


## THE CABINET

### AGENDA

**Meeting to be held in the Civic Centre (Committee Room No. 1) on  
Wednesday, 14 March, 2012 at 2.00 p.m.**

#### Part I

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1.	<b>Minutes of the Meeting of the Cabinet held on 15 February, 2012</b>  (Copy herewith).	1
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**Local Government (Access to Information) (Variation) Order 2006**

The reports contained in Part II of the Agenda are not for publication as the Cabinet is considered likely to exclude the public during consideration thereof as they contain information relating to any individual, which is likely to reveal the identity of an individual, the financial or business affairs of any particular person (including the Authority holding that information) or to consultations or negotiations in connection with labour relations matters arising between the Authority and employees of the Authority and in respect of which a claim to professional privilege could be maintained in legal proceedings (Local Government Act 1972, Schedule 12A, Part 1, Paragraphs 1, 2, 3, 4 and 5).

**Part II**

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|    |  | (Copy herewith).   |     |


10. **Reports of the Meetings of the Personnel Committee held on 23 and 24 February 2012, Part II** 231

(Copy herewith).

(For approval of the recommendations on executive functions and to note the remaining decisions).

11.  **Acquisition of 3 Properties on Sheepfolds Industrial Estate, Sunderland** 241

Report of the Deputy Chief Executive (copy herewith).

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Joint report of the Deputy Chief Executive and Executive Director of Commercial and Corporate Services (copy herewith).

 **Denotes Key Decision.**

**\* Denotes Rule 15 Notice issues – item which is a key decision which is not included in the Forward Plan.**

ELAINE WAUGH  
Head of Law and Governance

Civic Centre  
SUNDERLAND

6 March 2012



**CABINET MEETING – 14 MARCH 2012**  
**EXECUTIVE SUMMARY SHEET – PART I**

**Title of Report:**

MINUTES, PART I

**Author(s):**

Head of Law and Governance

**Purpose of Report:**

Presents the minutes of the last meeting held on 15 February 2012 Part I.

**Action Required:**

To confirm the minutes as a correct record.



**At a meeting of the CABINET held in the CIVIC CENTRE (COMMITTEE ROOM NO. 1) on Wednesday 15 February 2012 at 2.00 p.m.**

**Present:-**

Councillor P. Watson in the Chair

Councillors Allan, Blackburn, Charlton, Gofton, P. Smith, Speding, Trueman and T. Wright.

**Also in attendance:-**

Councillors Oliver and Wood.

**Part I**

**Minutes**

The minutes of the meeting of the Cabinet held on 11 January 2012, Part I (copy circulated) were submitted.

(For copy report - see original minutes).

1. RESOLVED that the minutes of the last meeting be confirmed and signed as a correct record.

**Receipt of Declarations of Interest**

The following Councillors declared personal interests in the under mentioned reports as Members of the various bodies indicated:-

Item 5 – Wearmouth Masterplan and Design Code – Supplementary Planning Document	Councillor Blackburn	Tyne and Wear Integrated Transport Authority
	Councillor Gofton	ANEC, Board of Governors of the University of Sunderland
	Councillors Speding, Trueman and P. Watson	ANEC

Item 6 – Collection Fund 2011/2012	Councillor Blackburn	Hetton Town Council
Item 7(i) – Capital Programme 2012/2013 including Prudential Indicators and Treasury Management Strategy	Councillor Allan	Board of Governors of Thorney Close Primary School
	Councillor Blackburn	Tyne and Wear Integrated Transport Authority
	Councillor Speding	Football Foundation
Item 7(ii) – Revenue Budget and Proposed Council Tax 2012/2013 and Medium Term Financial Strategy 2011/2012 – 2014/2015	Councillor Allan	Local Government Pension Scheme, GMB, Unison
	Councillor Blackburn	GMB, Tyne and Wear Integrated Transport Authority, South Tyne and Wear Waste Management Joint Partnership
	Councillors Charlton, P. Smith	Local Government Pension Scheme, GMB
	Councillor Gofton	Local Government Pension Scheme, ANEC, Sunderland Empire Theatre Trust
	Councillor Speding	GMB, ANEC, Substitute Member of South Tyne and Wear Waste Management Joint Partnership
	Councillor Trueman	Local Government Pension Scheme, ANEC, Sunderland Partnership
	Councillor P. Watson	GMB, ANEC, North East Local Enterprise Partnership, Sunderland Partnership
	Councillor T. Wright	South Tyne and Wear Waste Management Partnership, Sunderland Empire Theatre Trust



Item 8 – Association of North east Councils Limited      Councillors Gofton, ANEC  
Speding, Trueman and  
P. Watson

### **Apologies for Absence**

An apology for absence was submitted to the meeting on behalf of Councillor Kelly.

### **Report of the Meeting of the Personnel Committee, Part I**

The report of the meeting of the Personnel Committee held on 26 January 2012, Part I (copy circulated) was submitted and consideration was given thereto.

(For copy report – see original minutes).

2. RESOLVED that the report of the meeting of the Personnel Committee held on 26 January 2012, Part I be noted.

### **Wearmouth Masterplan and Design Code: Supplementary Planning Document**

The Deputy Chief Executive submitted a report (copy circulated) to advise of the outcome of public consultation on the draft Wearmouth Masterplan and Design Code and to seek approval to adopt the document as an Supplementary Planning Document as part of the council's Local Development Framework.

(For copy report – see original minutes).

Councillor Charlton highlighted that the Council's Unitary Development Plan Alteration No.2 identified St. Peter's Riverside and Bonnersfield as a Strategic Location for Change, where development was to be encouraged. He added that however, the area also formed part of the 'buffer zone' of the Wearmouth-Jarrow candidate World Heritage Site at St Peter's and so its regeneration should protect and enhance the potential World Heritage Site.

Councillor Charlton reported that the boundary of the Wearmouth Masterplan had therefore been drawn to match the buffer zone of the candidate World Heritage Site and it established a range of urban design principles which must be followed by developers and which protect key views of the candidate World Heritage site.

Cabinet Members were advised that following previous statutory public consultation resulting in concerns raised by English Heritage the document had been re-drafted and further consultation was carried out over a four week period in November and December 2011. The adoption of the Masterplan and Design Code as a Supplementary Planning Document would provide the robust planning framework required to determine planning applications and secure the proper regeneration of

the St Peter's and Bonnersfield areas, as well as guiding future development along the opposite shore of the River Wear.

Councillor Charlton reported that the existence of an adopted planning framework for the area was important to the success of the World Heritage Bid and if adopted, the document would immediately be submitted to the International Council on Monuments and Sites to aid its deliberations on the bid.

Consideration having been given to the report, it was:-

3. RESOLVED that:-

- (i) the amendments made to the draft Wearmouth Masterplan and Design Code in light of responses received during the public consultation on the document and other considerations, be noted, and
- (ii) the amended Wearmouth Masterplan and Design Code be adopted as a Supplementary Planning Document.

### **Collection Fund 2011/2012**

The Executive Director of Commercial and Corporate Services submitted a report (copy circulated) to advise of the estimated balance on the Collection Fund for 2011/2012 and the amounts available to the Council and its major precepting authorities for use in setting Council Tax levels for 2012/2013.

(For copy report – see original minutes).

Councillor Speding reported that the exercise to determine the estimated balance on the Collection Fund at the end of the financial year, legally, must be carried out on 15 January of each year. He advised that where a surplus was projected on the Collection Fund, the Council had a legal requirement to return those surpluses to the Council and its Precepting Bodies so that they could be taken into account in calculating the Council Tax for the following year.

The attention of Cabinet Members was drawn to paragraph 5.4 of the report which highlighted that it was estimated that there would be a projected surplus on the Collection Fund as at 31 March 2012 and that £566,124 would be used in 2012/2013. Accordingly, of this sum £500,000 was available to the Council to take into account when determining the Council Tax for 2012/2013. Councillor Speding was pleased to report that this is a very positive position and reflected the continued excellent performance of the Council in terms of Council Tax collection.

Councillor Speding reported that there was also a legal requirement that the Council must notify its Precepting Bodies of their share of the surplus to be used within 7 working days from the calculation date of 15 January and this requirement had already been complied with.

Councillor Wright referred to the impact of the Government's changes to Working Tax Credits and the increase in the requirement to work at least 24 hours per week rather than 16 hours per week. He enquired whether this would be taken into account when collecting Council Tax. Cabinet Members acknowledged that this could affect part-time, low paid workers in the City and requested that some research be undertaken on the matter.

Consideration having been given to the report, it was:-

4. RESOLVED that the position in relation to the Collection Fund for 2011/2012 and the surplus of £500,000 which will be taken into account when setting the Council Tax level for the Council for 2012/2013 be noted.

### **Capital Programme 2012/2013 and Treasury Management Policy and Strategy 2012/2013, including Prudential Indicators for 2012/2013 to 2014/2015**

The Executive Director of Commercial and Corporate Services submitted a report (copy circulated) to provide an update on the level of capital resources and commitments for the forthcoming financial year and to seek a recommendation to Council to the overall Capital Programme 2012/2013 and the Treasury Management Policy and Strategy (including both borrowing and investment strategies) for 2012/2013 and to approve the Prudential Indicators for 2012/2013 to 2014/2015.

(For copy report – see original minutes).

Councillor Speding highlighted that this was a detailed and technical report mainly due to the complex nature of capital finance and the legal requirements involved. He drew attention to the Capital Programme for 2012/2013 which totalled over £60 million and within the current challenging context; this was a very positive and strong programme and a big vote of confidence in our City. He reported that the Programme was made up of new starts of over £30 million together with the costs of continuing schemes from previous years of just over £30 million and this demonstrated that the Council was making a major commitment to regeneration of the area despite ongoing reductions in specific grants.

Councillor Speding reported that it was testament to the Council's vision for the city and careful consideration of its resources that it could propose this capital programme for future years, especially at a time when capital funding from the government had been cut across all service areas. He advised that the Council continued to support projects that benefited the neediest and had ensured that grants allocated to Children's Services, Transport, and Health and Housing Services were earmarked for priorities within these services. He added that the approach would enable programmes such as disabled facilities grants and school modernisation to progress.

Cabinet Members were advised that, despite the economic context, significant investment was proposed in the city centre and seafront to support the implementation of the Economic Masterplan and to promote private sector investment. This was in addition to the support to the new Wear Bridge which would help create thousands of new jobs, on the construction of the bridge itself and by improving links between the A19, the city centre and the Port of Sunderland.

Councillor Speding was pleased to highlight a proposal to build a new Leisure Centre in Washington which would address another key priority for residents. In addition he added that the increasingly commercial approach to be taken in key areas of the programme was anticipated to result in significant private sector investment alongside Council resources over time.

Turning to the Council's Treasury Management Policy statement, Councillor Speding advised that it was not proposed to make any major changes to the overall Treasury Management Strategy in 2011/2012 which would, especially in these times of economic uncertainty, maintain the careful and prudent low risk approach adopted by the Council in previous years. He assured Cabinet Members that the Strategy complied fully with the revised Treasury Management Code of Practice and observed best practice.

Cabinet Members commended the proposed Capital Programme and thanked the Executive Director of Commercial and Corporate Services and officers for their work in bringing forward the schemes, especially in improving the leisure offer to residents by building a new Leisure Centre in Washington, particularly in light of the current economic uncertainty and backdrop of Government budget and grant cuts.

Consideration having been given to the report, it was:-

5. RESOLVED that it be recommended to Council to approve:-

- (i) the proposed Capital Programme for 2012/2013,
- (ii) the Treasury Management Policy and Strategy for 2012/2013 (including specifically the Annual Borrowing and Investment Strategies),
- (iii) the Prudential Indicators for 2012/2013 to 2014/2015, and
- (iv) the Minimum Revenue Provision Statement for 2012/2013.

### **Revenue Budget and Proposed Council Tax for 2012/2013 and Medium Term Financial Strategy 2011/2012 to 2014/2015**

The Chief Executive and the Executive Director of Commercial and Corporate Services submitted a joint report together with an addendum thereto (copies circulated) to report:-

- (a) the overall revenue budget position for 2012/2013;
- (b) the projected balances position as at 31st March, 2012 and 31st March, 2013 and advise on their level;
- (c) a risk analysis of the Revenue Budget 2012/2013;
- (d) a summary of the emerging medium term financial position facing the Council from 2013/2014 to 2014/2015;
- (e) any views received from the North East Chamber of Commerce and Trade Unions;
- (f) the final General Summary for the Revenue Estimates and the proposed Contingencies and Provisions for Strategic Priorities for 2012/2013 set out at Annex 1;
- (g) recommendations to be made to Council with respect to Council Tax levels for 2012/2013, subject to the approval of the Revenue Budget 2012/2013. The Council Tax is calculated using the tax bases for the areas of the City Council and Hetton Town Council as confirmed by Council on 25th January 2012. There are a number of resolutions required to be made to determine the Council Tax including precepts from the Major Precepting Authorities and the Parish of Hetton Town Council;
- (h) the required statutory requirements that in summary mean that Cabinet is recommending to Council a proposal to set a Council Tax Requirement (previously the Net Budget Requirement) that will mean a freeze to the Council Tax for 2012/2013; and
- (i) changes to the Local Government Finance Act 1992 following the implementation of the Localism Act 2011.

(For copy report – see original minutes).

Councillor Speding reported that once again this was a very difficult budget as the Council was faced with significant Formula grant reductions and cost pressures resulting in a savings requirement of £28million for 2012/2013. He added that this came on top of almost £58million of reductions that was required in 2011/2012. He thanked Cabinet colleagues for working in a positive and constructive way to identify proposals to address this very difficult and challenging position.

Councillor Speding highlighted that in order to address the overall reductions required; savings had been identified as follows:

- £15million of savings coming from Directorate 3 Year Improvement Plans,
- Almost £8m of savings coming from the continued review of Strategic and Shared Services, ICT and Smarter Working, and

- £3million would be made available from a review of contingencies and third party spends.

He added that after taking account of these savings it was also proposed that £2m of transitional funding was temporarily applied to enable phasing of proposals, which would be replaced with additional savings in 2013/2014.

Cabinet Members were advised that the proposals represented a robust approach to ensure a balanced budget whilst trying as far as possible to protect frontline services.

Councillor Trueman referred to paragraph 6.6.3 of the report which highlighted the implementation of the Council's apprenticeship scheme within the Street Scene service of the Council. He reported that the scheme had recently received an award from the GMB at the national 'Apprenticeships: Quality and Equality' conference in London which he planned to present at a future Council meeting. He advised that the scheme was excellent and he had been honoured to be part of the presentation.

Councillor Speding then drew attention to Appendix D which had been tabled separately. He reported that a council tax freeze was proposed and that confirmation of the precept proposals from Northumbria Police and Tyne and Wear Fire and Rescue Authority might require an amendment to the final proposal. He advised that this course of action recognised the economic climate and the challenges facing the residents of the city and that the Council would continue to do everything it could to try to mitigate the impact of these external challenges.

