responsive Local Services, where it is planned 36 new apprentices will be recruited in March-April 2014.

Skills Economy and Regeneration Scrutiny Panel: Delivery of the Work Programme – Policy Review Recommendations 2012/13

		unemployed adults, helping them to move closer to employment. Opportunities for work experience within the Council will be shared with Jobcentre Plus, so that suitable individuals can be identified to take up the placements.				This is the second intake of apprentices into this area and consideration should be given to spreading this good practice across other service areas.
G	That the Work Programme providers continue to develop their links with local businesses and look to work more closely with SMEs in the city.	The Council will continue to maintain an understanding of the Work Programme 'offer' for employers and will encourage the business community, particularly SMEs, to make contact with Work Programme providers in order to take up that offer.	Karen Alexander, Employment and Training Manager	Feb 2014	🟢	The broad range of employability support services which operate across the city is frequently discussed with local businesses, to help with their recruitment needs, as part of the general advice and support given by the Business Investment Team.

Skills Economy and Regeneration Scrutiny Panel: Delivery of Apprenticeships in Sunderland – Policy Review Recommendations 2012/13

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	2	0	6	8

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That the Council examines the measures available to increase apprenticeship opportunities, particularly higher level apprenticeships, in key sectors of the city's economy	(i) Update the Memorandum of Understanding (MOU) and associated Action Plan between the National Apprenticeship Service (NAS) and Sunderland City Council	Stephanie Rose, Associate Policy Lead, SPPM	Sept 2013	●	After due consideration of the action, it was felt to be more appropriate to strengthen the working relationship between the National Apprenticeship Service (NAS) and Sunderland City Council through their involvement in relevant groups and programmes, namely the Participation and Engagement Group and Work Discovery Sunderland.
		(ii) Organise and host Sunderland City Council Supply Chain Event	Glenda Herron, Acting Head of Corporate Procurement	April 2014	●	Corporate Procurement together with the North East Procurement Organisation (NEPO) will be hosting two supply chain events in April & May 2014. These events will bring together contractors and potential local sub-contractors to discuss opportunities available and apprenticeships.
		(iii) Council representatives will continue to participate in/provide input to the regional working group, which is responsible for establishing the North East LEP area Apprenticeship Hub	Stephanie Rose, Associate Policy Lead, SPPM	Sept 2013	●	SPPM officer has attended meetings of the NELEP Apprenticeship Hub Steering Group. The NELEP Apprenticeship Hub has now appointed a co-ordinator and will shortly go out to tender for the research contract to

Skills Economy and Regeneration Scrutiny Panel: Delivery of Apprenticeships in Sunderland – Policy Review Recommendations 2012/13

						support the development of the NELEP Apprenticeship Hub. The completed Apprenticeship Hub Research (March 2015), recommends the expansion of the current Apprenticeship Hub model to a wider Apprenticeship Growth Partnership (AGP) charged with delivering the following priorities: Priority 1: A substantial activity programme to improve school engagement in Apprenticeships Priority 2: A sustained programme to improve the work-readiness of young people Priority 3: Information for employers new to Apprenticeships Priority 4: Enhanced marketing and PR campaigns to support increased take-up and quality
B	That the Council and the National Apprenticeship Service (NAS) agree a set of actions that are geared to meeting the specific needs of the city	(i) Update the Memorandum of Understanding (MOU) and associated Action Plan between the National Apprenticeship Service (NAS) and Sunderland City Council *(See also Ref. a (i))*	Stephanie Rose, Associate Policy Lead, SPPM	Sept 2013	🟢	After due consideration of the action, it was felt to be more appropriate to strengthen the working relationship between the National Apprenticeship Service (NAS) and Sunderland City Council through their involvement in relevant groups and programmes, namely the Participation and Engagement Group and Work Discovery Sunderland.

Skills Economy and Regeneration Scrutiny Panel: Delivery of Apprenticeships in Sunderland – Policy Review Recommendations 2012/13

| C | That further work be initiated to understand the Post-16 Destinations of learners in the city | (i) Monitor and review the progress and outcomes being made in delivering priority outcomes and targets including:

Raising participation in line with government targets for 2013 and 2015;

Increasing young people in Education, Employment and Training (EET);

NEET and Not Known figures

Key Stage 4 and Key Stage 5 student destinations (as presented in Department for Education Destination Measures tables);

Apprenticeship opportunities; and

Youth employment data | Dave Barber, Participation and Engagement Manager, People Directorate *(via the Chair of the Participation and Engagement Group)* | March 2014 | 🟢 | Progress and outcomes being made in delivering priority outcomes and targets are regularly reported at the Participation and Engagement Group.

The next set of Apprenticeship data will be published in April 2014 and an updated review of Sunderland Apprenticeship performance in April will be produced for further consideration at the May 2014 PEG meeting.

Following the March 2014 PEG meeting, a group is being convened (lead by Sunderland University) to review the level of demand potential for Higher Apprenticeships (L4).

The University of Sunderland is currently going through the required process to be able to offer the new Degree Apprenticeships and will know if they are successful by mid-April 2015 |
| | | (ii) Officers within Strategy Policy and Performance Management (SPPM) will incorporate Post-16 Destination Measures data returns within the Quarterly Performance Report for the Participation and Engagement Group of the Education Leadership Board. | Kelly Davison-Pullan, Lead Officer for Corporate Performance, SPPM | | 🟠 | The Education Leadership Board is currently developing its strategy and is not yet examining performance. |

Skills Economy and Regeneration Scrutiny Panel: Delivery of Apprenticeships in Sunderland – Policy Review Recommendations 2012/13

D	That the Council confirms its continuing support for the inclusion of Social and Economic Clauses into its planning and procurement processes	(i) When relevant to the subject matter, social value benefits will be considered for services (specifically over the EU threshold) at the pre-procurement stage and during the procurement. A systematic tool to be developed to consider social value when setting evaluation criteria, contract scope and performance regimes. Colleagues within Business Investment and Corporate Procurement will work closely with commissioners to ensure a value for money approach is followed when assessing contract opportunities. *(See also Ref. (e) - Work Programme: Policy Review Action Plan)*	Karen Alexander, Employment and Training Manager and Procurement Lead - Glenda Herron, Acting Head of Corporate Procurement	Sept 2014	🟢	Corporate Procurement has produced a Social Value Quick Guide with example clauses and key stakeholders. Key stakeholders will be approached during the pre-procurement stage to help identify Social Value benefits and outcomes which can be incorporated into the procurement documentation.
		(ii) Led by the Aim 4 Group, steps will be taken to encourage other partners in the city to incorporate Social and Economic clauses in development contracts.	Vince Taylor, Head of SPPM *(via the Chair of Aim*		🟠	The Aim 4 Group of the Economic Leadership Board (ELB) undertook some work on this action in engaging partners. Since then, the ELB have reviewed its sub group structure and will

Appendix P

Skills Economy and Regeneration Scrutiny Panel: Delivery of Apprenticeships in Sunderland – Policy Review Recommendations 2012/13

		(See also Ref. (e) - Work Programme: Policy Review Action Plan)	*4 Group)*		seek to reallocate this responsibility as part of that.

Children's Services Scrutiny Panel: Increasing Young People's Involvement in Service Design and Delivery: Policy Review recommendations 2012/13

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	0	0	8	8

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That Children's Services explore the potential for an information sharing support mechanism between schools to share examples of best practice in relation to the operation and performance of school councils and also look at the development of links between school governing bodies and young people	• Update provided to all schools at Headteacher Termly meetings in June regarding progress on the participation agenda. • Seek nominations from schools to be involved in best practice review.	B Scanlon B Scanlon	June 2013 June 2013	● ●	Complete Participation and engagement officer regularly attends briefings to inform schools about participation and engagement, and opportunities that are available and to offer assistance and support to school councils and student voices. Also attends at school assemblies to talk about schools and young people being involved. An annual meeting for all school councils and Student Voice groups to come together to share best practice.
		• Encourage governing bodies to consider how they involve children and young people representatives in governance matters. A report to be included in the next Termly	A Rowntree	Sept 2013	●	This happens regularly in schools through links between Schools Council and Governing Bodies. A reminder will be included in the Autumn 2014 Agenda booklet.

Children's Services Scrutiny Panel: Increasing Young People's Involvement in Service Design and Delivery: Policy Review recommendations 2012/13

		Agenda Booklet.	J Wheeler/A Rowntree	May 2015	🟢	Completed and is being considered as part of the work programme for CTAN in the coming year.
		• Invite Governor representatives to future meeting of the Children's Trust Advisory Network (CTAN) to seek their views as to how young people would wish to be engaged by Governing Bodies.				
B	That Scrutiny Members consider the possibility of the Scrutiny Committee or representative Scrutiny Panel being actively involved in Takeover Day 2013	• Participation and Engagement Officer to ensure that an invitation is forwarded to Scrutiny Committee to participate in Takeover Day 2013	J Wheeler / J Peuch	November 2013	🟢	Complete – scrutiny members were actively involved in the 2013 Takeover Day.
C	That consideration is given, by the Communications Team, to the appointment of a Participation and Engagement Champion to promote and support the work of participation and engagement within the Communications Team;	• Corporate Affairs and Communications to provide a comms rep. Name tbc once comms team reorganised under People, Place, Economy.	S Meredith	November 2013	🟢	Complete
D	To explore how the views of young people can be best represented in the statutory governance arrangements of the Sunderland Health and Wellbeing Board and the Sunderland Safeguarding Children's Board	• Invite representatives of both Boards to work with CTAN to develop links to ensure that their views can be taken into account when decisions are being made.	J Peuch	Dec 2013	🟢	Complete – CTAN has worked with the SSCB, Healthwatch and the Health and Wellbeing Board to help develop their strategies/policies.
		• Sunderland Safeguarding Children Board to work with Young Inspectors to assess the effectiveness of their processes.	J Peuch	June 2013	🟢	Complete –

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
1	0	0	8	9

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
	That the council:-					
A	Undertakes to work with partners to consider the way in which the approach to domestic violence is coordinated strategically across the city	Meet key individual partners to reclarify policy and strategic co-ordination arrangements engage with the Specialist Domestic Violence Court to identify if support for performance improvement is required	Stuart Douglass	September 2013	● ●	Complete, individual discussions completed and followed with paper on current arrangements presented to the Domestic Violence Partnership in March 2014 Complete, the Councils Lead Policy Officer attends the Specialist Domestic Violence Court steering group providing a link to the Sunderland Domestic Violence Partnership and Safer Sunderland Partnership. This will continue throughout 2015/16.
B	Considers how it can raise the awareness of frontline staff and ward councillors across the city to improve signposting to domestic violence services for victims	Produce frontline staff and member briefing note Promote the online training facility Make available training/seminar for members	Stuart Douglass	November 2013	● ● ●	In 2015 a briefing in relation to the first Domestic Homicide Review was circulated. The briefing highlighted learning and key resources Completed – facility was promoted to all members in November 2013 and 11 members registered to complete it The seminar remains outstanding as an action. A second Domestic Homicide Review will be published in 2015 and it is planned to offer a member briefing session at this time to highlight key lessons and learning from the review and an update on service provision.

	That the Safer Sunderland Partnership:-					
C	Reviews how domestic violence crime is reported to ward councillors and local people in community forums	Statistics and performance data to be made available at area level Written report to be made available at area level every 6 months	Stuart Douglass	July 2013 September 2013	🟢	Ongoing, statistical data has been submitted and the report format finalised. Close.
D	Delivers the improvement activities detailed within the Safer Sunderland Partnership Delivery Plan within the specified timescales as follows:-					
	(i) Improve information sharing between healthcare services and domestic violence providers by raising awareness of domestic violence amongst a range of health professionals and strengthening the linkages between health and domestic violence	Review current arrangements and develop improvement plan	Stuart Douglass	September 2013	🟢	Complete - Clinical Commissioning Group have undertaken work with healthcare services to improve information sharing in relation to domestic violence. Domestic Violence is included in the Level 3 Safeguarding Children Training and in "time out" sessions to GPs and their staff in Safeguarding Adults training. 2 safeguarding symposiums also held in 2013 with City Hospitals staff.
	(ii) Engages with schools and young peoples services to improve young people's awareness of the warning signs around abuse in teenage relationships and the support available;	ii) Pilot the 'I have the right' film and resource pack in each area of the city, evaluate the pilot and amend the resource pack; then roll out the resource pack to all schools in the city and relevant non-school settings; and promote the resource widely to a variety of key audiences within Sunderland and the wider region	Kelly Henderson / Julie Smith	September 2013	🟢	Complete – pilot completed and resources now live on Northumbria Police e-beat website and rolled out to all secondary schools via designated safeguarding leads. The pack has also been promoted regionally via the domestic violence co-ordinators and other networks.

	(iii)	Utilises the findings of the Health Needs Assessment undertaken by the PCT to enhance its understanding of domestic violence in the city, map current provision and inform future service planning and commissioning intentions, having particular regard to the needs of BME victims	consider the Health Needs Assessment when complete and ensure findings are considered by the Safer Sunderland Partnership Board and incorporated into the Partnership Strategic Intelligence Assessment 2013.	Stuart Douglass	December 2013	●	Complete – the findings of the Health Needs Assessment were incorporated into the Partnership Strategic Intelligence Assessment and have also been used to refresh the Joint Health Needs Assessment.

City Services Scrutiny Panel: Waste and Recycling in Sunderland – Policy Review Recommendations 2012/13

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	3	0	8	11

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That further update reports be provided based on the findings of the investigative research. The investigative research will allow an intelligence led approach to the formulation of a plan for future waste and recycling communications activities	Procurement exercise to appoint an agency to investigate the attitudes and behaviours of Sunderland residents towards recycling and waste, to inform future communications strategies. All submissions to include a schedule of research activities aimed at fulfilling the objective of the brief.	Communications Manager	April - June 2013	●	It has been necessary to move the completion date of communications plan back and all dates that follow on from this. The plan is intended to evolve and accommodate the influence of external and internal factors on the service. The intention in delaying the final plan is that we capture the current climate and maximise activity impact.
		Inception meeting		June 2013	●	
		Quantitative engagement and data collection – street survey and online survey		July/ August 2013	●	
		Qualitative engagement and data collection – Focus groups		August/ Sept 2013	●	
		Data collection and analysis		Sept 2013	●	
		Research findings – report and presentation		Oct 2013	●	
		Formulate a communications plan to include key actions and dates - directed by research findings and budget limitations		April 2014	●	A communications plan based on research findings and was developed in October 2014.

City Services Scrutiny Panel: Waste and Recycling in Sunderland – Policy Review Recommendations 2012/13

| B | That the delivery of the new communications campaign be monitored including activities on promoting awareness and involvement in recycling and on tackling inappropriate waste presentation and fly tipping | Deliver phase 1 of communications campaign | Communications Manager | June 2014 | 🟢 | Communications phase 1 activities to measure baseline information. commenced in all Sunderland central areas in November 2014.

Phase1 of the plan monitored existing levels of participation, quality of recycling presented and incidents of inappropriate waste presentation. It also reflected a changed the approach to communicating with residents taking into account limitations in resources, identifying areas for intervention and use of different communications approaches, including door stepping face to face visits. This has improved levels of resident engagement,and reinforce their recycling knowledge and skills.

Phase 2 of the plan, building on the evidence collected started in March 2015, in the areas of Roker, Southwick, Millfield, Pallion and Hendon as areas where there is most potential to improve resident engagement and recycling collected. The face to face approach in phase 1 has been supplemented by a resident recycling incentives scheme.

The recycling incentives scheme will be extended to include communities across regeneration areas in 2015/16. |

City Services Scrutiny Panel: Waste and Recycling in Sunderland – Policy Review Recommendations 2012/13

		Seek feedback and opinion from residents and Members on key actions undertaken and engage Area Place Boards.		Sept 2014	🟡	Feedback from residents engaged in phase 1 has been captured which has been positive. Reports regarding the phase 2 scheme will be delivered to place boards summer 2015.
					🟡	

		Monitor and measure the impact of communications campaign through tangible indicators to include:
		    i. Recognition of council messages
		    ii. Feedback from residents
		    iii. General monitoring of participation
		    iv. % increase in tonnage recyclate collected
		    v. % reduction in reported fly tipping incidents
		    vi. Success evaluation – Annual review
				March 2016		

City Services Scrutiny Panel: Waste and Recycling in Sunderland – Policy Review Recommendations 2012/13

| C | That further reports be provided on the progress on the delivery of a recycling incentives scheme, the impact on awareness and participation in recycling services and the impacts on recycling performance | 1. Recycling Incentives Scheme
  i. Intelligence gathering
  ii. Formulate campaign – directed by research findings and recommendations
  iii. Campaign launch and subsequent communications activities
  iv. Impact evaluation of activities undertaken to date | Communications Manager and Waste Manager | i. July 2013 – April 2014
ii. April – May 2014
iii. June 2014 – March 2015
iv. April – June 2015 | 🟢 | Information is being gathered from the previous incentives scheme funded by DEFRA and operated regionally in which the Council participated to inform on the benefits of a new scheme operated by the Council. The old scheme we participated in which ended late 2013 targeted specific items ie aerosols. Indications are that the scheme did raise awareness of recycling. Tonnage of blue bin recycling collected increased only slightly in 2013/14 over the previous year. Some resident awareness (how people use the bin) needs to be addressed by the new communications plan. |
| | | General Periodic Reporting
  i. Update report followed by six monthly report updates (for the period of the campaign) | Communications Manager and Waste Manager | April 2014 to March 2016 | 🟡 | |