In conclusion, Councillor Speding reported that as the future outlook was one of further government funding reductions, this, and on-going Government reviews on local government funding and welfare reform had made this year all the more uncertain. He assured Cabinet Members that in accordance with the Council's usual best practice, a medium-term approach to financial planning had been adopted in order to ensure that next year's budget was as sustainable as possible. He added that the medium term strategy was fully set out at Appendix E and represented an important planning tool that would be regularly updated as new information emerged.

Consideration having been given to the report, it was:-

6. RESOLVED that it be recommended to Council:-

- (i) to approve the proposed Revenue Budget for 2012/2013 set out at Appendix I of the report,
- (ii) to note the medium term financial strategy 2011/2012 to 2014/2015 as set out in Appendix E,
- (iii) that it be noted that at its meeting on 25 January 2012 the Council approved the following amounts for the year 2012/2013 in accordance with the amended regulations made under Section 31B(3) of the Local Government Finance Act 1992:

- (a) £81,202 being the amount calculated by the Council, in accordance with the above regulation of the Local Authorities (Calculation of Council Tax Base) Regulations 1992, as its Council Tax Base for the year (Item T).
  - (b) £4,130 being the amount calculated by the Council, in accordance with the Regulations, as the amount of its Council Tax Base for the year for dwellings in the area of the Parish of Hetton Town Council.
- (iv) that the following amounts be now calculated by the Council for the year 2012/2013 in accordance with Sections 31 to 36 of the Local Government and Finance Act 1992:
  - (a) £729,371,824 being the aggregate of the amounts which the Council estimates for the items set out in Section 31A (2) of the Act taking into account all precepts issued to it by Parish Councils.
  - (b) £633,015,356 being the aggregate of the amounts which the Council estimates for the items set out in Section 31A (3) of the Act.
  - (c) £96,356,468 being the amount by which the aggregate at (iv) (a) above, exceeds the aggregate at (iv) (b) above calculated by the Council, in accordance with Section 31A (4) of the Act, as its Council Tax Requirement for the year (Item R in the formula in Section 31A(4) of the Act).
  - (d) £1,186.6268 being the amount at (iv) (c) above (Item R) all divided by Item T ((iii) (a) above), calculated by the Council, in accordance with Section 31B (1) of the Act, as the basic amount of its Council Tax for the year (including Parish precepts).
  - (e) £54,144 being the precept notified by Hetton Town Council as a special item under Section 34 (1) of the Act.

- (f) £1,185.9600 being the amount at (iv) (d) above less the result given by dividing the amount at (iv) (e) above by the Item T ((iii) (a) above), calculated by the Council, in accordance with Section 34 (2) of the Act, as the basic amount of its Council Tax for the year for dwellings in those parts of its area to which no Parish precept relates.
- (g) £1,199.0699 being the amount given by adding to the amount at (iv) (f) above the amount (iv) (e) divided by the amount at (iii) (b) above, calculated by the Council in accordance with Section 34 (3) of the Act as the basic amounts of its Council Tax for the year for dwellings in the area of the Parish of Hetton Town Council.

#### **Parts of the Council's Area**

(h)	<b>Valuation Bands</b>	<b>Hetton Town Council</b>	<b>All other parts of the Council's Area</b>
	A	£ 799.38	£ 790.64
	B	£ 932.61	£ 922.41
	C	£ 1,065.84	£ 1,054.19
	D	£ 1,199.07	£ 1,185.96
	E	£ 1,465.53	£ 1,449.51
	F	£ 1,731.99	£ 1,713.05
	G	£ 1,998.45	£ 1,976.60
	H	£ 2,398.14	£ 2,371.92

being the amounts given by multiplying the amounts at (iv) (f) and (iv) (g) above by the number which, in the proportion set out in Section 5 (1) of the Act, is applicable to dwellings listed in a particular valuation band divided by the number which in that proportion is applicable to dwellings listed in valuation band D, calculated by the Council, in accordance with Section 36 (1) of the Act, as the amounts to be taken into account for the year in respect of categories of dwellings listed in different valuation bands.

- (v) that it be noted that for the year 2012/2013, Tyne and Wear Fire and Rescue Authority and Northumbria Police Authority have supplied their best estimate of their proposed precepts, which have still to be approved by their respective Authorities. Consequently, the following amounts for both the Tyne and Wear Fire and Rescue Authority and the Northumbria Police Authority represent the provisional precepts for 2012/2013, which may be issued to the Council, in accordance with



Section 40 of the Local Government Finance Act 1992, for each of the categories of dwellings as follows:

**Precepting Authority**

<b>Valuation Bands</b>	<b>Northumbria Police Authority</b>	<b>Tyne &amp; Wear Fire and Rescue Authority</b>
A	£ 55.79	£ 48.77
B	£ 65.08	£ 56.90
C	£ 74.38	£ 65.03
D	£ 83.68	£ 73.16
E	£102.28	£ 89.42
F	£120.87	£105.68
G	£139.47	£121.93
H	£167.36	£146.32

- (vi) that having calculated the aggregate in each case of the amounts at (iv) (h) and (v) above but not having received confirmation of the precept in paragraph (v), the Council, in accordance with Section 30 (2) of the Local Government Finance Act 1992, estimate the following amounts as the amounts of Council Tax for the year 2012/2013 for each of the categories of dwellings shown below at this point in time. The exact levels will only become known once formal notification of the precepts from the Tyne and Wear Fire and Rescue Authority and Northumbria Police Authority are received.

**Parts of the Council's Area**

<b>Valuation Bands</b>	<b>Hetton Town Council</b>	<b>All other parts of the Council's Area</b>
A	£ 903.94	£ 895.20
B	£ 1,054.59	£ 1,044.39
C	£ 1,205.25	£ 1,193.60
D	£ 1,355.91	£ 1,342.80
E	£ 1,657.23	£ 1,641.21
F	£ 1,958.54	£ 1,939.60
G	£ 2,259.85	£ 2,238.00
H	£ 2,711.82	£ 2,685.60

- (vi) that they note that the proposed Council Tax Freeze for 2012/13 means that the Council does not need to hold a referendum on its proposed council tax. New regulations introduced by the government (Section 52ZC of the Local government Finance Act 1992) requires all billing authorities (councils and precept authorities (i.e. Fire and Police authorities)) to hold a referendum on their proposed level of basic Council tax each year from 2012/13 if they exceed government guidelines set out annually.

For 2012/13 the guideline increase for the council was 3.5%.

As the council is proposing a council tax freeze for 2012/13 then the above regulations have no impact for 2012/13.

- (vii) to note the views expressed by the North East Chamber of Commerce and Trade Unions.

### **Draft Council Tax Leaflet 2012/2013**

The Chief Executive and the Executive Director of Commercial and Corporate Services submitted a joint report (copy circulated) on the draft Council Tax Leaflet 2012/2013.

(For copy report – see original minutes).

Councillor Speding reported that the Local Government and Finance Act 1992 required Local Authorities to produce a Summary of Financial Information to accompany the annual Council Tax Bill. He added that the Council Tax Leaflet fulfilled this requirement and provided information on the progress the Council was making in relation to its priorities and the Council's finances, focusing on demonstrable service improvements and developments.

Councillor Speding highlighted that the financial information and related performance information could not be included at this time, but would be included following Council approval at its Budget meeting in March. A full copy of the Leaflet could not therefore be made available prior to Cabinet.

Cabinet Members were advised that the format was based on the 2011/2012 leaflet and a copy of the latest working draft was tabled at the meeting. Final sign off of the leaflet would be by the Leader, the Chief Executive and the Executive Director of Commercial and Corporate Services.

Consideration having been given to the report, it was:-

7. RESOLVED that the draft Council Tax Leaflet be noted, and, subject to the inclusion of financial and other information, once the Revenue Budget has been set, it be recommended to Council to approve it.

### **Association of North East Councils Limited**

The Executive Director of Commercial and Corporate Services submitted a report (copy circulated) to advise of a request from the Association of North East Councils Limited (ANEC Limited) for all member authorities to formalise their membership in accordance with the Articles of Association of the Company and to recommend a procedure for the exercise by the Council of Company Members' rights.

(For copy report – see original minutes).

The Chairman reminded Cabinet Members that the Council was a member of the Association of North East Councils (ANEC) which represented the interests of local authorities in the north-east area. He explained that as an unincorporated association, ANEC did not have its own legal identity, so in 2004 a limited company was formed – ANEC Limited.

The Chairman advised that at first the company did not trade but in 2009 the member authorities agreed that a company should be formed to employ the ANEC staff, hold contracts and leases and conduct litigation on the Association's behalf. He added that the original company ANEC Limited was retained but in November 2010 a new Memorandum and Articles for the company was adopted to better suit its role and each member authority was represented on the Directors Board of ANEC Limited by their Leader or Elected Mayor.

Cabinet Members were advised that under the new Articles, the members of ANEC Limited were the local authority members of ANEC however there was also a requirement under the Articles for membership applications to be submitted for approval by the directors. Therefore, to ensure full compliance with the Articles, each member authority had now been asked to submit a formal application for approval and Cabinet was therefore being asked to authorise the submission of the application.

The Chairman drew attention to the second aspect of the report which highlighted that each member authority was required to have an authorised representative to represent it at General Meetings of ANEC Limited and to vote on its behalf.

Consideration having been given to the report, it was:-

8. RESOLVED that the Chief Executive be authorised to:-

- (i) complete and submit an application for membership of ANEC Limited on behalf of Sunderland City Council in accordance with Article 3.3 of the Company's Articles of Association, and
- (ii) nominate, from time to time, a member or officer of the Council to act as the Council's duly authorised representative to exercise members' rights in the Company on behalf of the Council.

## **Sure Start Review and An Integrated Early Intervention Service**

The Executive Director Children's Services submitted a report (copy circulated) to provide an update on the current position in relation to the development of an early intervention service which included services delivered as part of the former Sure Start, Early Years and Childcare Grant (SSEYCG), to detail the outcomes of the recent formal consultation exercise and to request consideration of how changes would be implemented following consultation. In addition the report described proposals for service delivery for the 12 months from April 2012 and sought approval to develop proposals for commissioning services from April 2013 linked to the establishment of Area Boards.

(For copy report – see original minutes).

Councillor Smith reminded Cabinet Members that they had considered a report on 2 November 2011 on the proposed review of Sure Start Grant and Children's Centres and had agreed to three broad areas of further work in relation to this. She reported that consultation on the proposal to reduce the number of 'designated' children's centres from 17 to 5 with the other 12 centres remaining open as service delivery centres had taken place and that there had been clear support for this proposal.

Councillor Smith proposed that recommendation 2.1(i) of the report be agreed and also requested Cabinet Members agree the criteria set out at paragraph 5.1 of the report that would be used to decide which would be the designated centres. She explained that if agreed, once this criterion had been applied then these designations would be considered by the five area committees.

Councillor Smith then highlighted that it had been agreed that there should be consultation on increasing community involvement in children's centres through the introduction of Area Community Boards and there had been very strong support for this proposal also. She requested Cabinet Members to agree the recommendation at 2.1 (iii) of the report in order that work could begin to establish the Community Area Boards from April 2012.

Cabinet Members were reminded of the agreement made in November that arrangements be made to procure children's centre services for one year so that these were up and running from April 2012. Councillor Smith referred to Sections 6 and 7 of the report which detailed the services that were being commissioned and how these services would be focused on outcomes for young children and their families with some services targeted to meet the needs of those families needing the most help.

Councillor Smith then drew attention to the views of respondents on prioritising some services for those requiring extra help, as detailed in the report, which required careful consideration. She reported that any move towards more targeting of services would need to be communicated well so that families understood that some sessions would continue to be available to everyone and some would be targeted for specific families based upon needs. She added that this would become clearer through the Children's Centre programme of activities from April which was currently being developed.

In conclusion, Councillor Smith reported that implementation of the proposals in this report was set to achieve the full required efficiencies on a permanent basis from April 2012 of £1.777 million. She explained that the full detail of the savings would be known once the procurement of services had been completed and suggested that a further report be submitted to Cabinet in due course. She added that the programme of activities in children's centres from April and the developing picture for Area Community Boards would also be included in the further report to Cabinet.

Cabinet Members commended the report, particularly in the current climate when other authorities were having to close children's centres and thanked the Portfolio Holder and the Executive Directorate for bringing the proposals forward.

Consideration having been given to the report, it was:-

9. RESOLVED that approval be given to:-

- (i) the number of Children's Centres which are designated be reduced from 17 to 5 in the 5 localities and that the remaining 12 centres remain open as service delivery centres;
- (ii) the criteria set out in paragraph 5.1 of the report to be applied to determine which of the 17 centres will be the 5 designated centres and that Area Committees are asked to consider this;
- (iii) arrangements for Area Community Boards for each of the five areas are established from April 2012 in order that these Boards shape and direct service delivery and the further development of Children' centres moving forward;
- (iv) the proposal to prioritise families needing additional support being progressed, recognising that criteria relating to need will be clearly defined and that a range of services will continue to be delivered on a universal basis;
- (v) proposals to secure service delivery from April to be progressed in line with the recommendation of 2 November 2011 for one year from April 2012, with services from April 2013 identified and prioritised by the newly established Area Community Boards; and
- (vi) receive a further report on progress in due course.

## **Procurement of Refuse Collection and Gully Cleansing Vehicles**

The Executive Director of City Services submitted a report (copy circulated) on a proposal to procure 10 Refuse Collection Vehicles and 2 Gully Cleansing vehicles for the Highways Drainage Service and to support Streetscene operational services.

(For copy report – see original minutes).

Councillor Blackburn highlighted that the proposal to procure of 2 new gully cleansing vehicles was to replace the current vehicles which were 8 and 10 years old respectively and were no longer fit for service due to age and increasing cost of maintenance. He reported that the refuse collection service had a large number of vehicles ranging from 9 to 12 years old. He advised that the fleet manager had reviewed vehicle needs and the estimated minimum number that were required to be replaced due to age and potential future working arrangements, and concluded that 10 replacements were required.

Cabinet Members were informed that the total costs of procuring these vehicles was expected to be £1.75m and this would be reflected in annual revenue costs to the Council of around £250,000 through either leasing or hire arrangements whichever method provided the best value for money for the Council. Councillor Blackburn reported that these costs were essential to ensure the vehicles operated by the Council were fit for purpose and maintained efficiently and the cost for these vehicles would be met from existing revenue budgets from 2012/13.

Consideration having been given to the report, it was:-

10. RESOLVED that approval be given to procure 10 refuse collection and 2 gully cleansing vehicles to replace the equivalent number for use throughout the city.

## **Sunderland Strategic Transport Corridor (SSTC) – New Wear Crossing Progress Update**

The Executive Director of City Services and the Executive Director of Commercial and Corporate Services submitted a joint report (copy circulated) to advise of the receipt of the Funding Decision from the Department for Transport (DfT) and to seek endorsement of the continued implementation of the scheme.

(For copy report – see original minutes).

Councillor Blackburn reported that the DfT had confirmed on 14 December 2012 that Ministers had agreed to provide the Council with £82.563m of funding towards delivery of the new Bridge and had reconfirmed Programme Entry. He added that the local contribution of £35.079m remained unchanged from the level approved by Cabinet in September 2009 and drew attention to the funding decision letter, dated 21 December 2011, attached as an appendix to the report which detailed the DfT's conditions attached to its offer of funding.

Councillor Blackburn explained that the conditions were not unusual for a scheme of this nature with the DfT confirming that the Council must underwrite any additional cost above the estimated project cost of £117.642m, and that the funding offer of £82.563m was the maximum that DfT would contribute. He requested the Cabinet to endorse the continued delivery of the scheme through to full implementation and to authorise the Executive Director of City Services and Executive Director of Commercial and Corporate Services, in consultation with the Portfolio Holder for Attractive and Inclusive City, to finalise and submit an application for Full Approval to DfT following procurement of the main works contractor.

Councillor Blackburn reported that it was estimated that further expenditure of £981,000 in 2012 would be required to undertake the work required to achieve Full Approval. He added that subject to the confirmation of the statutory orders, the Council would be required to proceed with the acquisition of land through the implementation of the Compulsory Purchase Order and that, whilst not all land would be acquired prior to Full Approval, it was estimated that expenditure of £2.5m would be incurred due to the need to acquire some land earlier for the progression of the scheme.

Cabinet Members were also requested to authorise the Executive Director of City Services and Executive Director of Commercial and Corporate Services, in consultation with the Portfolio Holder for Attractive and Inclusive City, to enter into all necessary professional services appointments for the procurement and delivery phase of the project.

Councillor Blackburn highlighted that following the receipt of Full Approval of the project by DfT, the Council would be able to formally appoint the successful contractor, which would then enable construction to commence in early 2013. He added that further reports would be submitted as the project progressed, including the outcome of the procurement process, and to approve the appointment of the main works contractor prior to contract award.

Councillor Blackburn then drew attention to the summary of the ongoing maintenance costs associated with the scheme, which would vary from year to year, depending on the need for periodic planned maintenance or exceptional maintenance, such as re-painting the bridge masts and replacing the cables.

Consideration having been given to the report, it was:-

11. RESOLVED that:-

- (i) the DfT's funding offer of a maximum of £82.563m towards the SSTC – New Wear Crossing and the terms and conditions contained in the DfT's Funding Decision Letter of 21 December 2011 be noted;
- (ii) the continued delivery of the scheme through to full implementation be endorsed;

- (iii) the Executive Director of City Services in consultation with the Executive Director of Commercial and Corporate Services, in consultation with the Portfolio Holder for Attractive and Inclusive City, be authorised to finalise and submit an application for Full Approval to DfT in due course, subject to the confirmation of the statutory orders for the scheme and successful conclusion of the procurement process for the main works contract;
- (iv) the Executive Director of City Services and the Executive Director of Commercial and Corporate Services, in consultation with the Portfolio Holder for Attractive and Inclusive City, be authorised to enter into all necessary professional services appointments for the procurement and delivery phase of the project; and
- (v) further reports be submitted as the project progresses, including on the outcome of the procurement process, and to approve the appointment of, the main works contractor prior to contract award.

### **Social Care Contributions Policy for Personalisation**

The Executive Director of Health, Housing and Adult Services submitted a report (copy circulated) to seek agreement to the proposed Social Care Contributions Policy.

(For copy report – see original minutes).

Councillor Allan highlighted that the new Contributions Policy had been developed to allow the Council to bring its charging for social care in line with the changes needed to fully implement personalisation. He explained that this meant that customers would be assessed in order to calculate what they could afford to contribute towards their personal budget instead of being charged for individual services as had happened in the past. He added that the need to change was also set out by the Government through their Fairer Contributions Guidance.

Councillor Allan reported that a 12 week consultation had been conducted and there had been broad agreement of the policy with 62% of respondents agreeing that individuals should be asked to contribute what they can afford, and 60% agreeing that short breaks should be incorporated into the single contribution. He advised that it was therefore recommended that the maximum charge in Sunderland would remain unchanged at £108.70 per week pending the publication of the White Paper after which the issue would be reviewed. He added that if it was agreed today the new policy would be implemented in early March and that all customers would have moved over to a personal budget with a contribution calculated under this new policy by March 2013.

Consideration having been given to the report, it was:-



12. RESOLVED that the new Contributions Policy be implemented to support the ongoing implementation of personalisation within Social Care, consistent with the Council's vision for Social Care and with national developments.

### **Procurement of a Local HealthWatch in line with the Health and Social Care bill 2010-2011**

The Executive Director Health, Housing and Adult Services submitted a report (copy circulated) to seek approval for the commissioning of a Local HealthWatch.

(For copy report – see original minutes).

Councillor Allan highlighted the report which detailed the proposed arrangements for procuring the provision of a local HealthWatch and to award a contract to the successful provider following a tender process. He explained that under the proposals in the Health and Social Care Bill 2010 - 2011, the Council would have a duty to establish a Local HealthWatch in Sunderland from April 2013.

Councillor Allan reported that the proposals outlined in the report would enable the Council to commission local HealthWatch, a new independent consumer champion, to promote better outcomes in health and social care. He added that the procurement process would ensure that the successful organisation was able to carry out existing duties of the current Local Involvement Networks, known as LINKs, and the additional duties outlined in the bill.

Consideration having been given to the report, it was:-

13. RESOLVED that approval be given to procure a Local HealthWatch and it be noted that the exact value of the contract will not be confirmed until the Department of Health has completed its 2012/13 financial planning round.

### **Local Government (Access to Information) (Variation) Order 2006**

At the instance of the Chairman, it was:-

14. RESOLVED that in accordance with the Local Government (Access to Information) (Variation) Order 2006 the public be excluded during consideration of the remaining business as it was considered to involve a likely disclosure of information relating to any individual, which is likely to reveal the identity of an individual, the financial or business affairs of any particular person (including the Authority holding that information), to consultations or negotiations in connection with labour relations matters arising between the Authority and employees of the Authority and in respect of which a claim to professional privilege could be maintained in legal proceedings (Local Government Act 1972, Schedule 12A, Part 1, Paragraphs 1, 2, 3, 4 and 5).

(Signed) P. WATSON,  
Chairman.

**Note:-**

The above minutes comprise only those relating to items during which the meeting was open to the public.

Additional minutes in respect of other items are included in Part II.

**CABINET MEETING – 14 MARCH 2012**  
**EXECUTIVE SUMMARY SHEET – PART I**

**Title of Report:**

Reports of the meetings of the Personnel Committee, Part I held on 23 and 24 February 2012

**Author(s):**

Head of Law and Governance

**Purpose of Report:**

Presents the reports of the meetings of Personnel Committee, Part I

**Action Required:**

The Cabinet is requested to note the reports of the meetings held on 23 and 24 February 2012



(i)

**At a meeting of the PERSONNEL COMMITTEE held in the CIVIC CENTRE on THURSDAY, 23<sup>rd</sup> FEBRUARY, 2012 at 5.30 p.m.**

**Present:-**

Councillor Errington in the Chair

Councillors Gofton, Mordey, Speding, D. Trueman, H. Trueman, P.Watson, S. Watson, A. Wilson and Wood.

**Part I**

The Chairman advised the committee that the statement identifying the Localism Act 2011 – Pay Accountability Provisions report as potentially exempt, had been removed to allow the report to be considered in public. This would now be considered as Item 4a of the agenda.

**Apologies for Absence**

An apology for absence was submitted to the meeting on behalf of Councillor D. Smith.

**Declarations of Interest**

The following Councillors declared a personal interest in the report below as a Member of the body indicated:-

Item 4a – Localism Act 2011 – Pay Accountability Provisions	Councillor Mordey	Regional Pensions Committee
	Councillors Gofton, D. Trueman and H Trueman	Member of the Local Government Pension Scheme (LGPS)

**Report of the Meeting of the Personnel Committee, Part I**

The report of the meeting of the Personnel Committee held on 26 January, 2012 Part I (copy circulated) was submitted and consideration given thereto.

5.1 RESOLVED that the report of the meeting be noted, confirmed and signed as a correct record.

## **Report of the Meeting of the Appeals Panel, Part I**

The report of the meeting of the Appeals Panel held on 8 February, 2012 Part I (copy circulated) was submitted and consideration given thereto.

2. RESOLVED that the report of the meeting be noted for information.

## **Localism Act 2011 – Pay Accountability Provisions**

The Director of Human Resources & Organisational Development and the Executive Director of Commercial and Corporate Services submitted a joint report to set out the pay Implications of the Localism Act 2011 and recommending to Cabinet for approval the draft Pay Policy Statement, for subsequent adoption by Council and publication by 31 March 2012.

Members were advised that the relevant provisions of the Localism Act came into force on 15 January 2012. Section 38 of the Act required English and Welsh local authorities to produce an annual pay policy statement starting with 2012/13, setting out councils' policies for the financial year in relation to the remuneration of their senior staff/chief officers, the remuneration of their lowest-paid employees, and the relationship between the pay of chief officers and that of other employees.

The proposed draft Pay Policy Statement was appended to the report.

The Director of Human Resources and Organisational Development confirmed that no comments had been received from the Trade Unions.

In response to a question from Councillor Wood, members were advised that the Chief Executive's salary was a spot salary as opposed to a salary range.

- 5.2 RESOLVED that that the Personnel Committee endorse the pay implications of the Localism Act 2011 as set out in the report, and formally agreed the attached draft Pay Policy Statement for recommendation to Cabinet and adoption by Council and publication by 31 March 2012.

## **Local Government (Access to Information) (Variation Order) 2006**

At the instance of the Chairman, it was:-

5.3 RESOLVED that in accordance with Section 100(A)4 of the Local Government Act 1972, the public be excluded during consideration of the remaining business as it is considered to involve a likely disclosure of exempt information relating to an individual or information which is likely to reveal the identity of an individual or information relating to any consultations or negotiations, or contemplated consultations or negotiations in connection with any labour relations matters arising between the Authority and its employees (Local Government Act 1972, Schedule 12A, Part I, Paragraphs 1, 2 and 4).

(Signed) D. ERRINGTON,  
Chairman.

### **Note:-**

The above minutes comprise only those relating to items during which the meeting was open to the public.

Additional minutes in respect of other items are included in Part II.





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  - 2.1 Pay Structure
  - 2.2 Pay Awards
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  - 5.3 Pay policy decisions for the wider workforce  
  - 6.2 The Approach towards Payment for those Officers Ceasing to Hold Office Under or be Employed by the Authority

## 6.3 Introduction and Purpose

### 1.1 Aims and Purpose

This document sets out the Council's pay policy for 2012/13 aimed at supporting the remuneration of the workforce in a fair and transparent way. This Pay Policy Statement has been produced having regard to Government Guidance issued under section 38 of the Localism Act 2011. The policy is subject to annual review and must be approved by full Council for each financial year from 2012/13 onwards. It will be published on the Council's website as soon as reasonably practicable after approval or amendment.

It sets out:

- The methods by which salaries of all employees are determined.
- The detail and level of remuneration of the Council's most senior staff, i.e. 'chief officers' as defined by the relevant legislation.
- The remuneration of the lowest paid employees.
- The relationship between the remuneration of its Chief Officers and the remuneration of employees who are not Chief Officers.

The Code of Recommended Practice for Local Authorities on Data Transparency, published in September 2011 by the Government also sets out key principles for local authorities in creating greater transparency through the publication of public data. As part of the code, the Government recommends that local authorities should publish details of senior employee salaries. This pay policy forms part of the Council's response to transparency of senior pay through the publication of a list of job titles and remuneration in Appendix 1.

Further information on senior pay is published on the Council's website, alongside the Statement of Accounts. This can be accessed at:

[www.sunderland.gov.uk/Council and Democracy/Senior Pay Information](http://www.sunderland.gov.uk/Council%20and%20Democracy/Senior%20Pay%20Information),

or

Website URL: <http://www.sunderland.gov.uk/index.aspx?articleid=4994>

### 6.4 Not in Scope

The arrangements set out within this document do not extend to those employees who are employed within the control of school governing bodies.

### 6.5 Other legislation relevant to pay and remuneration

Under section 112 of the Local Government Act 1972, the Council has the power to appoint officers on such reasonable terms and conditions as the authority thinks fit, subject to Section 41 of the Localism Act 2011 (requirement for determinations relating to terms and conditions of chief officers to comply with the pay policy statement.)

In determining the pay and remuneration of all of its employees, the Council will comply with all relevant employment legislation. This includes legislation such as the Equality Act 2010, Part Time Employment (Prevention of Less

Favourable Treatment) Regulations 2000 and where relevant, the Transfer of Undertakings (Protection of Earnings) Regulations. There is also significant legislation relating to pensions and payments upon termination of employment.

Sunderland City Council is an equal opportunity employer. The overall aim of our Single Equality Scheme is to ensure that people are treated fairly and with respect. The scheme also contains a specific objective to be a diverse organisation which includes recruiting and retaining a diverse workforce and promoting equality and diversity through working practices. This pay policy forms part of our policies to promote equality in pay practices. By ensuring transparency of senior pay and the relationship with pay of other employees, it will help ensure a fair approach which meets our equality objectives.

#### 1.4 Context

In setting the pay policy arrangements for the workforce the Council seeks to pay appropriate salaries within the constraints of a public sector organisation. The pay policy is simply one aspect of the Council's whole approach to managing its human resources within the context of the Sunderland way of working, the Council's values and its organisational philosophy.

### **6.6 Pay Structure and general principles regarding the remuneration of all staff**

#### 2.1 Pay Structure

The Council operates a graded salary structure of incremental salary scales with a range of spinal column points (pay points), using the nationally negotiated pay spines as the basis for its local pay structures, together with some locally determined rates.

The large majority of the Council's (non teaching) workforce are covered by the National Joint Council for Local Government Services (NJC) pay spine (spinal column points 4-49), plus some additional local salary scales (spinal column points 50-58). Other appropriate nationally agreed spines apply to smaller defined groups of employees, such as Craft, JNC for Youth & Community Workers, Employees covered by the Soulbury Committee Agreement, and the Joint National Council for Chief Officers (JNC) (see Paragraph 4).

The salary figures in this report are gross salary figures before deductions, such as salary sacrifice, are made, at the discretion of the employee.

#### 6.7 Pay Awards

National and Provincial Agreements for the Council's workforce include the negotiation of collective agreements on pay and conditions, which are reviewed and negotiated annually, through agreements of the relevant national bodies such as the National Employers' Organisation for Local Government Services, on behalf of all local authorities in England and Wales,

and the signatory Trade Unions. The annual pay awards, if any, take account of a number of issues, including what can be agreed with the relevant trade unions, the general economic situation, the results of consultation, the affordability position of local authorities, the average rate of pay settlements across the economy, the employee relations climate, etc. While the Council as an Employer is consulted as part of the negotiation process, it does not control the level of any national pay award.