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That Public Health Strategy looks to monitor the implementation and impact of the School Food Plan reforms on local schools and that this is complemented by an enquiry to the Secretary of State for Education as to how this will be undertaken at a national level.	Provide analysis of the impact on meals take-up from September 2014	Director of Public Health / FM Business Development Manager (Consortium Schools)	Feb 15	●	The uptake of Universal Infant Free School Meals (UIFSM) for Consortium schools to date is 87.9% (the national assumed take up rate was set at 87%). Overall uptake to date in Consortium schools is 67.2% (compared to end of year 2013/14 levels of 55.82% - as benchmarked by the Association of Public Service Excellence)
		Look at the impact of the School Food Plan on service provision in Schools	Director of Public Health / FM Business Development Manager (Consortium Schools)	Feb 15	●	All operational expectations of the School Food Plan have been realised in Consortium schools, e.g. full introduction of UIFSM; implementation of new School Food Standards from January 2015
		Look at how changes are communicated with schools and parents	Director of Public Health / FM Business Development Manager (Consortium Schools)	Feb 15		In Consortium schools new menus (which met the revised School Food Standards) were issued to schools in July 2015 to cascade to parents either via hard copy or electronically

		Provide a summary and overview of the implementation and impact of the school food plan within consortium schools to scrutiny and Public Health	Director of Public Health / FM Business Development Manager (Consortium Schools)	Feb 15	●	This was undertaken in July 2014
		That the Scrutiny Committee enquire to the DfE as to the monitoring arrangements around outcomes from a national level	Scrutiny Officer	Sept 14	●	Completed.
B	That Public Health and Planning teams within the local authority look to conduct joint training sessions related to Health Impact Assessments (HIA) considering the practicalities to incorporating HIAs within the planning process	• Investigate the work being undertaken by other local authorities in relation to fast food licensing/planning • Establish health impact assessment (HIA) training for public health and planning teams and agree a process for incorporating HIAs into the planning process. • Public Health professionals to identify councillors and lead officers to act as champions on the issue and liaise with planning officers.	Director of Public Health / Interim Head of Planning	Sept 2015	●	Initial work has commenced with planning teams through the Active Travel Group, including early discussions about how Public Health can be more involved in planning processes. A watching brief being kept on activity in the area of food licensing / planning in other local authority areas. Local champions still to be identified.
C	That data gathered from the National Childhood Measurement Programme (NCMP) along with intelligence gathered from the impact of other obesity and lifestyle	• USE NCMP data to identify high prevalence areas for targeted interventions • Develop action plan with Childhood Obesity Group to identify additional capacity and	Health Improvement Practitioner/ Public Health Lead	Ongoing – review progress April 2015	●	• NCMP annual data released for 13/14, will be available at ward level from June 2015. Previous data being used to target activity with primary schools in East

	programmes, including LAF Programmes and community based or led services across Sunderland, is utilised to model and target intervention resources effectively	• Use findings from the review to support development of action plan • Use data from weighing and measuring pilots carried out by the LAF team within primary and secondary schools to look at emerging data trends				and West, which will include proactive follow up from the LAF team for children identified as overweight or very overweight at reception in 14/15 cohort. • Childhood Obesity Group continues to meet bimonthly and are due to refresh their action plan. A key action identified is a training programme for a range of staff on child obesity. • Teen specific programme of LAF continues and the team have been into all secondary schools.
D	That Public Health Strategy explore and consider ensuring that key policy documents including the Joint Strategic Needs Assessment, the Joint Health and Wellbeing Strategy, other local needs assessments and strategies, and where appropriate local area committees and frontline councillors consider and take into account realistic opportunities to increase active travel	• Area Committees, People & Place Boards with assistance from Public Health People and City Services Staff consider actions that are beneficial to the access to healthy food and active travel agenda • Look at how strategic policies and plans can support active travel • Ensure active travel is considered alongside other intervention and outcomes are identified through the	Director of Public Health/Area Committees	June 2015	●	• People boards currently identifying health priorities for the coming year. Health profiles being shared with People Boards and CCG locality groups as requested, which includes obesity data. If identified as a priority issue work will be supported by the Public Health Strategy Team. • Active Travel Group convened and meeting. Initial mapping of current and proposed plans underway, to identify

		JSNA process • Ensure that active travel projects are rigorously evaluated.				opportunities to support active travel.

Appendix

HHAS Scrutiny Panel: Supporting Carers in Sunderland: Policy Review recommendations 2013/14

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
1	1	0	2	4

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That the Adult Partnership Board through the Carers Implementation Group considers the development of the frontline councillor role to enable members to identify and signpost carers in their local communities to the appropriate support or organisation.	• Sunderland Carers' Centre to produce a regular Councillors' Update on National and Local Carers' Issues.	Graham Burt	On-going	●	The first E-Bulletin went to all Elected Members in Nov 2014 [Carers Rights Day] The next planned bulletin will be circulated in Carers Week 2015. City Hospital Sunderland (CHS) regularly contribute articles to the carers centre newsletter. A CHS 2014/15 Carers Annual Report will be produced in April/May 2015. **Achieved and ongoing**
		• Whole Family Approach presentation to be given at a Member Development Session	GB/Pauline Forster	Date TBC		Sunderland Carers Centre are now collecting data as to how many Elected Members refer carers into the services available at the Carers Centre.
		• Carers work to be included in the People Services Directorate Management Team programme of work so that updates are included on the Portfolio holders' brief	PF/GB	October 2014	●	Work in relation to Carers is included in the People Services Directorate programme of work so that updates can be provided as part of Portfolio holders' brief. **Achieved and ongoing**

Appendix

HHAS Scrutiny Panel: Supporting Carers in Sunderland: Policy Review recommendations 2013/14

B	That the Adult Partnership board develops, with partners, an awareness raising strategy to ensure carers can be identified as early as possible and that the strategy also promotes the reduction of stigma celebration of the caring role within the City	• Member organisations of the Adults Partnership Board (APB) will commit to raising awareness of carers within their own organisations and progress will be reported to the Board	All partners	July 2014	•	APB member organisations carried out a number of activities to raise awareness of carers to raise awareness of the benefits of being identified as a carer including a 'Time Well Earned Exhibition' showing photographic images of Sunderland carers. The exhibition was on display in the House of Commons and a tweet was received from Sharon Hodgson, MP.
		• A presentation on the carers work and the recommendation to develop an awareness-raising strategy will be delivered to the APB	Graham King/PF	July 2014		
		• An awareness campaign will be launched focusing on raising awareness of the benefits of being recognised as a carer. The campaign will be two-fold, targeting both front-line professionals and carers themselves.	All partners	October 2014		The Head of Integrated Commissioning gave a presentation to the APB on the work of carers. ==Paul Stafford to consider care students at the college doing some work around self-identification.== CHS changed their screen-saver during Carers' Week to raise awareness and encourage self-identification of carers' amongst staff. CHS regularly "tweet" carer related information. The Director of People Services will focus on recognition of Carers in his blog which will also outline the programme of events being held by partner organisations during Carers' Week. Plans for Carers Week in 2015
		• Celebration of Carers of Carers events to be held:Carers with Talent Caring for Carers Awards.	GB	June 2014		

					are – Sunderland Carers' Centre will be holding a Dog Show at their premises in Thompson Park. The dog show will highlight the social isolation of some carers who may feel isolated and lonely due to their caring role. This will also inform the current Scrutiny process around Loneliness and Social Isolation Sunderland Carers Centre will once again launch and co-ordinate the Annual Caring for Carers Awards. The awards recognise professionals who have supported carers in a unique way which has made a difference to the carers life. The Mayor of Sunderland and Portfolio Holder for Adult Services will attend the event organised by Sunderland Carers Centre. **Achieved and ongoing - Carers Week is an annual event and some organisations are already starting to put plans in place for Carers Week 2015 as highlighted above**

Appendix

HHAS Scrutiny Panel: Supporting Carers in Sunderland: Policy Review recommendations 2013/14