#### 6.8 Grading of posts

The grading of posts is determined by either the Cabinet, following the consideration of recommendations from the Council's Personnel Committee or under delegated powers by the Director of HR & OD. For some categories of staff, job evaluation techniques are used.

#### 6.9 Appointment to new and existing posts

Appointments are made in accordance with the Council's Code of Practice on Recruitment and Selection. For posts graded on incremental scales, appointments are normally made at the minimum of the salary grade, with employees progressing to the maximum point of the salary range via annual incremental progression where applicable, subject to relevant criteria being met. While provision exists to appoint above the minimum of the grade, this is applied in exceptional circumstances only. The equality impact of the decision is a key issue, and it is imperative that anomalies are not created as a result of such decisions. In cases where the criteria to appoint above the minimum of the grade is met, comprehensive records need to be maintained and monitored on an ongoing basis, for use in assessing recruitment and retention trends and for monitoring purposes.

#### 6.10 Market Pay

From time to time it may be necessary to take account of the external pay levels in the labour market in order to attract and retain employees with particular experience, skills and capacity. Where necessary, the Council will ensure the requirement for such is objectively justified by reference to clear and transparent evidence of relevant market comparators, using data sources available from within the local government sector and outside, as appropriate.

#### 6.11 Temporary pay supplements

Where employees temporarily undertake either the full range of duties of a higher graded post or a proportion of the duties of that post, a commensurate salary may be paid.

### **3. Senior Management Information**

### 6.12 Definition of Senior Management

For the purposes of this statement, senior management means ‘chief officers’ as defined within the Localism Act. Specifically:

- “2 (a) The head of its paid service designated under section 4(1) of the Local Government and Housing Act 1989;
- (b) its monitoring officer designated under section 5(1) of that Act;
  - (c) a statutory chief officer mentioned in section 2(6) of that Act;
  - (d) a non-statutory chief officer mentioned in section 2(7) of that Act;
  - (e) a deputy chief officer mentioned in section 2(8) of that Act.”

## 3.2 Key Principles

6.13 The Chief Officer pay policy is designed to be easily understood and be transparent to the post holders, key stakeholders and the public. The structure and level of the pay arrangements is designed to enable the Council to attract, motivate, and retain key senior talent for the authority.

6.14 The policy is based upon salaries with clear differentials between levels of work/job size, within a range that is affordable now, will remain so for the medium term, and will be subject to review to ensure it continues to remain fit for purpose. It is intended that the authority will market test the rates of pay when vacancies arise, as part of consideration on whether or not roles continue to be required within the context of the Council’s priorities and commitments at that time.

6.15 These posts do not attract performance related pay, bonuses or any other additions to basic salary. This approach enables the Council to assess and budget accurately in advance for the total senior pay bill over a number of years.

6.16 In setting the pay policy for senior staff, a market position has been established that aims to attract and retain the best talent available at a senior level within a national recruitment context, to lead and motivate the Council’s workforce that is rewarded under a nationally agreed negotiating framework.

- v) The remuneration for roles at this level have all been set following independent advice from external consultants, Aquarius:  
[www.aquariusconsultants.com](http://www.aquariusconsultants.com)
- vi) Other terms and conditions of employment for this group are as defined within the Joint Negotiating Committee for Chief Officers of Local Authorities Conditions of Service handbook, with discretion to set actual pay levels at a local level, but within a national negotiating framework. These national provisions are supplemented by the Council’s local employment policies. These posts are part of the nationally defined Local Government final salary pension scheme.

#### 6.17 Individual elements of the remuneration package:

a) Chief Executive

The current salary of the post is £175,699.

b) Deputy Chief Executive and Executive Directors

The current salary of these posts fall within a range of £107,572, rising to a maximum of £128,063. The posts are: Deputy Chief Executive; Executive Director of Childrens Services; Executive Director of City Services; Executive Director of Commercial and Corporate Services and Executive Director of Health Housing and Adult Services.

c) Deputy Executive Directors and Corporate Directors

The current salary of these posts fall within a range of £81,960 - £97,327. The posts are Deputy Executive Director of Childrens Services; Deputy Executive Director of City Services; Assistant Chief Executive; Director of Communications and Corporate Affairs; Director of Human Resources and Organisational Development.

d) The designated Monitoring Officer, which is the Head of Law and Governance, is paid within a range of £70,924 - £84,966.

e) Heads of Service and other officers reporting directly to one of the statutory or non-statutory chief officers listed in (b), (c) and (d) above. The current salaries of these posts fall within four different ranges: Band 1 (£71,982 - £85,725); Band 2 (£63,325 - £75,863); Band 3 (£56,157 - £65,111) and Band 4 (£53,272 - £57,643).

The designated Returning Officer for the Council, who is the Head of Paid Service, also carries out the role of Acting Returning Officer at UK parliamentary elections and local returning/counting officer at European elections and at other referenda or electoral processes that occur from time to time. These additional roles usually carry an entitlement to payment from central government budgets at levels set by order in relation to each poll. The payment scales for national elections are set out in a Statutory Instrument laid before Parliament in respect of each individual election and are applied to both national and local elections. The Statutory Instruments are published on [www.legislation.gov.uk](http://www.legislation.gov.uk)

#### 4. Lowest Paid Employee Information

##### 6.18 Definition of Lowest paid employees

Those staff who are employed in jobs which are paid at Grade A level (spinal column point 4)( £12,145 per annum for a full time 37 hour week), this being the lowest salary paid to employees other than apprentices. This salary is only paid to newly appointed Cleaners for the first six months of service. The salaries attributable to apprentices depend on age and are those set out within the National Minimum Wage legislation. Given the specific nature of

these appointments, the Council does not include apprentices within the definition of lowest paid employees for the purposes of this policy statement.

## **5. The relationship between the highest and lowest paid employees**

### **6.19 Pay Multiples**

In setting the relevant pay levels a range of background factors were taken into consideration for senior pay alongside the significant scope and scale of the authority in the national context. For example, the scope and scale of the Chief Executive's post encompasses responsibilities commensurate with a large city authority, including responsibility for:

- The provision of wide ranging services to 281,463 residents of Sunderland.
- An overall budget of £744.7 million for service delivery and the more than 700 services the Council provides.
- Undertaking the role of the Head of Paid Service to 12,400 employees.
- Lead Policy Advisor to the Council's 75 Elected Members.

One way of measuring pay relationships is to use a pay multiple.

The ratio between the pay of the Chief Executive in Sunderland City Council and the lowest paid workers is 14.47:1. This meets the Government expectation that the pay multiple relationship should be below 20:1 in local government.

### **6.20 Pension Contributions**

During 2012/12 the employer will contribute 14.4% of pensionable pay to the pension fund for all employees in the Local Government Pension Scheme. Employees also pay a contribution of between 5.5% and 7.5%.

### **6.21 Pay Policy Decisions for the Wider Workforce**

These are determined by the Cabinet, following consideration of recommendations of the Council's Personnel Committee which is composed of elected members. This ensures that decisions in relation to workforce pay are taken by those who are directly accountable to local people.

## **7. The approach towards payment of those officers ceasing to hold office under or be employed by the Authority**

Payments to Chief Officers upon termination of their employment are determined by the Council's Personnel Committee. Decisions are made in line with the Council's policies which apply to all employees. The Council does not re-engage former Chief Officers.





(ii)

**At a meeting of the PERSONNEL COMMITTEE held in the CIVIC CENTRE on 24 FEBRUARY 2012 at 2.00 pm.**

**Present:-**

Councillor Errington in the Chair

Councillors Mordey, D. Trueman, H. Trueman, and P. Watson.

**Also Present:-**

Councillor Charlton (Portfolio Holder – Prosperous City – Observer).

**Part I**

**Apologies for Absence**

Apologies for absence were submitted to the meeting on behalf of Councillors Gofton, Speding, D. Smith, S. Watson, A. Wilson and Wood.

**Receipt of Declarations of Interest**

There were no declarations of interest.

**Local Government (Access to Information) (Variation Order) 2006**

At the instance of the Chairman it was: -

1. RESOLVED that in accordance with Section 100(A)4 of the Local Government Act 1972, the public be excluded during consideration of the remaining business as it is considered to involve a likely disclosure of exempt information relating to any individual or information which is likely to reveal the identity of an individual (Local Government Act 1972, Schedule 12A, Part I, Paragraphs 1 and 2).

(Signed) D. ERRINGTON,  
Chairman.

**Note:-**

The above minutes comprise only those relating to Items during which the meeting was open to the public.

Additional minutes in respect of other items are included in Part II.

<b>CABINET MEETING – 14 MARCH 2012</b>  <b>EXECUTIVE SUMMARY SHEET – PART I</b>	
<b>Title of Report:</b>  Public Health Transition	
<b>Authors:</b>  Chief Executive and Executive Director of Health, Housing and Adult Services	
<b>Purpose of Report:</b>  - To inform Cabinet of the proposals on the Health and Social Care Bill to transfer responsibility for Public Health to Local Authorities by April 2013 and endorse the transition plan for Sunderland	
<b>Description of Decision:</b>  Cabinet is asked to agree to - endorse the public health transition plan for Sunderland and agree the implementation of the plan by April 2013	
<b>Is the decision consistent with the Budget/Policy Framework?</b> <span style="float: right;"><b>Yes</b></span>	
<b>If not, Council approval is required to change the Budget/Policy Framework</b>	
<b>Suggested reason(s) for Decision:</b>  To comply with requirements set out by the Department of Health that states that both the PCT and Council must endorse their local public health transition plan.	
<b>Alternative options to be considered and recommended to be rejected:</b>  There are no alternative options recommended for approval as the transition plan has been developed on the basis of an agreed national framework with consultation carried out throughout the process.	
<b>Is this a “Key Decision” as defined in the Constitution?</b> <div style="text-align: right;">Yes</div>	<b>Relevant Scrutiny Committee:</b>  Health and Wellbeing
<b>Is it included in the Forward Plan?</b> <div style="text-align: right;">Yes</div>	



**Public Health Transition**

**Joint report of the Chief Executive and the Executive Director of Health, Housing and Adult Services**

**1. Purpose of Report**

- 1.1 To inform Cabinet of the proposals on the Health and Social Care Bill to transfer responsibility for Public Health to Local Authorities by April 2013 and endorse the transition plan for Sunderland

**2. Description of Decision**

- 2.1 Cabinet is asked to agree to endorse the public health transition plan for Sunderland and agree the implementation of the plan by April 2013.

**3. Introduction**

- 3.1 As part of the overall Health and Care Reforms, Public Health will be transferred to Local Authorities by April 2013 with the demise of Primary Care Trusts. At the same time other elements of PCTs will transfer to new arrangements including the Clinical Commissioning Groups (CCGs) and also the development of Public Health England.
- 3.2 To transition Public Health, primary care trust clusters and local authorities must ensure clinical governance systems are in place during 2012-13 for all relevant services to be commissioned by councils, and test the new arrangements for specific public health functions including emergency planning, resilience and response.
- 3.3 During the shadow year 2012-13 the Department of Health expects that shared and robust transition plans are in place and are delivered between the PCTs and councils. This includes:
  - Contribute to the development of the vision and strategy for the new public health role in local authorities.
  - Develop robust transition plans for functions, systems, and services.
  - Prepare local systems for new commissioning and contracting.
  - Ensure robust governance arrangements are in place during the transition year.
  - Ensure delivery of the public health delivery plan for 2012-13.
  - Prepare for and undertake formal transfer of staff, including appropriate mechanisms for consulting with staff and trade unions.
  - Participate in effective communications and engagement to give confidence to the public, providers and other stakeholders.

- 3.4 The responsibilities for public health transferring to local authorities includes commissioning services which cover issues such as anti-smoking campaigns, interventions to tackle obesity and comprehensive sexual health services. Some of the specific services that councils will have responsibility for will be:
- Alcohol and drug misuse services.
  - Public health services for children and young people aged five to nineteen.
  - The national child measurement programme.
  - Locally-led nutrition initiatives.
  - NHS health check assessments.
  - Public mental health services.
  - Dental public health services.
  - Comprehensive sexual health services, including testing and treatment for sexually transmitted infections, contraception outside of the GP contract and sexual health promotion and disease prevention.
- 3.4 There will be flexibility in the commissioning duties local authorities take on; while some will be statutory others will be discretionary and guided by the public health outcomes framework, the local joint strategic needs assessment and the joint health and wellbeing strategy.
- 3.5 Local authorities may also commission services under their health improvement duty, which may fall outside of the set list of commissioning responsibilities.
- 3.6 The government has said that it will provide a ringfenced public health grant to support local authorities in carrying out their new public health functions.
- 3.7 The DH has published shadow allocations for 2012-13 to help local authorities prepare for taking on formal responsibility in 2013-14. The allocations are based on an analysis undertaken by the DH of 2010-11 spend on public health activity. A total £5.2bn has been identified nationally for public health commissioning, with the DH indicating £2.2bn of this will be allocated to local authorities in future.
- 3.8 The indicative amount for Sunderland is £19.468m, equating to £65 per head of population which is the north east average. The national average is £40 per head, and ranges from £65 per head in the North East (the highest) to £27 per head in the East of England, South East and South West regions. The current 'shadow' allocations are based on actual spend, however it is intended to move to a distribution formula, possibly in time for 2014/2015 allocations. Given that the North East currently has the highest spend, per head of any English region we are anxiously awaiting information on the funding formula to understand how that will impact on future funding allocations.

- 3.9 The DH is to undertake further work during 2012-13 to inform the 2013-14 allocation which is to be published by December 2012.
- 3.10 The new Public Health scheme will focus on outcomes. A new Public Health Outcomes Framework sets out key indicators of public health from the wider determinants of health through to effectiveness in reducing premature mortality. The overall goals will be to increase healthy life expectancy and reduce health inequalities.
- 3.11 Public Health England will be the new body set up that will also come into being on 1<sup>st</sup> April 2013 and it will be responsible for advocating public health in England. It will have four regional hubs and a series of local units. Approximately 5,000 employees within existing organisations, such as the Health Protection Agency, will transfer to Public Health England in April 2013.

#### **4. Current Arrangements in Sunderland**

- 4.1 Within Sunderland, the Director for Public Health and her senior team have been working closely with the senior management within the Council and as part of the governance arrangements, established a joint Public Health Transitions team.
- 4.2 There has also been close working between the South of Tyne PCT and the three associated councils and as part of the governance arrangements, a Public Health working group has been established to cover generic issues that impact on all three councils.
- 4.3 Regular progress updates have been reported to the Sunderland Early Implementer Health and Wellbeing Board which is chaired by the Leader of the Council and includes representatives from the PCT, the CCG, and includes the Director of Public Health.
- 4.4 Updates are also provided to the Health and Well Being Scrutiny Committee including the process on the transition of Public Health.
- 4.5 The Public Health Functions will be integrated within the “Sunderland Way of Working” Operating Model and during the transition year there will be clear governance and assurance arrangements developed between the PCT (as the current provider) and the Council.
- 4.6 A risk register of critical areas has been established. As additional guidance is published and on the basis of further discussions internally and with other North East local authorities, it is anticipated that mitigating measures will be in place before formal transition occurs.
- 4.7 A key deadline for Sunderland is the 5<sup>th</sup> April 2012 where the full and detailed transition plan must be submitted to the DH following approval by the respective Councils and PCTs.