C	That the Carers Implementation Group investigates, through its stakeholder membership, methods to improve and maximise data collection from agencies and organisations relating to all carers in the city to build the information base and profile of carers across Sunderland	• Increase the number of carers that have been identified in the city through a range of mechanisms • Analyse the GP Referral Scheme figures, includes young carers, to monitor impact and to inform targeted approaches to recognising carers across different areas of the City	Rachel Lumsden RL/VF	March 2015 May 2015	•	The GP Referral Innovation Scheme has been put in place to improve the identification, registration and support offered to carers within the GP practice to encourage onward referral as appropriate. The outcome of the scheme is to ensure carers are adequately supported in their caring role. 51 GP practices have delivered the scheme, which has seen improvements in their carers registers, how practices identify carers, awareness training for staff, and a better referral system to Sunderland Carers Centre. **Achieved**
					•	Analysis of the GP Referral Scheme to monitor the impact of the approaches used will be undertaken and feedback shared with the Carers Strategy Implementation Group **On schedule**
					•	Sunderland Carers' Centre will be investing in a new ICT system that will improve the data collection to be tailored to reporting outcomes. The new system will be able to identify themes and trends linked to

HHAS Scrutiny Panel: Supporting Carers in Sunderland: Policy Review recommendations 2013/14

						carers. The intelligence gathered will also support carers with timely interventions, including referrals to other partner organisations who will be able to support with the meeting of the carers needs at an earlier stage and help identify any likely additional demands on services/provision in the future. Providing effective interventions at the right time can stop needs from escalating, and help people maintain their independence for longer. The Exercise Referral programme is currently under review and an application for funding to continue the programme has been submitted to the CCG. Once the outcome is confirmed the programme will undergo several changes with the emphasis being on those with long term conditions and reductions in hospital admissions. A question will be added to the referral form to clearly identify carers referred onto the programme. **On schedule**
D	That the Adult Partnership Board	• Develop mechanisms for	All partners	On-going	•	The Carers Reference Group

HHAS Scrutiny Panel: Supporting Carers in Sunderland: Policy Review recommendations 2013/14

seeks to improve involvement with carers through providing the opportunity for carers to influence and comment on policies, strategies and service design and delivery	carers to be meaningfully involved in the early stages of influencing commissioning intentions and service design				already fulfils this function in CHS. The group met regularly during 2014/15. A Carer Centre representative is also a member of the CHS Dementia Strategy Group. A Carer Centre representative has been nominated as a representative on the new Sunderland Autism Partnership Board. **Achieved and ongoing**
	• Carry out an audit of what partner organisations are doing to implement the carers' strategy		September 2014	●	An action plan is in place to identify what partner organisations are doing to implement the carers' strategy. An audit of the actions being put in place and the identification to any gaps in service delivery as not taken place yet. A workshop is being held in April which will include a mapping exercise that will inform any work going forward. The multi-agency Carers' Strategy Implementation Group membership needs be reviewed to ensure that key representatives, including carers, work together to further improve information, advice and support available for carers'. **Not on schedule**

Appendix

HHAS Scrutiny Panel: Supporting Carers in Sunderland: Policy Review recommendations 2013/14

					Consultation with carers to be held during Carers' Week taking a 'wish list' approach.

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	2	0	6	8

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That further work be undertaken to assess evidence from Accident and Emergency in order to identify any areas of the city that may demonstrate a link between the level of crime and disorder and the number of licensed premises	1. Liaise with Sunderland Royal Hospital to request relevant data. 2. Analyse data to determine any links. 3. Report findings to Scrutiny Committee.	Trading Standards and Licensing Manager	1. End Q1 2014/5 2. End Q2 2014/5 3. End Q3 2014/5	●	1. We have received the Cardiff data for the period October 2013 – March 2014 and will be requesting quarterly updates from now on. 2. Data has shown a number of issues that do not get reported to the police. Informs police actions.
B	That the Council, in consultation with partners, considers whether there is any evidence of a need for a Cumulative Impact Policy in any part of the city	1. Liaise with Police and Director of Public Health to identify any relevant evidence. 2. Analyse evidence to determine any justification for any policy. 3. Report findings to Scrutiny Committee.	Trading Standards and Licensing Manager	1. End Q1 2014/5 2. End Q2 2014/5 3. End Q3 2014/5	●	Analysis of data to support a cumulative impact policy is inconclusive. The data seems to suggest that issues arise from poorly managed premises rather than from the number of premises in an area.
C	That the Council investigates the activities of premises selling takeaway food in relation to the delivery of alcohol with a view to obtaining evidence which may inform future licensing decisions	1. Liaise with other licensing authorities to obtain any relevant evidence and collate details of relevant licensees in the City 2. Analyse information to determine need to change any policy. 3. Report conclusions to Scrutiny Committee.	Trading Standards and Licensing Manager	1. End Q1 2014/5 2. End Q2 2014/5 3. End Q3 2014/5	●	• Limited data has been found on takeaway premises. However very recent information is being investigated.
D	That the Council, at the next revision of the Licensing Policy	1. Amendment of Policy Statement	Trading Standards	2016 (when Policy is legally	●	•

	Statement, includes a model condition which would require an alcohol licensee to be a member of a relevant Pubwatch Scheme		and Licensing Manager	required to be reviewed)		
E	That the introduction of a voluntary agreement with licensed premises for a suitable closing hour be explored firstly with partners and then, if necessary, with the relevant Pubwatch scheme in any appropriate areas of the City	1. Liaise with Police and Director of Public Health to identify any consensus on a suitable closing hour. 2. If appropriate, to liaise with the relevant Pubwatch scheme. 3. Report outcome to Scrutiny Committee.	Trading Standards and Licensing Manager	1. End Q1 2014/5 2. End Q2 2014/5 3. End Q3 2014/5	●	Currently there is a reasonably high turnover of premises in the City Centre. The Police has come to agreement with a number of new licensees that their terminal hour is 03:00
F	That the Council lobbies central government to introduce measures to tackle the low unit cost of alcohol sold in many supermarkets and other off licensed premises, which can lead to the excessive consumption of alcohol and associated harm to health, and the disparity in cost with alcohol sold at on-licensed premises where alcohol consumption occurs in a regulated environment	1. Write to Home Office with the views of the Scrutiny Committee.	Trading Standards and Licensing Manager	1. End Q1 2014/5	●	A letter has been sent to the Home Office
G	That the Place Boards receive information on licensing law in order to facilitate the assistance of residents in pursuing their rights to apply for the review by the Council of the licences of	1. Provide briefing to each Place Board on licence reviews. 2. Produce advice note on the subject for publishing on the Council's website.	Trading Standards and Licensing Manager	1. End Q2 2014/5 2. End Q2 2014/5	●	Presentations have been delivered to the Place Board

	premises that they feel create problems for the community					

Skills, Economy and Regeneration Scrutiny Panel
Diversification of the Local Economy: Policy Review recommendations 2013/14

Appendix

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	3	0	4	7

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That the scrutiny function receive further progress on the role of the Local Asset Backed Vehicle and the Business Improvement District in delivering the regeneration of the city centre	1. Establish reporting mechanism with Planning and Property to receive update reports on progress of the LABV 2. Continue to liaise with the Business Improvement District to receive updates on progress regarding delivery. BID have written into operating agreement with SCC that they will report annually to scrutiny committee. 3. Report progress against 1 to scrutiny 4. Report progress on 2 to scrutiny	Planning and Property BIT Planning and Property BIT	End of Q3 2014/15 & end of Q1 15/16	●	1. The joint venture Company (Siglion) has been formally announced, and will be launched on the 23 April 15 at the National Glass Centre. The Deputy Chief Executive sits on the Board and her role on the board will be taken up by the Executive Director of Commercial Development from the end of May. Siglion's Chief Executive has been appointed and the team is in place. (including SCC staff transferred under TUPE.) Siglion have just moved into their offices in the Echo 24 Building 2. Regular meeting are held between Catherine Auld and Ken Dunbar the BID Chief Executive. There is also BIT representation at the BID Board Meetings by Cllrs Trueman and Speding, with an observer from the BIT 3. As above 4. As above

Skills, Economy and Regeneration Scrutiny Panel
Diversification of the Local Economy: Policy Review recommendations 2013/14

Appendix

| B | That the Council continues to engage with the business community including Nissan to improve the transportation and energy infrastructure adjacent to the Nissan site. | 1. Continue to engage with the Business Community.

2. Report progress on 1 to scrutiny committee.

3. Work with the business community on infrastructure solutions where they are feasible, plausible and fundable

4. Report progress on 3 to scrutiny committee. | BIT

BIT

Transport and Highways

Transport and Highways | End of Qtr 3 14/15 | | 1. BIT has continued to engage with the business community across a number of mediums. There is regular attendance at meeting such as Sunderland Business Network and North East Chamber of Commerce. As part of the day to day operations of the BIT we are in regular dialogue with business. We continue to use Make it to provide a means of providing information to business and as a conduit for communication. We continue to work with and support other business support organisations and Business Networks to engage with business.

2. As above

Highways improvements have been carried out to the A19/1231 junction adjacent to Vantech new premises on Turbine Business park and close to Nissan. |
| C | That the Council and its partners work together to seek to address the future skill requirements of each sector of the local economy; | 1. Regular updates on the developing Education and Skills Strategy, and links to the Economic Master Plan, will be provided to Scrutiny Committee | SPPM/Assis tant Director of Education | End of Qtr 3 2014/15 | | A draft Education and Skills Strategy has been prepared by SPPM and the Associate Director of Education, involving consultation with business through eg NECC Sunderland Committee and Sunderland Business Group. There is an |

						Education Leadership Conference to be held again in the last week of June 2015 coinciding with Work Discovery Week to which members of the ELB have been invited to attend to help with continuing to strengthen linkages.
D	That the Port continues the expansion of its business and further develops its market in emerging sectors of the economy	1. Continue to work with the Port Director to identify and progress opportunities within the joint working relationship already established. 2. Report progress to the Scrutiny Committee.	BIT	End of Qtr 3 14/15	●	Regular liaison on day to day business between BIT and the Port, including joint meetings with potential investors
E	That the Council continues to promote the development of the software sector in the city and continues to engage with them in order to keep them up to date with major planned developments in the city and assist them with marketing and support	1. Continue joint working already established through the Sunderland Software City Initiative 2. Continue to gather and publicise good news stories on the Make it Sunderland Website. 3. Continue support through eg attendance at relevant trade shows, events and exhibitions 4. Identify most appropriate forums to gather and disseminate information on developments in the City.	BIT/Comms & Corporate Affairs	End of Qtr 3 14/15 end of Qtr 1 15/16	●	1. The Head of Service regularly meets with David Dunn Chief Executive of Software City. Development work for phase 3 (post September 2015) of Software City is currently underway. The Digital Catapult centre launch took place in early March with Sunderland named as one of 3 national centres. 2. BIT and Comms continue to work closely together to gather and publicise good news stories on the Make it Website 3. This work continues to be progressed both with SSC and

						Comms team as part of Make it activities. 4. City Centre Traders and BID continue to be a conduit where information on developments in the City can be exchanged, as well as Sunderland Business Group, Education Leadership Board, NECC Sunderland Committee
F	That the Council continues to promote the development of the creative industries sector in the city	1. Through delivery of the Creative Industries Strategy and Culture Strategy for Sunderland, including events for creatives such as the Makers Markets, festivals etc.	BIT/Cultural services	End of Qtr 3 14/15 end of Qtr 1 15/16	🟡	Work is ongoing to support creative businesses in the City, with a combination of direct support from BIT as well as liaison and engagement with initiatives led by others including the BID.
G	That the Council continues to work with the Sunderland Empire on its infrastructure requirements and its overall visitor offer.	1. Liaise regularly with Sunderland Empire in the context of the emerging Culture Strategy and wider City Centre Development.	Cultural Services	End of Q3 14/15	🟢	Cllr Speding chairs the cultural Partnership which provides a regular forum to develop the strategic direction and facilitate co-ordination for cultural activity and liaison with cultural partners across the City including the Empire.

Responsive Services & Customer Care Scrutiny Panel
Volunteering: Unlocking Capacity - Policy Review recommendations 2013/14

Appendix N

Review Progress Summary				
● not on schedule	● on schedule 6	● undeliverable	● achieved 1	Total 7

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
a)	To revise and embed a Volunteering Strategic Framework which is owned and delivered by the Sunderland Partnership	Work is underway to refresh the Sunderland Partnership's Volunteering Strategy (2009). A workshop is being planned and will be held in the autumn. This is being organised with the Sunderland Partnership and key interested parties will be involved.	Jane Hibberd / Jessica May	December 2014	●	
b)	To include in the Strategy a set of measurable outcomes of delivery against objectives	Consideration is being given to options available for suitable outcome measures to evaluate the impact of volunteering on individuals who volunteer.	Jane Hibberd	December 2014	●	
c)	To develop a clear Volunteering Policy for the involvement of volunteers in council services	Work is underway to develop a policy for the involvement of volunteers in Council services.	Jane Hibberd	March 2015	●	
d)	To incorporate into the Policy an approach to coordination of activity at area level	Work will be undertaken to identify local needs in each area and match supply accordingly, making better use of the existing capacity of volunteers, for example, opportunities for student volunteers and for local people to run services. A local partnership approach will be used, coordinated by the council (through development of the role of People Boards) using all community assets.	Charlotte Burnham	March 2015	●	Delivery of this action has been further considered as part of a recent external review looking into relationships between SCC and the VCSE sector. Proposed actions to be considered in April 2015.

Monitoring recs file

e)	To support Elected Members to act as 'skilled connectors' in their communities and to provide them with the means to actively engage with the voluntary workforce	To look at strategies for elected members to use their local knowledge and make connections in their areas.	Charlotte Burnham / Phil Spooner	March 2015	🟡	As above.
f)	To promote and facilitate opportunities for council employees, including retiring council employees, to engage in volunteering	Activities will include: • Feature in 'Workwise' • Promotion of the benefits for people who become involved in volunteering as part of the Resilience action plan • Development of guidance, signposting to partner agencies and FAQs • Include in the Sunderland Leadership programme • Include in a pre-retirement information pack for employees.	John Rawling	April 2015	🟡	
g)	To increase opportunities for raising the profile of volunteering including the use of existing and planned communication campaigns	Sunderland Volunteers Month takes place in June 2014 – An event will be promoted by the Council working with the Area Coordinators and the Volunteer Centre to highlight volunteering including leaflets, banner, posters and media release using case studies as the main thread. The Council supported Volunteering Day at the Museum & Winter Gardens in January 2014 – this was covered in the media and Community News.	Rose Peacock/Sam Meredith/Charlotte Burnham	April 2015	🟢	The Council worked with the Volunteer Centre to support Sunderland Volunteer Month in June 2014 under the All Together Sunderland brand including posters, banners, and promoting of the event at the start of the month. A press release was issued to coincide with Carers' Week which fell within volunteering month and a press release also promoted the volunteer events in the city centre and in other areas of the city. Media support has been provided to support Love Where You Live and volunteering to help make the city more attractive. Support has been provided to a Libraries' Volunteer event.

Monitoring recs file

Monitoring recs file

Review Progress Summary				
● **not on schedule**	● **on schedule**	● **undeliverable**	● **achieved**	**Total**
0	4	0	3	7

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	That the council and partners continue to meet regularly to build on existing joint working in order to maximise the use of resources and share information	. The council, through officers in Streetscene, will ensure arrangements are in place for continued engagement with other Flood Risk Authorities (NWL/EA) and other Local Authorities, through the various regional and sub regional flood and coastal groups.	Les Clark	May 2014	●	This is an on-going action and meetings with other Flood Risk Authorities EA and NWL are every 3 months. The last NWL meeting was 24th March 2015. The last EA meeting was 31st March 2015.
B	That the council considers the long term resource requirements to develop the expertise, structures and procedures to carry out the new duties set out in the Flood and Water Management Act 2010.	A capacity buiding report for the FWMA duties is to be prepared for consideration by council officers. The report will make recommendation for the appropriate staff numbers to deal with the new duties under the Flood And Water Management Act. Recommendations to be considered and a report to be submitted to DCX and the Director of HR and OD	Les Clark	September 2014	●	Lead officer for Flood and Coastal has been appointed by the authority. Currently looking at what other resources are required to deal with duties.
C	That the Scrutiny Committee monitors the progress being made in relation to the establishment of a SUDS	EMT report to be prepared on the options to be considered on how the council will set up and serve its SAB. A decision to be	Les Clark	September 2014	●	There is no decision on when the SAB duty will be enacted. Defra are currently pushing for Lead Local Flood Authorities to

	Approval Body for the city through its annual monitoring of performance against the delivery of the recommendations.	taken by EMT on the way forward.				implement their own procedures for the adoption of SuDS.
D	That the council investigates the approach to planning policy being taken by other local authorities in relation to water management and flood risk.	The emerging Local Plans of all North East Councils contain policies on water management and flood risk – this is a requirement highlighted in the National Planning Policy Framework (NPPF). Planning Policy Officers from the South Tyne Authorities (Durham, Gateshead, South Tyneside and Sunderland) meet on a regular basis as part of the Duty to Cooperate requirements. Consideration is being given to the issue of surface water flood management being examined through a joint commission (this approach is being pursued by North Tyne Authorities)	Gary Clasper	July 2014

Ongoing | ● (yellow) | The Newcastle-Gateshead Core Strategy has been approved for adoption, and therefore its policy on Water Management (Policy CS17) provides the latest approved policy approach in the region. The Government Inspector for the plan altered the policy and text to ensure that it includes the sequential test and exception test.