- 4.8 By the end of March 2013 the PCT must have completed the formal handover of public health responsibilities and budgets to the Council.

## **5. Overview of the Public Health Transition Plan**

- 5.1 The Transition Plan (**See Appendix 1**) covers the key objectives:
- Ensuring a robust transfer of systems and services
  - Delivering public health responsibilities during transition and preparing for 2013/14
  - Workforce
  - Governance
  - Enabling infrastructure
  - Communication and engagement
- 5.2 Behind this plan are more detailed operating plans that cover the specific actions that are required, deadlines and a risk log. As the guidance on Public Health emerges over the next nine months the plans will be updated accordingly.
- 5.3 **The public health workforce** - From the beginning of April 2013 the Director of Public Health will be directly employed by the council and the current public health workforce, will be transferred to the council. The detail is still to be fully determined.
- 5.4 **Commissioning** - From 2013 the public health funding (currently £5.2 billion nationally) will be divided between Public Health England, Commissioning Support Organisations and the NHS Commissioning Board as functions transfer to new structures. It will be essential that local commissioners, i.e. the Clinical Commissioning Group and the Local Authority work together to target funding and commissioning of services to health improvement priority areas in order to improve health outcomes.
- 5.5 The Health & Wellbeing Strategy, informed by the refreshed JSNA will guide future commissioning plans. Current activity is examining what outcomes are achieved with the current Public health funding held by the PCT whilst also establishing the Council's current spend on health improvement related activity. This will help to build up a current health spend picture in Sunderland.



- 5.7 The Clinical Commissioning Group is engaged in discussions about the SoTW Commissioning Intentions for 2012/13. Recognising that health improvement services will not be within its commissioning remit in the future the CCG has asked public health teams and the PCTs to facilitate the detailed work in these areas. Discussions are currently underway over a limited number of clinical service areas where the CCG will lead the 2012/13 Commissioning round and a number of these link with the inequalities and health improvement agenda, e.g. ensuring people with learning disabilities receive primary care health checks.
- 5.8 Once the above exercises are carried out, as part of transition a full overview of commissioning will be summarised to then align with the work on the JSNA and emerging Health and Wellbeing Strategy. As part of this there will need to be an alignment of commissioning activity and cycles across all parties. This will help to also shape the delivery mechanisms within the local authority.
- 5.9 In addition to delivering services locally, joint delivery and commissioning of services sub regionally will be included in transition proposals, especially in respect of emergency planning.
- 5.10 **Performance monitoring** - The Public Health Transition plan will outline how performance is currently measured and how future monitoring will be developed. This will need to be a joint plan between the PCT and council as well as having overview from the Health and Wellbeing Board.
- 5.11 **Intelligence and Information management** - Consideration is being given to data that needs to be transferred to the Council's IT systems and that the capacity and capability of Public Health systems can be managed within the Council IT infrastructure.
- 5.12 Further guidance will be published by Public Health North East which will outline how information and intelligence should be transferred and shared.
- 5.13 **Communication, Consultation and Engagement** - As part of the ongoing development and engagement a number of workshops have been delivered and are planned to support the Transition of Public Health and future delivery of services.

## **6. Reasons for Decision**

- 6.1 To comply with the requirements set out by the Department of Health that both the PCT and Council must endorse their local public health transition plan.

## **7. Alternative Options**

- 7.1 There are no alternative options recommended for approval as the transition plan has been developed on the basis of an agreed national framework with consultation carried out throughout the process.

## **8. Equality Assessment**

- 8.1 As the Transition Plan is developed and actions implemented, detailed equality assessments will be completed – for example when considering the transition of staff over to the Council from the PCT and when developing the commissioning arrangements.
- 8.2 Work has already been undertaken on the Joint Strategic Needs Assessment with active engagement of providers, partners and the community and voluntary sector. Additional work has been done to analyse the specific needs of key groups in line with the protected characteristics within the Equality Scheme. Initial considerations of equality analysis have been undertaken and services have already identified potential impacts on particular groups and are planning further detailed equality analysis as the proposals are further developed.
- 8.3 Work will also be done on a privacy impact assessment to ensure data privacy is maintained as services transition.

## **9. Relevant Consultations**

- 9.1 Early Implementer Health and Well Being Board has been fully involved in the development of transition planning with input from both the Adults' Board and Children's Trust.
- 9.2 Health and Well Being Scrutiny Committee has been kept up to date with the evolving changes to public health.
- 9.3 The ongoing engagement on the Joint Strategic Needs Assessment and the Health and Wellbeing Strategy will help inform the work going forward.
- 9.4 Parallel engagement arrangements are also taking place in the PCT and with public health staff.

## **10. Background Papers**

- Equity and excellence: Liberating the NHS dated July 2010
- Public Health White Paper - Healthy Lives, Healthy People, November 2010
- Liberating the NHS: Legislative framework and next steps, December 2010

- Health and Social Care Bill 2011
- Early Implementer Health and Wellbeing Board – Public Transition Updates in November 2011 and February 2012
- The New Public Healthcare Summary and Information Sheets, DoH, December 2011
- Public Health Outcomes Framework, January 2012





# **Sunderland Public Health Transition Plan 2012/2013**

**19 February 2012**

## **EXECUTIVE LEADS**

**Sarah Reed Assistant Chief Executive Sunderland City Council  
Nonnie Crawford Director of Public Health Sunderland TPCT & City Council**

## Background

The Health and Social Care Bill is currently under discussion in the House of Lords as part of its legislative journey and sets out a radical plan to reform the commissioning of healthcare and the delivery of public health. New statutory entities are to be created and are already in development including: Clinical Commissioning Groups (CCG), the NHS Commissioning Board (NHSCB), Healthwatch (HW), statutory Health and Wellbeing Boards within top tier local authorities (HWBB) and a national public health agency, Public Health England (PHE).

A summary of the reformed public health system was published as a series of factsheets in December 2011 (The New Public Health System, Public Health England's (PHE) Operating Model, and Public Health in Local Authorities, DH); these define the roles and responsibilities of PHE and local authorities. These are summarised below:

- **Local Government leading for public health** – emphasises the role of local government as shapers of place and tackling inequalities. It highlights importance of close NHS engagement and local political leadership. Health and wellbeing should be incorporated across the local government agenda. Local Authorities will have a duty to promote the health of their population. Directors of public health will be employed by local authorities (LAs), jointly appointed by PHE and LAs. Councils will be mandated to provide: sexual health services, NHS health checks, National Child Measurement Programme, public health advice to NHS Commissioners and ensure plans are in place to protect the health of the public. Shadow public health budget allocations will be made known during 2012/13
- **Local government's new public health functions** – include tackling the causes of ill-health, reducing health inequalities, promoting health, health protection and promoting social justice and safer communities. LAs will commission quality and safe services, while maximising user choice. Services prioritised for choice will be chosen through a diverse provider model according to the Joint Strategic Needs Assessment (JSNA), current delivery on the Public Health Outcomes Framework and the strategic journey identified through the local Health and Wellbeing Strategy.
- **The role of the Director of Public Health (DPH)** – Guidance on the appointments process, transition and key processes is being developed. The DPH will act as lead officer for health across all LA business, be accountable to the chief executive and have direct access to elected members.
- **Commissioning responsibilities** – a list of all public health services to be commissioned by LAs is provided and five are mandated (see appendix 1). The government reiterates that public health services

for children under 5 as well as child health information will rest with NHSCB, as will commissioning sexual assault services. Regarding health protection, a lead DPH within a Local Resilience Forum (LRF) area will coordinate public health input into planning and response, PHE will provide the services and NHSCB will appoint lead director for NHS preparedness and response. NHSCB will be responsible for national screening and immunisation programmes, informed and guided by PHE and DPHs. Further consideration is being given to the role of public health advice in supporting NHSCB.

- **Public health advice to NHS Commissioners** – this will be provided by specialists in LAs as a mandated function across the different stages of the commissioning cycle, such as strategic planning, designing shape and structure of supply, planning capacity and managing demand and monitoring and evaluation.
- **Workforce development- Professional, appraisal and support, and capacity building** – medical and non-medical public health specialists will be expected to undergo professional appraisal guided by the Faculty of Public Health. This will link with the managerial appraisal undertaken by local authorities.
- **Public Health England (PHE)** will promote a culture of subsidiarity focusing on support local action and only national action where it adds value. PHE will: deliver health protection services; lead public health delivery system; and support workforce developments. It will have a national office and four hubs working alongside NHS Commissioning Board (NHSCB) structures, acting in support of LAs. The chief executive will be operationally independent, with non-execs on the advisory board. The CMO will continue to provide advice to the Secretary of State (SoS) on population health and the public health system
- The **NHS** will continue to play an important role through commissioning (CCG) and provision of health services and ensuring fair access. It will also commission specific public health services (NHSCB) and seek to increase impact of health services on the public's health by making every clinical contact count.

### **The Local Transition Story : progress so far**

Locally we have been working jointly across Sunderland City Council and Sunderland Teaching Primary Care Trust on preparing ground work for these changes over the last nine months.

- A refreshed Joint Strategic Needs Assessment was produced during 2011/12, whilst work continues on Equality Impact Assessments /Impact Needs Related Assessments and an asset based approach to local areas needs.
- We initiated our 'Early Implementer Health and Wellbeing Board' in September 2011 and we are already engaged in evaluating what changes are required on its journey through shadow form (2012/13)

until it becomes a formal committee of the Council in April 2013 and assists in aligning the strategic and commissioning plans of a range of Sunderland Partners, Council, Clinical Commissioning Group and others (e.g. Safer Partnership) going forward.

- Significant time and effort is being put into the development of the Sunderland Health and Wellbeing Strategy and identification of priority workstreams going forward which will enhance and improve health and wellbeing for local people as individuals, families and communities.
- We have established arrangements within Sunderland City Council and NHS SoTW to take forward the workstreams involved in transition. The Sunderland PH Transition Board, chaired by Sarah Reed and Nonnie Crawford and the NHS SoTW/LA Group chaired by David Hambleton. NHS SoTW oversees the work from an NHS perspective through its overarching transition structures led by Moira Davison Director of Corporate Governance.

On the 20<sup>th</sup> January 2012 our first phase public health transition plans were considered and assured by the Regional Director of Public Health on behalf of NHS North. Since then there has been additional national guidance and intelligence received which impacts on this next planning and implementation phase. The next section identifies some of the implications of the work underway and the guidance currently available although over the coming 12 months we will see iterations of this as workstream processes deliver their outcomes and additional national guidance and local information informs decision making on the transition journey.

## **Implications**

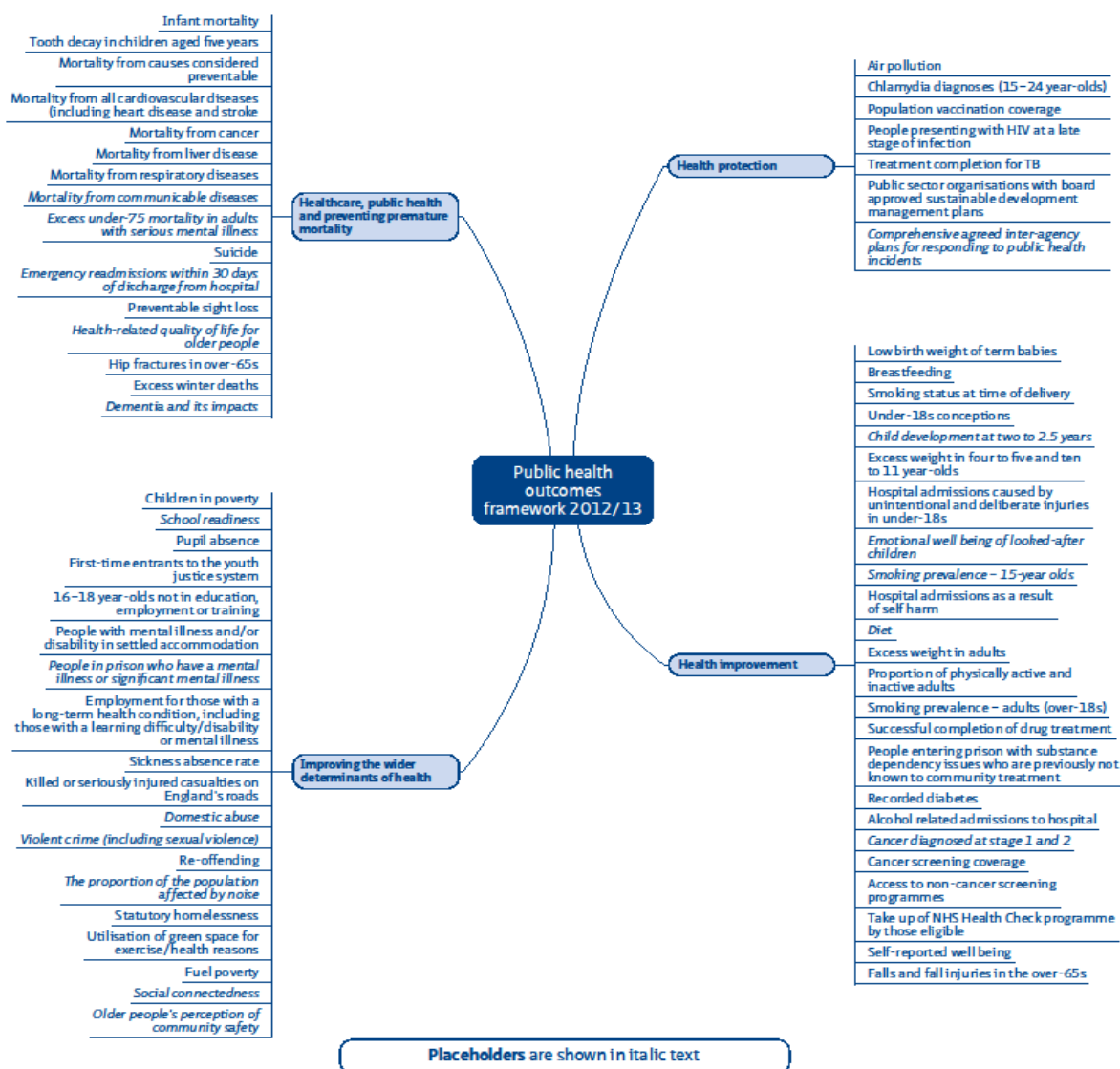
- **Public Health Outcomes**

In February, the Public Health Outcomes Framework, which complements the NHS Outcomes Framework and Adult Social Care Outcomes Framework was delivered. The diagram below identifies how the various elements of the outcomes framework map to public health priority areas, health protection, health improvement and accelerating quality improvement within health and social care on a population basis.