The city's new Flood & Coastal Group Engineer has proposed the creation of SUDS Interim Policy Guidance for the city-liaison is ongoing to determine whether this should be a cross-boundary approach with neighbour authorities. |
| E | That action is taken to ensure that residents are made aware of the potential risk to them and their properties from all forms of flooding and encourage them to take responsibility to help reduce these risks by creating a flood plan for their households that | a)Discussions to be held involving Streetscene, Emergency Planning and Communications to determine strategy for flood risk awareness and resilience.

b)Officers are having on going | Les Clark | October 2014

June 2014 | ● (yellow) | a)   See Action (f)

b)CRO has made contact with residents on the Dairy Lane Estate, Houghton le Spring and |

	compliments the actions of the other responsible agencies.	discussions regarding the Community Flooding project, funded via the Flood Defence Committee. An appropriate candidate location for the Regional Community Flooding Officer (CFO) to assist in this regard is to be agreed..				is working with the council's Emergency Planning and Communications teams. Currently looking at other areas for CRO to become involved with to pass the appropriate resilience message to residents.
F	That the council looks further at developing new and innovative channels of communication to keep residents aware of potential flood risk event.	a)Discussions to be held involving Streetscene, Emergency Planning and Communications in relation to raising awareness of potential flood events with residents.	Les Clark	October 2014	🟢	Flood management has been agreed with partners Palantir as one of the 'rapid adopters' of the Intelligence Hub. This will be the platform from which flood risks will be identified and new and innovative channels of communication with residents that are potentially affected will be developed. Work has started analysing the flooding data and will take a few months.
G	That the recommendations of the Panel (listed a-f) be fed into the forthcoming Local Flood Risk Management Strategy.	The recommendations of the Panel will be fed into the forthcoming Local Flood Risk Management Strategy.	Les Clark	May 2014	🟡	The LFRMS is in its Final Draft and the above has been implemented in this document. This will go out to public consultation at the end of April 2015.

SCRUTINY COMMITTEE

NOTICE OF KEY DECISIONS

REPORT OF THE CHIEF EXECUTIVE

1. PURPOSE OF THE REPORT

1.1 To provide Members with an opportunity to consider the items on the Executive's Notice of Key Decisions for the 28 day period from 17 March 2015.

2. BACKGROUND INFORMATION

2.1 Holding the Executive to account is one of the main functions of Scrutiny. One of the ways that this can be achieved is by considering the forthcoming decisions of the Executive (as outlined in the Notice of Key Decisions) and deciding whether Scrutiny can add value in advance of the decision being made. This does not negate Non-Executive Members ability to call-in a decision after it has been made.

2.2 To this end, the most recent version of the Executive's Notice of Key Decisions is included on the agenda of this Committee. The Notice of Key Decisions for the 28 day period from 17 March 2015 is attached marked **Appendix 1**.

3. CURRENT POSITION

3.1 In considering the Notice of Key Decisions, Members are asked to consider only those issues where the Scrutiny Committee or relevant Scrutiny Panel could make a contribution which would add value prior to the decision being taken.

3.2 In the event of Members having any queries that cannot be dealt with directly in the meeting, a response will be sought from the relevant Directorate.

4. RECOMMENDATION

4.1 To consider the Executive's Notice of Key Decisions for the 28 day period from 17 March 2015 at the Scrutiny Committee meeting.

5. BACKGROUND PAPERS

- Cabinet Agenda

Contact Officer :   Nigel Cummings, Scrutiny Officer
                              0191 561 1006
                              Nigel.cummings@sunderland.gov.uk

The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012

Notice is given of the following proposed Key Decisions (whether proposed to be taken in public or in private) and of Executive Decisions (including key decisions) intended to be considered in a private meeting:-

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
051114/02	To authorise the compulsory acquisition of land, necessary reclassification of roads and the making of Compulsory Purchase and Side Road Orders for the re-alignment and improvement of Washington Road (A1290) at Severn Houses, Sunderland Enterprise Zone	Cabinet	Y	During the period from the date of this notice up to 30 June 2015	N	N/A	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
041114/05	To respond to consultation from Gentoo regarding review of governance arrangements	Cabinet	Y	During the period from the date of this notice up to 31 May 2015	N	N/A	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

1

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
161214/14	Procurement of a Partner to support alternative models of service delivery	Cabinet	Y	During the period from the date of this notice to 31 July 2015	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraph 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
150206/12	Approval and endorsement of the Education and Skills Strategy	Cabinet	Y	15 April 2015	N	Not applicable	Cabinet report and Education and Skills Strategy	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
150226/15	Proposals in respect of Beckwiths and Bishopwearmouth Community Interest Companies	Cabinet	N	During the period from the date of this notice to 30 June 2015	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraph 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet Report – Proposals in respect of Beckwiths and Bishopwearmouth	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
150226/16	Approval to procure care and support at home services	Cabinet	Y	During the period from the date of this notice up to 15 April 2015	N		Cabinet report – Approval to procure care and support at home services	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
150302/17	Approve the proposed regeneration programme for Roker and Seaburn. To be funded from the Capital Programme and Coastal Communities funding.	Cabinet	Y	During the period from the date of this notice up to 15 April 2015	N		Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
150305/18	Approval to : a)2015-16 Highway Maintenance(Including Bridges) Programme. b) 2015-16 Integrated Transport Capital Programme. c) Amendments to 2014-2015 Programme	Deputy Chief Executive	Y	During the period 15 April to 30 April 2015	N		Delegated Decision Form	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

4

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
120315/19	Disposal of land at Dene Street, Silksworth, Sunderland and Aster Terrace, Philadelphia, Sunderland to Tolent Construction Limited	Cabinet	Y	During the period April to 11 June 2015	N		Cabinet report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
120315/20	Acquisition of land at Commercial Road, Sunderland.	Cabinet	Y	During the period April to 11 June 2015	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraph 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

5

Note; Some of the documents listed may not be available if they are subject to an exemption, prohibition or restriction on disclosure.
Further documents relevant to the matters to be decided can be submitted to the decision-maker. If you wish to request details of those documents (if any) as they become available, or to submit representations about a proposal to hold a meeting in private, you should contact Governance Services at the address below.
Subject to any prohibition or restriction on their disclosure, copies of documents submitted to the decision-maker can also be obtained from the Governance Services team PO Box 100, Civic Centre, Sunderland, or by email to committees@sunderland.gov.uk

Who will decide;
Cabinet; Councillor Paul Watson - Leader; Councillor Henry Trueman – Deputy Leader; Councillor Mel Speding – Cabinet Secretary; Councillor Pat Smith – Children's Services: Councillor Graeme Miller – Health, Housing and Adult Services; Councillor John Kelly – Public Health, Wellness and Culture; Councillor Michael Mordey – City Services; Councillor Cecilia Gofton – Responsive Services and Customer Care

This is the membership of Cabinet as at the date of this notice. Any changes made by the Leader will be specified on a supplementary notice.

Elaine Waugh
Head of Law and Governance
17 March 2015

Item 10

SCRUTINY COMMITTEE   **16 APRIL 2015**

ANNUAL WORK PROGRAMME 2014/15

REPORT OF THE HEAD OF SCRUTINY AND AREA ARRANGEMENTS

1.   PURPOSE OF THE REPORT

1.1   The report attaches, the work programme for the Committee's work during the 2014/15 council year.

1.2   In delivering its work programme, the Scrutiny Committee will support the council in achieving its Corporate Outcomes.

2.   BACKGROUND

2.1   The work programme is a working document which the Committee can develop throughout the year. The work programme allows Members and officers to maintain an overview of work planned and undertaken during the Council year.

3.   CURRENT POSITION

3.1   The work programme reflects discussions that took place at the Scrutiny Committee meeting held on 12 March 2015. The current work programme is attached as **Appendix 1**.

4.   CONCLUSION

4.1   The work programme developed from the meeting will form a flexible mechanism for managing the work of the Committee in 2014/15.

5   RECOMMENDATION

5.1   That the Committee notes the information contained in the work programme and consider the inclusion of any proposals for the Committee into the work programme.