It is essential that our forward plans will contribute towards improved outcomes in the areas below which have equally been highlighted within our JSNA and are implicit in the strategic journey identified within our Health and Wellbeing Strategy. The processes and workstreams identified within the attached transition plan can be cross referenced to these outcomes and within the coming months we will have integrated this work into the Sunderland Outcomes Framework.



# Public health outcomes framework 2012/13



- **Financial Allocations**

Advice on the 2012/13 public health financial baseline allocations was published in mid February and this will be supplemented with more accurate information on the 2013/14 allocations by the end of the 2012 calendar year. Based on analysis carried out by the Department of Health on 2010-11 spend on public health, it is estimated that during 2012-13, the NHS will spend £5.2 billion on public health services. The table below shows the future commissioning route for this estimated spend.

<b>Future commissioning route</b>	<b>2012/13 allocation</b>
Local Authorities	£2.2bn
NHS Commissioning Board	£2.2bn
Public Health England	£210m
Department of Health	£620m
<b>Total</b>	<b>£5.2bn</b>

Of the local authority element approximately £19.468m will be allocated to Sunderland. , This equates to approximately £65/head of local population. The north east average is £65 with a range of £33 (Northumberland)-£99 (Middlesbrough), the national average is £40 with a range of £15 (Buckinghamshire) - £117 (Tower Hamlets)> Regional averages varying from £27 (South West) to £65(North East). Whilst we have been told by DH that the 13/14 allocations will be similar to these figures, there is an element of risk in planning on this assumption, as there are potential changes likely due to the Advisory Commission on Resource Allocation (ACRA) arrangements, any changes in the drugs income (Home Office and Police Commissioners), NHS Income (general austerity) and the implementation of the health premium (currently unclear). However the allocation is intended to support initial planning. For our future planning purposes the £19.468m figure will be used. This compares to £19.889m based on 2010/2011 information collected by the Department of Health in respect of baseline spend analysis on public health activity within Sunderland that in future would be commissioned by the local authority.

- **Integration and Transformation**

The early thinking on how the integration of Public Health from the NHS will continue to drive the Transformation agenda locally as identified in the Sunderland Ways of Working and the Sunderland Operating Model was

identified in our previous plan. Specific workstreams which will deliver the model will be led by task and finish groups, which will report to the Public Health Transition Group and are identified within the attached plan.

Integrating and leading different ways of working with each of the existing teams within Sunderland City Council is essential to ensure the successful delivery of public health outcomes. The Council currently delivers significant health improvement and protection roles through both strategic influencing and service delivery. There is scope to apply population health perspectives in these areas of work to improve public health outcomes.

In the domain of service improvement for public health, the focus is not solely to be on health care and social care services. A public health perspective to service improvement in all areas (e.g planning and urban space management) enables the commissioning and delivery of effective, efficient and equitable services.

We expect additional guidance during 2012 but are now in a position to work up our more detailed transition plans, accepting that these will require continuous updating and adjustment through 2012/13 as new information is made available to the system allowing outstanding decisions to be made and acted upon. It is essential that in order to assure a smooth and safe transition of a complex system of arrangements, that we pay due attention to ensuring that appropriate assurance is in place from both the 'sender' and current host of the public health function, Sunderland Teaching Primary Care Trust within the mantle of NHS South of Tyne and Wear, and the 'receiver' and future host of the public health function Sunderland City Council. This assurance needs to be clear at both the Executive Officer and Board / Cabinet levels of the two organisations. The successful outcomes of the transition are predicated on enhancing democratic legitimacy within healthcare and health and wellbeing decision making going forwards as well as establishing closer leadership arrangements through local political leaders, ie councillors and cabinet portfolio holders.

- **Information and Intelligence**

A specific area of the public health function relates to the sharing of information and intelligence for health improvement- this is more significant than access to raw data but is about its conversion into meaningful and useful information. The Information and Intelligence workstream will need to ensure that Sunderland City Council is able to benefit from the full range of information and intelligence workstreams that Public Health in the NHS currently receive. The public health team currently benefits from being part of the NHS and is able to access health information, but in the future, when public health is incorporated into local authorities, there may be restrictions in information sharing across organisations. There is ongoing national work to discuss information governance across organisation boundaries. A regional workstream has been initiated to assist PCTs and Councils in their planning for transition and we would recommend the Sunderland plan not being formalised in this area until the outcomes of the regional work are available.

Another area for review is in relation to the public health intelligence function. There is an opportunity to provide a public health perspective to the analytical support required for the Sunderland Joint Strategic Needs Assessment and to support commissioning including population healthcare advice to the broader NHS and to NHS commissioners. This will require a close working arrangement with the existing information and intelligence functions within the City Council and possibly the developing of Memoranda of Understanding (MoU) and Service Level Agreements (SLA) with other service providers (eg PHE, CSS).

- **Staffing**

Following the detail of discussions on how public health functions, system, programmes and services are to be integrated /commissioned/delivered from 1 April 2013, there is likely to be impact on both PH Staff and Sunderland City Council health improvement team is likely. The positioning of the Director of Public Health and team within the council's organisational structure builds on the ongoing Transformation of the Council and is highlighted in the Sunderland Operating Model. This is currently being quantified and though the future model is not fully established and may be impacted by HR guidance currently being worked on centrally It is essential through this transition, to ensure that leadership for public health is clear, agreed, enabled across all domains of public health practice, and across the life-course, and supported by chief officers and elected members.

- **Risk**

There are 2 elements to risk, that during wider NHS transition which has been identified to this point and which we are putting plans in place to mitigate (reviewed monthly) but there is also risk going forward and a number of work programmes are underway e.g. looking at indemnification, commissioning arrangements etc. These areas again require constant surveillance to ensure smooth transition arrangements during 13/14. Workstreams identified in the attached plan are all being risk rated and reviewed moving forwards. Significant risk is felt to attach to smooth transition of mandated functions with particular concern around the emergency planning function in the absence of granular detail over arrangements post 12/13. There is also a distinct lack of clarity over the arrangements for those parts of the PH function which will either be commissioned or quality assured by other parts of the system (PHE/NHSCB) with specific concern around arrangements for screening, immunisation and vaccination and infection control moving forwards

- **Equality and Diversity/Public Sector Equality Duty**

Whilst there is no direct impact during the pre transition year (12/13), as the JSNA and the Health and Wellbeing Strategy clarifies priorities for decommissioning and commissioning (whether strategic or actual) going forwards, cognisance will need to be given to Equality Impact Assessment (EIA) and Impact Needs Risk Assessment (INRA) in advance of decision

making around intentions across 13/14 and onwards to demonstrate our meeting of requirements under the duties.

- **Accommodation of staff**

Placing and accommodating PH staff in transition to the LA in such a way as to assist in delivering the integrated and transformative public health function will be required and managed through the transition process. This is not anticipated as high risk given the relatively small number of staff involved (max 25 fte) but is an opportunity.

- **Consultation**

HR Transition processes will include full consultation with relevant staff in Sunderland TPCT PH team and amongst Sunderland City Council staff where relevant e.g. around delivering of core functions or commissioning arrangements going forwards.

- **Commissioning and Procurement**

SCC will be mandated under the Health and Social Care Bill (when passed) to commission public health functions, systems, programmes and services utilising the ring fenced PH budget and all other means at its disposal. Discussions are already underway amongst the Council and partners over the best ways to achieve the benefits of aligned commissioning intentions and commissioning arrangements moving forwards. The transition of PH offers opportunities to model and pilot new arrangements in this area but the transition plan needs to ensure that proper account is taken of the range of legal, financial and operational issues in moving almost £20M worth of current contracts held with NHS , Private, Independent Sector and Voluntary Sector providers from one set of public sector arrangements to another. Again this will be a common act in a common timeframe across North East Local Authorities and there will be merit in establishing some common principles under which we can all operate safely. Processes which will deliver this secure transition are underway and are detailed in the PH transition plan.

## **Appendix 1 Mandated and Non mandated Public Health Functions, systems, Programmes and Services**

A further new and significant role for Local Authorities is to develop the commissioning of a range of integrated health improvement services as identified below:

- tobacco control and smoking cessation services
- alcohol and drug misuse services
- public health services for children and young people aged 5-19 (including Healthy Child Programme 5-19) (and in the longer term all public health services for children and young people)
- the National Child Measurement Programme
- interventions to tackle obesity such as community lifestyle and weight management services
- locally-led nutrition initiatives
- increasing levels of physical activity in the local population
- NHS Health Check assessments
- public mental health services
- dental public health services
- accidental injury prevention
- population level interventions to reduce and prevent birth defects
- behavioural and lifestyle campaigns to prevent cancer and long-term conditions
- local initiatives on workplace health
- supporting, reviewing and challenging delivery of key public health funded and NHS delivered services such as immunisation and screening programmes
- comprehensive sexual health services (including testing and treatment for sexually transmitted infections, contraception outside of the GP contract and sexual health promotion and disease prevention)
- local initiatives to reduce excess deaths as a result of seasonal mortality
- the local authority role in dealing with health protection incidents, outbreaks and emergencies
- public health aspects of promotion of community safety, violence prevention and response
- public health aspects of local initiatives to tackle social exclusion
- local initiatives that reduce public health impacts of environmental risks.

Only some of the above services are to be mandated and these identified mandatory services are:

- Sexual Health Services
- Health Protection including Emergency Preparedness
- Population healthcare advice to the NHS including Public Health Advice to NHS Commissioners
- The National Child Measurement Programme
- NHS Healthcheck Assessment

The commissioning of other services will be discretionary, guided by the Public Health Outcomes Framework (to be published), the local joint strategic

needs assessment (refreshed 2011/12) and the joint health and wellbeing strategy (under development).

## **Additional Information on Mandated PH Functions, Programmes and Services**

### **1. National Child Measurement Programme**

The Department of Health (DH) currently issues annual operational guidance for local areas on delivery of the NCMP. Guidance as setting out the requirements for the programme is available on the DH website:

**[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_129001](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_129001)**

### **2. NHS Health Check**

From April 2013, the intention is to require local authorities to deliver NHS Health Check assessments for eligible men and women (around 15 million people aged 40-74 in England). New public health responsibilities of local authorities, which will not be mandated, will include local activity on provision of lifestyle interventions – including intensive lifestyle interventions for those at high risk of diabetes, weight management, smoking cessation and physical activity interventions - as part of the NHS Health Check programme.

#### **Guidance**

The Department issues best practice guidance setting out how the NHS Health Check should be undertaken and how certain parameters and data should be measured and quality assured. The guidance also sets out thresholds for the tests that would trigger appropriate follow-up action and interventions, which is an essential part of the (NHS) Health Check programme. “Putting Prevention First. NHS Health Check: Vascular Risk Assessment and Management Best Practice Guidance”. Gateway reference 11473. April 2009. Online guidance is available at:

**[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_097489](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_097489)**

### **3. Public Health Advice to the NHS (“Core Offer”)**

From April 2013, the intention is to impose a duty on local authorities through Regulations to provide population based public health advice to NHS commissioners on the commissioning of NHS services. The regulations provide a means to ensure that specialist public health advice is provided by each local authority.

The intention is to ensure that public health advice remains central to NHS commissioning. This partially relates to the third element of public health sometimes referred population healthcare public health but which is essentially about driving quality improvement in NHS commissioning through using evidence base on quality and outcomes. The Association of Directors of Public Health defines this as including: *“quality; clinical effectiveness; support for commissioning; audit and evaluation; service planning; efficiency; clinical governance.”*

The provision of specialist public health advice will be a duty imposed on local authorities, but will be led by appropriately trained and accredited public health specialists, as defined by the Faculty of Public Health . Directors of Public Health will, among their other duties, advise and support Clinical Commissioning Groups on the population aspects of NHS services and will work closely with their local GPs to help identify, prevent and manage a range of conditions. To ensure that appropriate and high quality public health advice is made available, the Department is working closely with public health and NHS colleagues to ensure that a 'core offer' of high quality public health expertise, advice and analysis, from the Directors of Public Health and their teams based in local authorities, is available to healthcare commissioners in Clinical Commissioning Groups and health and wellbeing boards to draw upon when developing their local commissioning plans.

#### **4. Sexual health commissioning**

From April 2013, Local Authorities will commission comprehensive sexual health services. This includes all aspects of sexual health provision except:- Abortion services, sterilisation and vasectomy which will be commissioned by Clinical Commissioning Groups although there will be a further consultation on the most appropriate commissioning route for these services;

Contraception which is currently provided as an additional service in the GP contract, which will continue to be provided via the GP contract although it is recognised that many local authorities and PCTs offer assistance to young people in accessing contraceptive services through a range of nhs and non nhs providers. To complete, the sexual health commissioning loops, HIV treatment, considered a specialist service, will be the responsibility of the NHS Commissioning Board.

#### **LA Mandatory Functions within the commissioning of sexual health services**

Subject to the passage of the Health and Social Care Bill, Local Authorities will fulfil the following mandatory functions with regard to sexual health:- Local Authorities (and providers of sexual health care) must not share or disclose personally identifiable patient information received by any member of staff, except with the explicit, informed consent of the patient. However, there are some exceptions to this as follows:-

- o When information is disclosed to or shared with a member of the integrated care team in connection with that patient's treatment, including partner notification;
- o Where there is a serious risk to another person's health and if requested to do so by the appropriate legal authorities.

Local Authorities will be mandated to commission confidential, open-access STI testing and treatment services for all persons present in their local area (and not just people who are registered with a local GP), and that no charge should be made for any STI treatment, or supply of any drugs or medicines for STI treatment, provided through these services.



Local Authorities will be mandated to commission open-access contraceptive services for the benefit of all persons of all ages present in the area, including under 16s, and must meet all reasonable requirements for the provision of the full range of contraceptive methods (but not including sterilisation and vasectomy), by appropriately trained staff in line with national guidance. All contraception (including condoms) issued by these services should be provided without charge.

## **5. Steps Local Authorities must perform to protect the health of their local populations**

From April 2013, local authorities will be required through Regulations under new section 6C of the NHS Act to perform steps to protect the health of their local populations, in particular to ensure there are plans in place to protect the health of their populations from natural hazards, accidents, infectious diseases, terrorism and other health threats. This will be a broader responsibility than that currently owned and Local authorities will also continue with their existing responsibilities for planning and responding to emergencies involving a risk to public health.

1. Ensuring a robust transfer of systems and services GG/PL

Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
1.A Develop and agree arrangements as to how the local public health system will operate during 2012/13 in readiness for the statutory transfer in 2013	<p>Phased approach agreed, taking account of the wider NHS structural changes and changes to the LA operating model. Recommendations will be developed by the PH Transition Board and discussed at the LA/NHS SoTW group for onward decision making at EMT/Cabinet for the LA and the Directors Transition Group for NHS SoTW</p> <ul style="list-style-type: none"> <li>• Terms of reference required for Sunderland Public Health Transition Board including governance and decision making arrangements</li> <li>• Terms of reference required for LA/NHS SoTW high level group.</li> </ul> <p><i>What is the process for involving SCC in commissioning decisions that will impact post March 2013</i></p> <ul style="list-style-type: none"> <li>• To be included in LA/NHS SOTW high level group ToR</li> </ul> <p><i>What is the process to agree if functions</i></p>	<p>NC/SR</p> <p>TD</p> <p>NC/SR</p> <p>PL CH</p>	<p>Recommendations re transfer Apr 12. To be reviewed Jul 12, Oct 12, Jan 13.</p> <p>Transition Board ToR developed Feb 12 High Level group ToR developed Mar 12</p>		Legal disagreements re MoU-difficulty in establishing lines of responsibility & accountability, during 12/13

Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
	<p><i>should transfer prior to April 2013?</i></p> <ul style="list-style-type: none"> <li>Sunderland Transition Board to make recommendations re IF any functions should transfer prior to April 2013, informed by internal council mapping exercise re commissioning and finance (completion due end Feb 2012) and assessment of risks to delivery. If functions are to transfer MoU will be required.</li> <li>Recommendations will be made to EMT in the Council and Cabinet/HWB</li> <li>PCT Directors will approve any transfer of function prior to April 2013</li> <li>Agree MOU (if needed) between TPCT and LA</li> <li>PCT to identify all contracts which may transfer. LA to identify skills needed to undertake INRA and identify resources</li> <li>SCC's Impact Needs Risk Assessment (INRA) process (<i>equivalent of Equality Impact Assessment in STPCT</i>) will be used to ensure transition plans, including</li> </ul>		<p>MOU (if required) to be agreed 1 month prior to transfer</p> <p>INRA of JSNA to inform prioritisation processes April</p>		

Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
	any commissioning decisions, are robust, comprehensive and demonstrate due regard to the Public Sector Equality Duty.		12		
1.B. Develop a plan for the main elements of transfer including functions, staff and commissioning contracts for 2013/14 and beyond.	<p><i>What is the process to agree the public health vision?</i></p> <ul style="list-style-type: none"> <li>The Public Health vision will be informed by the refreshed JSNA. It will align to the H&amp;WB Board vision and the emerging H&amp;WB strategy.</li> </ul> <p><b>Functions</b> Public health functions will integrate into SCC's operating model. The processes for achieving this will be identified in the detailed plan</p>	GG/PL/ KG/CH	<p>First draft public health vision Apr 12.</p> <p>Agree v1.0 of detailed plan Mar 12. Review and refresh on a monthly basis</p>		



Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
	<p>recommendations to Sunderland Transition Board for consideration by SoTW/LA High Level Meeting (this does not exclude working with other LAs via existing communications channels)</p> <p><i>What is the process to agree if contracts should novate?</i></p> <ul style="list-style-type: none"> <li>• SCC to agree integrated model of wellbeing services informed by JSNA, operating model, budget modelling and mapping exercise</li> <li>• Prioritisation of expenditure of budget in relation to commissioned service to be agreed by H&amp;WB Board. To be reviewed following publication of 13/14 allocations</li> <li>• Public Health Transition Board to make recommendations to NHS SoTW re if contracts are to novate or if notice to be given on all contracts based on outcomes of INRA, prioritisation process, business continuity, legal and resources implications and the 12/13 baseline allocation. To be reviewed quarterly</li> </ul>		<p>Development of model Mar 12</p> <p>Prioritisation May 12. Review Jan 13</p> <p>Recommendations re novation/notice Jun 12. Review Sep 12 and Dec 12.</p> <p>Give notice if required Jun 12</p>		<p>agreement on services to be delivered on a larger than locality footprint</p>

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Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
	as additional information (eg 13/14 allocations) emerges.. <ul style="list-style-type: none"> <li>• SCC to agree Integrated Commissioning Model for public health informed by integrated (as per Operating model/Council transformation)</li> </ul>		Agree Integrated Commissioning Model Jul 12		
1.C Identify and agree transition milestones	<ul style="list-style-type: none"> <li>• Review milestones included in detailed plan</li> <li>• Additional milestones being identified as process continues</li> </ul>	NC/SR	Agree detailed plan v1.0 March 2012. Review and refresh on a monthly basis.		Some milestones dependent on guidance, others on agreement between LAs across SoTW
1.D Develop the JSNA in order to support the H&WB strategy	Refreshed JSNA 2011/12 has informed commissioning intentions (12/13) and will support development of H & WB Strategy <i>Has the process for gathering information on community engagement/perceived need been documented and embedded?</i> <ul style="list-style-type: none"> <li>• Embed process of refresh as new information emerges including ongoing engagement &amp; Equality Impact Assessment</li> </ul>	NC/NR	Paper detailing JSNA process as "business as usual" Feb 12  Appropriately timed refresh throughout 12/13 as data becomes available		Until Equality Impact Assessments completed, no assurance of full engagement

Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
	<ul style="list-style-type: none"> <li>Review JSNA process and outcomes against recently published guidance</li> </ul> <p><i>What is the process for agreeing public health information requirements and information governance by September 2012?</i></p> <p><i>What is the process to determine if/how NHS information be made available to SCC in future?</i></p> <p><i>What is the process for ensuring knowledge and skills to collate/analyse and present data will be available post 2013</i></p> <p>Regional work stream established to determine principles of access, skills available to ensure information needed is available in a timely manner. SCC has an intelligence hub and joint working re JSNA has been successful. Not a local priority until outcome of regional work known – see 1G re Core Offer to NHS Commissioners</p>		Develop		



Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
			<p>information and intelligence options paper Sep 12</p> <p>Information and intelligence arrangements identified Dec 12</p> <p>Information and intelligences services developed/commissioned as required Mar 12</p>		
1.E Develop a plan for the transition of commissioning of services to the LA	Current contracts identified and principles of integration into SCC commissioning agreed. Service reviews completed for commissioned services transferring. Commissioning identified as a workstream in detailed plan to build on the ongoing transformation of SCC operations to realise benefits of integration. Commissioning Intentions (12/13) identified potential risks to a	GG/BS/SR/PC	Agree detailed plan v1.0 March 2012. Review and refresh on a monthly basis.		<p>If EIAs not sufficiently robust then notice and/or recommissioning arrangements may be challenged</p> <p>If NHS SoTW do not wish to give</p>

Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
	<p>range of services. Process for agreeing whether contracts should novate or notice to be given detailed in 1.B above.</p> <ul style="list-style-type: none"> <li>Develop model of integrated service and commissioning model based on the recommendations of the work streams described in the detailed plan.</li> </ul> <p><i>What is the process for prioritising the budget?</i></p> <ul style="list-style-type: none"> <li>The DPH will make recommendations for prioritising the budget for 2013/14 informed by JSNA, INRA and modelling of 12/13 indicative budget to the Public Health Transition Board for onward consideration by EMT, Cabinet and/or the H&amp;WB Board (See 5.B below). This will be based on published 12/13 baseline allocations taking account of risk that 13/14 budget will be reduced and not published until December 2012. These will be reviewed following the publication of the 13/14 allocation.</li> <li>The Commissioning work stream will consider contractual arrangements</li> </ul>		<p>Proposed model for delivery of integrated health improvement services developed by April 12</p> <p>Indicative prioritisation of expenditure May 12.</p> <p>Final prioritisation of expenditure for 2013/14 Jan 13</p> <p>Commissioning plan to achieve new delivery</p>		<p>notice on all PH contracts before 31.03.12, SCC may be at financial risk during Q1 of 2013/14 if rfb does not cover contractual outgoings</p>

Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
	<p>and make recommendations to the Public Health Transition Board re commissioning arrangements for prioritised mandated and non-mandated services</p> <p><i>How will SCC get clinical input into areas not the responsibility of the CCG?</i></p> <ul style="list-style-type: none"> <li>Where clinical services are to be commissioned, the Commissioning Work stream will make recommendations to ensure the relevant clinical expertise is available for approval by the HWB via the Sunderland Transition Board</li> </ul> <p><i>Will SCC be required to comply with NHS standards e.g. You're Welcome?</i></p> <ul style="list-style-type: none"> <li>The Commissioning Work Stream will take account of current and future standards for services currently commissioned by the NHS, e.g. services free at point of delivery, You're Welcome, and make recommendations to the HWB via Sunderland Transition Board re if and how to commission</li> </ul>		<p>model developed by end May 12</p> <p>Clinical advice option paper developed Sep 12</p> <p>Clinical advice arrangements in place Mar 13</p> <p>Standards for 13/14 commissioned services reviewed Jan 13</p>		

Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
1.F Develop a clear plan for the transfer of appropriate commissioning arrangements to NHS CB and PHE	Contracts to transfer to NHS CB identified through NHS SoTW internal stock take <ul style="list-style-type: none"> <li>Develop legacy document and issues log for commissioning arrangements transferring to NHS CB and PHE</li> <li>Further clarification required before a detailed legacy/handover document can be developed.</li> </ul>	LR(KH)/ DH(FAD)	First draft of public health legacy document/ issues log Jun 12		Lack of clarity persists through 2012/13- requires central action
1.G Develop a description of a core offer for LA based PH advice to NHS Commissioners	<i>What is the process for agreeing the core offer? Will this include working with other organisations LAs and or CSS?</i> <ul style="list-style-type: none"> <li>Options paper being developed for SoTW, to be considered by DsPH/LA/CCGs and recommendations made to through SCC governance arrangements</li> <li>Arrange provision either directly or commissioned.</li> </ul>	NC/IP/DB/ ML /SR	Options paper developed Sept 12  Provision of core offer identified Dec 12  Core offer services		Inability to establish agreement for core PH offer to NHS commissioners to be established across larger footprint

Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
			developed/com missioned as required Mar 12		

## 2. Delivering Public Health Responsibilities During Transition GG

Objective	Progress and outstanding actions	Leads (PCT/LA GG/MO/KG /CH	Milestones	R/A/G	Risks
<p>2.A</p> <p>Develop a clear model for the delivery of mandated services during transition and in the new local public health service</p>	<p><b>During transition</b></p> <p>There are clear arrangements in place for the delivery of commissioned mandated services during transition (sexual health services and NHS Health Check Assessment) with a shift to Sunderland-based commissioning for these services from April 2012. Arrangements will continue for the measurement element of the NCMP by commissioned school nursing services during 2012/13 with data management continuing to be part of the Child Health System.</p> <ul style="list-style-type: none"> <li>• If functions transfer before Apr 13, commissioning arrangements for mandated services to be detailed in the MOU (if required)</li> <li>• Current arrangements will continue for the core offer to NHS commissioners, this will be detailed in the future options paper (see below). If staff providing this function transfer to an emerging organisation</li> </ul>		<p>MOU/SLA to be agreed if required 1 month prior to any transfer of functions</p>		<p>Lack of stability in the system and early transfer of staff could impact on coordination of response to health protection issues</p>

Objective	Progress and outstanding actions	Leads (PCT/LA	Milestones	R/A/G	Risks
	<p>the continuation of this service will be detailed in an SLA</p> <ul style="list-style-type: none"> <li>The HPA has identified arrangements for 11/12 and is making arrangements to test the system. Arrangements which have implications for 13/14 will be discussed at the LA/NHS SoTW meeting.</li> </ul>		Lead DPH arrangements for Health Protection June 12.		
	<p><b>New local public health system</b></p> <p>The detailed plan will identify actions and milestones to ensure that the new local public health service will deliver all mandated services.</p> <ul style="list-style-type: none"> <li>Core offer to NHS Commissioners paper being developed to show current and future options (see 1G above)</li> <li>After the commissioning model and supporting arrangements have been developed (see 1B) there will be a confirm and challenge session to test SCC commissioning arrangements in relation to mandated services with a focus on sexual health to ensure that issues relating to commissioning</li> </ul>		<p>Agree detailed plan v1.0 March 2012. Review and refresh on a monthly basis</p> <p>Confirm and challenge session re commissioning processes Oct 12.</p>		<p>Lack of clarity re hosting of/access to Child Health System</p> <p>Inability to agree where legacy costs reside of any currently unknown SUIs/Negligence claims/in system</p> <p>Transfer of commissioning arrangements from NHS funded to LA funded-</p>

Objective	Progress and outstanding actions	Leads (PCT/LA	Milestones	R/A/G	Risks
	<p>from a range of NHS providers, clinical governance and clinical advice to the commissioning process have been satisfactorily resolved.</p> <ul style="list-style-type: none"> <li>• Arrangements for the collection of data for the NCMP will be included in the information and intelligence workstream (see 1D above)</li> <li>• As further national guidance emerges health protection arrangements for 12/13 will be developed and tested.</li> </ul>		Health protection operating model finalised Dec 12		<p>unintended consequences</p> <p>NHSLA / CNST issues for LA as commissioners</p> <p>Support for Health Protection on establishment of HPA took many months to confirm through the development of an MOU/SLA. These transitions involve PHE /NCB /CSS /LA working together with the DPH the accountable Officer</p>
2.B Develop a clear model for the delivery of critical PH services/programmes	Screening and immunisation programmes currently commissioned on PCT cluster basis by public health staff and others in the organisation, including some whose current function align to	DH/NC			Lack of clarity re commissioning and delivery of screening and immunisation



Objective	Progress and outstanding actions	Leads (PCT/LA)	Milestones	R/A/G	Risks
locally during transition (screening programmes, immunisation programmes, drug & alcohol services and infection prevention & control)	<p>PHE. Arrangements for drugs &amp; alcohol services are as described in section 1.E for non-mandated services transitioning to the LA</p> <ul style="list-style-type: none"> <li>As staff who support the commissioning of screening and immunisation functions are aligned to different organisations their ongoing commitment to these programmes will be detailed in SLA/MOU with emerging organisations to ensure continued delivery on behalf of the PCT until 31/3/13.</li> <li>Issues throughout 2012/13 will be recorded in a log which will be part of a legacy document that will facilitate transition to PHE and the NHS CB</li> <li>Establish clarity re commissioning, delivery, quality and assurance of infection control. National guidance awaited.</li> </ul>		<p>SLA agreed 1 month prior to staff transferring to emerging organisations</p> <p>First draft legacy document and issues log June 12</p> <p>Appraisal of options for the commissioning and delivery of infection control assurance September 2012.</p>		<p>functions and overview/delivery of infection control</p> <p>LA require SLA with STFT over Infection Control</p>