_____

Contact Officer: Nigel Cummings, Scrutiny Officer
                          0191 561 1006 – Nigel.cummings@sunderland.gov.uk

REASON FOR INCLUSION	26 JUNE D/L 13.06.14	17 JULY D/L 07.07.14	11 SEPTEMBER D/L 03.09.14	9 OCTOBER D/L 01.10.14	6 NOVEMBER D/L 29.10.14	4 DECEMBER D/L 26.11.14	15 JANUARY D/L 07.01.15	12 FEBRUARY D/L 04.02.15	12 MARCH D/L 04.03.15	16 APRIL D/L 7.04.15
Cabinet Referrals and Responses	Portfolio Holder Response to Policy Reviews 2013/14 Revenue Budget Outturn for 2013/2014 and First Revenue Review 2014/2015 Capital Programme Outturn 2013/2014 and First Capital Review 2014/2015 including Treasury Management	Portfolio Holder Response to Policy Reviews 2013/14	Portfolio Holder Response to Policy Reviews 2013/14 Youth Justice Plan 2014/15	Proposal for Budget Consultation 2015/16 Budget Planning Framework 2015/2016 and Medium Term Financial Strategy 2015/2016 – 2017/2018 Capital Programme Second Review 2014/15 Revenue Budget Second Review 2014/2015 Feed and Food Controls Service Plan 2015/16	Annual Audit Letter		Revenue Budget 2015/16 Proposals Capital Programme - Third Capital Review 2014/2015, Provisional Resources 2015/2016 And Treasury Management Review 2014/2015	Collection Fund 2014/15 Capital Programme 2015/2016 and Treasury Management Policy and Strategy 2015/2016 Revenue Budget and Proposed Council Tax for 2015/2016 and Medium Term Financial Strategy 2015/2016 to 2017/2018		
Scrutiny Business	Membership of Scrutiny Panels Commissioning the Annual Scrutiny Work Programme 2014/15 CfPS Annual Conference Feedback Scrutiny Update: Taking Stock Notice of Key Decisions	CCG Operational Plan CCG Urgent Care Update Commissioning the Scrutiny Panels 2014/15 Scrutiny Work Programme 2014/15	Corporate Performance Report Notice of Key Decisions Scrutiny Work Programme 2014/15	Care and Support - Annual Report Notice of Key Decisions Scrutiny Work Programme 2014/15	Library Service – Update Safeguarding in Sunderland Notice of Key Decisions Scrutiny Work Programme 2014/15	School Performance (Provisional Results) HWB Strategy Implementation Proposal to establish a working group Notice of Key Decisions Scrutiny Work Programme 2014/15	Corporate Parenting Annual Report Council Annual Complaints Report Notice of Key Decisions Scrutiny Work Programme 2014/15	Draft Skills and Education Strategy Corporate Performance Report Substance Misuse Service – Feedback Report (Public Health Scrutiny Panel) Schools Performance Notice of Key Decisions Scrutiny Work Programme 2014/15	Care Act - Consultation Outcomes Better Care Framework Safer Sunderland Partnership Notice of Key Decisions Scrutiny Work Programme 2014/15	CAMHS Service Annual Performance Update BID Annual Update Annual Monitoring the Delivery of Agreed Scrutiny Recommendations Draft Final Policy Review Reports Scrutiny Annual Report Notice of Key Decisions Scrutiny Work Programme 2014/15
Lead Scrutiny Member Update		Lead Scrutiny Member Update	Lead Scrutiny Member Update	Lead Scrutiny Member Update	Lead Scrutiny Member Update	Lead Scrutiny Member Update	Lead Scrutiny Member Update	Lead Scrutiny Member Update	Lead Scrutiny Member Update	Lead Scrutiny Member Update
Substantial Variations to Service - Health										
CCFA/Members items/Petitions										

Item 11

MEMBER DEVELOPMENT OPPORTUNITY

REPORT OF THE CHIEF EXECUTIVE

1. PURPOSE OF REPORT

1.1 To provide scrutiny members with details of the CfPS Annual Conference.

2. BACKGROUND INFORMATION

2.1 The council's Scrutiny Handbook contains a protocol for use of the Scrutiny Committee's budget by members to attend training and conferences relevant to their remit.

3. CFPS ANNUAL CONFERENCE 2015

3.1 An invitation has been received from the Centre of Public Scrutiny to attend its Annual Conference to be held 2 June 2015.

> **Title:** 'Accountability Max? Devolution, austerity and responsibility'
> **Date:** 2 June 2015
> **Venue:** Local Government House, Westminster

3.2 What impact will continued decentralisation have on scrutiny? Will increased local powers and devolved budgets see new approaches local government governance? How do public sector leaders best use scrutiny in a new political landscape which continues to be committed to austerity? What impact will the general election have on the future of local government scrutiny?

3.3 CfPS 13th annual conference will tackle some of these big questions head on through a mix of high-profile keynote speakers, workshops designed to give scrutineers practical skills, brilliant examples of effective scrutiny taking place right now and lots of opportunities to network with colleagues.

3.3 Guest speakers include:-

- Sir Bob Kerslake - Head of the Home Civil Service and Permanent Secretary at the Department of Communities and Local Government
- Alexis Jay (TBC) - Independent Inquiry in to Child Sexual Exploitation in Rotherham
- Adrian Hughes - Deputy Chief Inspector, Adult Social Care (South Region and Registration), Care Quality Commission

3.4   Collaborative workshops focusing on in-depth reform issues will be run by expert facilitators. The full programme can be found at **appendix 1.**

3.5   Delegate rates are as follows:
An early booking rate is available for £215.

3.6   It is suggested that the Committee nominate the Chair of the Scrutiny Committee, the Scrutiny Officer and one other delegate to attend the Conference.

4.   RECOMMENDATION

4.1   The Committee is requested to nominate the Chair of the Scrutiny Committee, Scrutiny Officer and one other delegate to attend the Conference.

5.   BACKGROUND PAPERS

CfPS Annual Conference Papers

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Contact Officer: Nigel Cummings
Scrutiny Officer
Nigel.Cummings@sunderland.gov.uk

Appendix 1

CfPS Annual Scrutiny Conference - Programme
2 June 2015

10:30 - 11:00	Registration and morning refreshments
11:00 - 11:10	Welcome from Chair **Rt Hon Nick Raynsford MP**, **Chair of CfPS**
11:10 - 11:45	Opening keynote: Devolution, Austerity and Responsibility **Sir Bob Kerslake**
11:45 - 12:45	Panel Debate: The Role of Scrutiny in the Face of Austerity **Speakers to be confirmed**
12:45 - 13:35	Lunch and networking
13:35 - 13:40	Welcome back from afternoon chair
13:40 - 14:15	Risk, Resilience and Recovery - **Speaker TBC**
14:20 - 15:25	WORKSHOP 1A: Integrating Health and Social Services WORKSHOP 2: Local Accountability: Lessons from Scrutiny Development Areas WORKSHOP 3: Children and Young People: Safeguarding
15:25- 16:25	WORKSHOP 1A: Integrating Health and Social Services: Public Health WORKSHOP 2: Local Accountability: Budget and Financial Management WORKSHOP 3: Children and Young People: Lessons from our School Improvement Programme
16:30 - 16:50	Accountability My Mum Would Be Proud of - Remembering the Experience of People Who Use Services **Adrian Hughes, Care Quality Commission**
16:50 - 17:15	**Closing keynote:** It Couldn't Happen Here, Could It? **Alexis Jay OBE** - Independent Inquiry in to Child Sexual Exploitation in Rotherham
17:15 - 17:30	Fringe Session In Partnership with Citizens Advice Bureau

SCRUTINY COMMITTEE   **16 APRIL 2015**

LEAD SCRUTINY MEMBER UPDATE: APRIL 2015

JOINT REPORT OF THE LEAD SCRUTINY MEMBERS

1.   PURPOSE OF THE REPORT

1.1   To provide an update to the Scrutiny Committee regarding the work of each of the six Lead Scrutiny Members and supporting Panels.

2.   LEAD SCRUTINY MEMBER UPDATE

Scrutiny Chair and Vice Chair (Cllrs Norma Wright and Tom Martin)

Safeguarding Working Group – Update

2.1   The Safeguarding Working Group met on 17th March 2015 and were introduced to Colin Morris, the independent chair of Sunderland Safeguarding Children's Board. The working group were informed that new governance arrangements would come into operation from April 2015, with a change of membership on the safeguarding board. The new board would consist of approx. 15 people who would in the main be Chief Officers, or their nominees, from within key organisations.

2.2   The importance of scrutiny's involvement with the board was also highlighted and how scrutiny's role was around asking those often difficult questions of the group. It was agreed at the latest meeting of the working group that it would be appropriate to speak with a number of people both internally and externally of the organisation, with individuals being issued with the questions and the panel holding a Q&A session. To ensure the manageability of the process it was also agreed to hold 2 such sessions with approx. 3/4 witnesses at each session.

2.3   Cllr Wright also requested that Members outside of the Scrutiny Committee should be aware of the work being undertaken by the working group and also the council as a whole, through a communication from the Chair of Scrutiny.

2.4   The working group also received a brief update on the improvement work that had been taking place. Members were informed that the improvement plan was based on 5 outcome themes to provide a basis for improvement. The working group was also informed that the plan had involved a wide staff engagement process including fortnightly emails and focus groups. It was reported that this initial work had started to pay dividends in that the council had started to receive positive feedback from partners as an outcome of this work.

2.5   The working group in moving forward will look to liaise with the independent chair of the Sunderland Safeguarding Children's Board and The Executive Director for the People's Directorate to arrange Q&A sessions with a number of safeguarding partners to discuss issues around child sexual exploitation. The working group will also be provided with key documents that will assist the group during their investigations as well as providing information to all Members around the improvement work being undertaken.

2.6   The working group will continue to provide updates to the Scrutiny Committee, as and when appropriate, through the Lead Scrutiny Member Update Report.

Combined Authority Scrutiny Committee

2.7   The NECA Overview and Scrutiny Committee met on 24th March in Newcastle. The meeting included monitoring of the Strategic Economic Plan, review of performance of Nexus, and consultation on the proposals for devolution for the NE region. This was the final meeting of the municipal year. A new work programme will be developed for the NECA Scrutiny Committee for 2015/16 which will include a policy review across the seven authorities.

NE Regional Scrutiny Network

2.8   The Network met on 27th March in Gateshead.   The main item on the agenda was the different approaches being taken to tackling the autism agenda within local authorities, with the example of a scrutiny review from Gateshead being highlighted as a possible area of good practice.

2.9   The Network also met with Tees Valley Unlimited to talk about developing the economy in the Tees Valley and the progress of the Tees Valley LEP.

Children's Services (Cllr Debra Waller)

2.10   The Panel has finalised its review of child and family poverty and met on 31st March to agree a set of recommendations.

2.11   The review examined the large body of evidence confirming that early disadvantage tracks forward, to influence later life. One of the biggest impacts can be achieved by intervening in the early years, with these years being formative for establishing healthy lifestyle choices. This is not only important in terms of the immediate impact on children's health and development, but the benefits also extend into adulthood with the associated savings for adult services.

2.12   The Panel's recommendations, set out elsewhere on this agenda, focus on the emerging Child Poverty Needs Assessment and Child Poverty Strategy.

City Services (Cllr David Snowdon)

2.13   On 16 March 2015, the Panel considered the final draft reports of its reviews into Cemetery Regulations and the Medical Examiners Service. The Panel emphasised the importance of ensuring that the changes to the cemetery regulations suggested in the report were broadly consulted upon and were introduced in a sensitive manner. A copy of the report is included on this agenda. A copy of the report is included on the agenda.

2.14   The Panel also received a further monitoring report into levels of flytipping in the city. The Panel agreed that it would be useful to receive regular reports on this issue carrying on into next year.

2.15   On 8 April 2015, the Panel met to consider an update report on the progress being made in relation to alcohol and licensing in the city. This issue was the subject to a policy review by the Panel during 2013/14. The Panel also heard about the steps being taken to

tackle the dangers of older and vulnerable people being targeted by rogue traders and the problems being caused by those 'cold calling' to offer services on the doorstep.

Health, Housing and Adult Services

2.16 The panel have concluded their evidence gathering and have prepared their draft final report on the issue of tackling loneliness and social isolation. The full report and draft recommendations are presented to the Scrutiny Committee for final approval.

2.17 The review has been extremely interesting and Members of the panel have fully engaged in evidence gathering activities throughout the course of the year. The panel also undertook a number of commissioned items, as requested by the Scrutiny Committee, and this provided a degree of variety to the work of the panel. The HHAS Scrutiny Panel are looking forward to the annual scrutiny debate and the opportunity to discuss potential topics for next year.

Public Health, Wellness and Culture (Cllr George Howe)

2.18 The Panel met on 23rd March to take the final evidence for a review of Legal Highs. The Panel heard from Trading Standards in relation to local enforcement.

2.19 Legislation is available through consumer regulations, but there are barriers. Firstly, there is no standard compliance tool for these products. Regulations require showing that an 'average consumer' has been influenced by misleading information, such as when NPS are labelled as 'plant food', or 'bath salts', yet, most consumers know exactly why they are buying these products and so are not being misled.

2.20 The Panel concluded by agreeing some draft recommendations for the review of Legal Highs. At the same meeting, the Panel agreed its recommendations for a review of Suicide Prevention – both are set out elsewhere on the agenda.

Skills, Economy and Regeneration (Cllr Dianne Snowdon)

2.21 Since the last meeting of the Committee, the Panel has met twice. Firstly to meet with representatives from the University and the schools sectors in order to discuss the measures being taken to satisfy the future skills demands of the city. The Panel highlighted the important work going on at the University in developing skills and the importance of trying to encourage levels of graduate retention. Reference was also made to the growing influence of the business sector in contributing to the design and content of qualifications and training. The Panel also heard about the way in which the Education and Skills Strategy has being rolled out across the city in order to better prepare our young people for the world of work.

2.22 A further meeting of the Panel was held on 7 April 2015, when the Panel considered and agreed its final report on the future proofing of skills in the city. A copy of the report is included on this agenda.

Responsive Services and Customer Care (Cllr Ronny Davison)

2.23 At its meeting on 19th March 2015, the Panel considered the draft final report on the implications of recent Welfare Reform legislation. The Panel highlighted the very substantial impact that the welfare reforms were having on the income levels of many families. The Panel considered it important for the Council to continue to adopt a range of strategies to support clients; including the targeting of information campaign to raise

awareness among those affected; personal support to help manage finances and avoid arrears. A key issue for the future will be the impact of Universal Credit. The Council has an important role to provide via partners support and ensuring that the city is prepared and has planned ahead. A copy of the report is included on this agenda.

2.24 On 2 April 2015, the Panel agreed the content and recommendations of its review into the operation of Food Banks. The report highlights the massive increase in demand for food banks in recent years at both a national and local level. The Panel commends the enthusiasm and commitment of the people providing support through food banks. However, the Panel does have concerns at the danger of a developing dependency on the service and the degree to which the service is masking weaknesses in the welfare system. A copy of this report is included on this agenda.

3. CURRENT PANEL MEMBERSHIPS

3.1 Non-executive Members have now been allocated to a scrutiny panel, membership of the panels has been decided in accordance with current political arrangements.

3.2 A complete membership of the Scrutiny Panels is attached for information at **Appendix 1** of this report.

4. DEDICATED SCRUTINY BUDGET

4.1 A small budgetary provision of £15,000 per annum is available to the Scrutiny Committee and the supporting Panels to deliver the agreed Annual Scrutiny Committee Work Programme.

4.2 As of 31st March 2015 the breakdown of the budget stood as follows:-

Description	£
Scrutiny Development	£5,249.90
Member Development	£2,466.45
Policy Review Development	£642
Total Expenditure to Date	£8,358.35
Budget	£15,000
Remaining Budget	£6,641.65

5. RECOMMENDATIONS

5.1 It is recommended that the Scrutiny Committee;

(a) notes and considers the update of the Lead Scrutiny Members and receives a further verbal update at the meeting where appropriate, and

(b) notes the current expenditure and remaining scrutiny budget for 2014/15.

6. BACKGROUND PAPERS

- Scrutiny Committee Agenda and Papers – 12 March

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MEMBERSHIP OF THE SIX SCRUTINY PANELS

City Services	Health, Housing & Adult Services
Lead Scrutiny Member: Cllr David Snowdon	Cllr Jill Fletcher
	Cllr Alan Emerson
Cllr James Blackburn	Cllr Rosalind Copeland
Cllr Michael Essl	Cllr Darryl Dixon
Cllr Stuart Porthouse	Cllr Michael Dixon
Cllr Steven Foster	Cllr Shirley Leadbitter
Cllr Lynda Scanlan	Cllr Barbara McLennan
Cllr John Wiper	Cllr Dorothy Trueman
Children's Services	**Skills, Economy & Regeneration**
Lead Scrutiny Member: Cllr Debra Waller	Lead Scrutiny Member: Cllr Dianne Snowdon
Cllr Florence Anderson	Cllr Bob Price
Cllr Linda Williams	Cllr Michael Dixon
Cllr Doris MacKnight	Cllr Christine Marshall
Cllr Anthony Farr	Cllr Mary Turton
Cllr Philip Tye	Cllr Billy Turton
Cllr Jacqui Gallagher	Cllr Len Lauchlan
Cllr Bob Francis	Cllr Tom Wright
	Cllr Peter Wood
Public Health, Wellness & Culture	**Responsive Services & Customer Care**
Lead Scrutiny Member: Cllr George Howe	Lead Scrutiny Member: Cllr Ronny Davison
Cllr Louise Farthing	Cllr Betty Gibson
Cllr Fiona Miller	Cllr Barry Curran
Cllr Julia Jackson	Cllr Anne Lawson
Cllr Rebecca Atkinson	Cllr Iain Kay
Cllr David Errington	Cllr George Thompson
Cllr Richard Bell	Cllr Gillian Galbraith
Cllr John Cummings	Cllr Lee Martin
Cllr Shirley Leadbitter	Cllr Margaret Forbes