### 3. Workforce PL

Objective	Progress and outstanding actions	Leads PCT/LA	Milestones	R/A/G	Risks
3.A Develop a plan to support the transition of workforce in line with the HR Concordat	<p>Workforce identified as major strand in detailed plan, although HR work is being led regionally.</p> <ul style="list-style-type: none"> <li>Develop a detailed plan as further guidance becomes available.</li> </ul> <p>Staff identified whose current functions in relation to PH functions, programmes and commissioned services align to future LA responsibilities. HR plans being developed including principles in the Public Health HR Concordat. HR work-stream needs to include the following:</p> <ul style="list-style-type: none"> <li><i>Consideration of if job descriptions be reviewed to ensure they are correct before consultation starts</i></li> <li>➤ <i>Development of a process to record decisions taken during transition which may affect the employment of groups and individuals</i></li> <li><i>Development of a process to consult and engage with employees in LA and PCT</i></li> <li><i>Development of a process to audit</i></li> </ul>	VT/JL/PC	Agree v1.0 of the detailed plan (Mar 12) complementary to the regional HR plan	Identification	Delays or lack of clarity in HR sender and receiver guidance
				Awaiting guidance	<p>Level of RFB and split between PH administrative and commissioned services funding</p> <p>HR guidance not published in a timely manner. Disagreement over implications of ringfenced budgets (rfb) and staff transition unresolved between NHS SoTW and Sunderland City Council.</p>

	<p><i>skills and competencies in LA and PCT. Will there be criteria to assess if posts in the LA and PCT are similar in content/responsibilities?</i></p> <ul style="list-style-type: none"> <li>• <i>Development of a process to appoint senior staff – DPH and consultants- is an assessment process needed?</i></li> <li>• <i>What will be the selection and appointment process for other transferring staff?</i></li> <li>• <i>What will be the process to ensure that interview panel members and senior managers are up to date with diversity and equality considerations?</i></li> <li>• <i>When will trainees on placement be identified to transfer to LA?</i></li> </ul> <p>Locally consideration needs to be given to:</p> <ul style="list-style-type: none"> <li>• Will there be an induction programme for staff transferring into the SCC?</li> <li>• What will be the arrangements for shared learning, career opportunities and CPD in SCC to ensure revalidation of professional qualifications?</li> <li>• Engagement with the Public Health Specialist Trainee Scheme</li> </ul>				<p>Unions to be included not usually within Staff Side7-BMA?</p>
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#### 4. Governance PL

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
4.A Develop and agree arrangements for accountability and performance monitoring arrangements for 2012/13	<p>New arrangements for accountability and performance management will only be needed if functions transfer prior to 1/4/13. If it is agreed that some functions will transfer, one option to agree accountability and performance monitoring arrangements is a MoU</p> <ul style="list-style-type: none"> <li>Sunderland Public Health Transition Board will make recommendations re if functions will transfer during transition year. (see 1A). If not, current arrangements will continue. If functions are to transfer, MoU to be developed</li> <li>Terms of reference needed for Public Health Transition Board</li> </ul>	MD/DH/SR	<p>MOU (if required) to be agreed 1 month prior to transfer</p> <p>Public Health Transition Board Terms of reference agreed Feb 2012</p>		
4.B Agree and test arrangements for key public health functions during transition	<p>Nationally mandated emergency planning arrangements will be implemented through Local Resilience Forums</p> <p>A regional factsheet has been produced (attached) and the HPA has summarised 12/13 arrangements</p> <p>Under current arrangements a lead DPH</p>	LR/NC/JJ/TC	<p>Operating model developed including lead DPH arrangements June 2012</p> <p>Exercise to test</p>		LAs do not agree Lead DPH assignment/alignment?

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
	will be nominated to LRF Health sub group and a process is needed for SCC to agree the lead DPH arrangements A summary of current arrangements for screening and immunisations produced by SHA is attached.		arrangements October 2012		
4.C Identify and agree arrangements for clinical governance arrangements during transition	Identified as work-stream in detailed plan. Currently out-with public health in PCT. During transition, arrangements will continue as current. An MOU may be developed should transfer of public health take place prior to Apr 13. An SLA with emerging organizations may be developed should staff supporting this function transfer. Options post transition currently being explored, preferred option is to commission this service from Commissioning Support Organisation. <ul style="list-style-type: none"> <li>• Develop this element of the detailed plan</li> <li>• Define breadth of clinical governance in services to be commissioned by SCC</li> <li>• Establish if regional guidance will assist in developing local arrangements</li> <li>• Establish process for commissioners to be assured providers have appropriate</li> </ul>	MD/CD/D H/NC	Agree v1.0 of detailed plan Mar 12. Review and refresh on a monthly basis  MOU/SLA (if required) to be agreed 1 month prior to transfer  Clinical governance option appraisal paper to be developed by September 2012  New arrangements developed and/or		Outcomes of Francis Enquiry may impact on this  Can LA engage with NHSLA? Is funding available

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
	<p>clinical governance arrangements in place</p> <ul style="list-style-type: none"> <li>Undertake option appraisal of post transition clinical governance arrangements and commission if appropriate.</li> </ul>		commissioned March 2013		
4.D Agree risk sharing (LA/PCT) approach to transition	<p>Risks identified and shared as part of the LA programme management process and the PCT Transition Process. Identification and mitigation of risk to be standing agenda item at transition meetings of LA and PCT.</p> <ul style="list-style-type: none"> <li>Maintain risk register as part of the detailed plan (LA)</li> <li>Update the NHS SOTW risk register to identify transition risks</li> <li>Ensure involvement of legal services and audit services in the transition process</li> </ul>	DH/CM/MD/SR / JoJo/DS	<p>PCT Public Health risk register to be maintained</p> <p>Agree v1.0 of detailed plan Mar 12. Review and refresh on a monthly basis</p>		Lack of NHS.LA agreement over risk sharing re legacy issues
4.E Agree the approach to sector led improvement <i>(transformation)</i>	<p>Transition plans aim to achieve transformational change in the delivery of public health services across Sunderland, through improved integration across functions, programmes and commissioned services with developing council services linked to the operating model. Additional work is needed in a range of areas (health improvement, health protection, health care</p>	DH/NC/IP/SR/NR /PC	<p>Integrated model for commissioned services developed Apr 12</p> <p>Integrated model for health improvement strategic influence</p>		<p>If EIA is not sufficiently robust then new model in relation to commissioned services may be challenged</p> <p>?Could charges</p>

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
	quality) through the development of integrated programmes and commissioning.		developed Jul 12 Commissioning plan to achieve new model developed May 12		be introduced??
4.F Establish structures to ensure the active engagement of the LA in the PCT approach to transition	<p>Public health transition is led by the Assistant CE in SCC with active engagement of broader team. Regular high level meetings between PCT cluster and 3XLAs and regular meetings of Sunderland public health team and council project team (see terms of reference of Sunderland Public Health Transition Board, NHS SoTW Directors Transition and Change Group and SOTW/LA High Level group). Plans developed jointly to ensure a good fit during transition and a number of sign-off processes have been agreed.</p> <ul style="list-style-type: none"> <li>• Complete detailed plan</li> <li>• Continue with PCT/LA and LA/PH meetings to oversee transition with robust terms of reference</li> <li>• SCC programme transition executive board to include DPH, DAS, DCS and Asst CE</li> </ul>	SR/NR/DH/NC	<p>Agree v1.0 of detailed plan Mar 12. Review and refresh on a monthly basis</p> <p>Agree ToR of Sunderland Public Health Transition Board Feb 12</p> <p>Agree ToR of LA/NHS SoTW group Mar 12</p> <p>Composition of the programme board executive and governance journey confirmed by Mar 12</p>		LA Chief Officers and Political Leadership may not support implementation timelines defined by DH

## 5. Enabling infrastructure GG

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
5.A Identify the capacity and capability to deliver the transition	Both this plan and the detailed plan identify leads for objectives. Transition Board meetings will provide a mechanism for the identification and addressing of capacity issues identified by work streams. <ul style="list-style-type: none"> <li>Ensure risks of capacity shortfall and actions to mitigate are identified on the risk register and regularly reviewed</li> </ul>	NC/SR	Capacity issues standard agenda item for fortnightly Transition Board meetings		Either insufficient capacity to maintain progress on all fronts or risk to current work
5.B Identify any significant financial risks and develop a plan to resolve these	Financial risks for currently commissioned services are reviewed within NHS SOTW on a regular basis and actions taken to address these. The delayed publication of the 13/14 public health budget is a risk for services and staff. <ul style="list-style-type: none"> <li>Identify the infrastructure needed to support the public health function post transfer, e.g. IM&amp;T, finance support, HR support, procurement support, governance support, performance management through the infrastructure work stream</li> <li>Assess the size of the 13/14 indicative budget against 12/13 planned public health expenditure (including support</li> </ul>	DH/NC/CM /SR/PC/ST	Ongoing management of financial risks during 12/13  Estimate of cost of required infrastructure Apr 12 to be reviewed Feb 13  Assessment of impact of 13/14 allocations on service delivery modelled Apr 12		If EIA/INRA is not sufficiently robust then prioritisation may be challenged



Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
	<p>costs)</p> <ul style="list-style-type: none"> <li>• In absence of 13/14 baseline, model impact on staff, functions, programmes and commissioned services based on reduction of 10%, 20%, 30% and mandated services only</li> <li>• Undertake prioritisation process informed by JSNA, INRA and modelling of 12/13 indicative budget (see 1A)</li> <li>• Review priorities when 13/14 allocations are known</li> </ul>		<p>Indicative prioritisation of expenditure May 12.</p> <p>Final prioritisation of expenditure for 2013/14 Jan 13</p>		
5.C Agree the arrangements for the handover of all agreed PH contracts	Contract details have been identified and shared with SCC. Commissioning Intentions (12/13) have identified the potential for notice to be given on all of these contracts. A prioritisation process will take place informed by the recently published 12/13 baselines and which will take account of transformational change and clearly identify contracts that will roll forward. It is anticipated that during 2012/13 there will be a need for the recommissioning of a number of services.	DH/LR/NC/ SR/PC	<p>Assessment of impact of 13/14 allocation on service delivery Jan 2013</p> <p>Proposed model for delivery of integrated health improvement services developed by</p>		<p>Legal issues in relation to transition of NHS contracts to LA contracts Litigation/clinical negligence issues</p> <p>Interaction of LA political process with prioritisation</p>

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
	<ul style="list-style-type: none"> <li>Assess impact of 13/14 public health budget alongside opportunities to transform and integrate services</li> <li>The commissioning work stream of the detailed plan will identify the steps needed to achieve handover of contracts where appropriate.</li> </ul>		<p>April 12</p> <p>Commissioning plan to achieve new model developed by end May 12</p>		of previous NHS provided services
<p>5.D</p> <p>Are all clinical and non-clinical risk and indemnity issues identified for contracts</p>	<ul style="list-style-type: none"> <li>Risks are currently managed through NHS systems and processes. An additional risk is the lack of clinical governance structures in the LA.. There is also a lack of clarity as to whether LAs will be part of existing NHS indemnity arrangements (NHS Litigation Authority) in relation to PH contracts that will transfer.</li> <li>Agree local approach to indemnity issues post April 2013 pending any</li> </ul>	DH/MD/CD/NC	<p>Agree v1.0 of detailed plan Mar 12. Review and refresh on a monthly basis</p> <p>Agree local approach to post Apr 13 indemnity issues Feb 12</p>		No agreement over legacy indemnity issues

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
	<p>national guidance February 2012</p> <ul style="list-style-type: none"> <li>Identify clinical risks for public health functions, programme and commissioned services transferring to SCC</li> <li>Include definition of clinical governance (including medicines management) and indemnity post transition in detailed plan and risk registers</li> <li>Undertake option appraisal of clinical governance arrangements post transition and commission if appropriate.</li> <li>Undertake option appraisal for clinical and non clinical indemnity post transition</li> <li>Agree local approach to legacy indemnity issues pending any national guidance February 2012</li> </ul>		<p>Clinical risks for PH functions, programmes and services mapped by Nov 12</p> <p>Clinical governance option appraisal paper to be developed by June 2012</p> <p>Indemnity option appraisal paper to be developed by Sept 2012</p> <p>Approach to legacy indemnity issues agreed Feb 13</p> <p>New arrangements developed</p>	<div></div> <div></div>	

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
			and/or commissioned March 2013		
5.E Develop and agree plan to ensure access to IT systems and data during transition and access to appropriate information and intelligence post transfer.	Current arrangements enable staff employed by the PCT to access NHS systems from council facilities. During transition access to information and intelligence support from the PCT structures will continue. There is currently no guidance on access to NHS information for the DPH post transfer. The intelligence and information element of the detailed plan needs to be completed and the options for intelligence and information support post		MOU to be agreed if required 1 month prior to transfer.  Detailed plan agreed  Information and Intelligence option appraisal		Information governance re access  Lack of skilled resource and capacity to deliver information and intelligence out of data

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
	<p>transition need to be considered.</p> <ul style="list-style-type: none"> <li>Information and intelligence work stream of the detailed plan will scope the required support and options for delivery Sept 2012.</li> </ul>		<p>paper to be developed based on regional information and intelligence work Sept 2012</p> <p>Scoping of infrastructure complete by Sept 2012</p> <p>New arrangements developed and/or commissioned March 2013</p>		
5.F Develop an agreed approach to facilities, estates	There are currently very few assets that sit with the public health team exclusively and no estates. The team currently has access to some office space within the council.		<p>Assets identified Dec 2012</p> <p>Approach to</p>		

Objective	Progress and outstanding actions	Lead (PCT/LA)	Milestones	R/A/G	Risks
and asset registers	<ul style="list-style-type: none"> <li>Identify assets needed post transition as part of the Information and Intelligence work stream</li> </ul>		asset transfer agreed Feb 13		
5.G Develop a legacy handover document	<p>The public health team currently contribute to the emerging PCT legacy document. There is, however, a recognition that a more detailed document may be required in relation to public health services.</p> <ul style="list-style-type: none"> <li>Agree format of PH legacy/handover document and issues log</li> <li>Integrate development of document into work stream plans</li> </ul>		First draft legacy document and issues log June 12		

## 6. Communication and Engagement GG

6.A Develop and agree an approach to communications and relationship building	<p>A number of relationships amongst SCC/Public Health/CCG have been strengthened recently. Cross membership of the HWB/CCG and partnership arrangements for adults and children will help with communications and relationship building.</p> <ul style="list-style-type: none"> <li>• Develop the communications and engagement work stream of the detailed plan taking account of both current and emerging structures and organizations</li> <li>• Include communications and engagement in the service delivery work stream of the detailed plan.</li> </ul>		Agree v1.0 of detailed plan Mar 12. Review and refresh on a monthly basis		Stakeholders may not agree to decisions within Transition Plan e.g. sourcing of core PH Offer to CCGs
6.B Develop and agree an approach to engagement of stakeholders	<p>Early engagement of providers in relation to the transfer has begun through information in the PCT Commissioning Intentions and through contract meetings. There will be wider engagement following the development of proposals for an integrated model for health improvement services</p> <ul style="list-style-type: none"> <li>• Develop the communications and engagement element of the detailed plan including engagement with stakeholders in relation to the proposals for integrated health improvement services.</li> </ul>		<p>Agree v1.0 of detailed plan Mar 12. Review and refresh on a monthly basis</p> <p>Stakeholder events re integrated model completed Apr 12</p>		

	<ul style="list-style-type: none"> <li>Include approach to engagement of stakeholders in the service delivery work stream of the detailed plan.</li> </ul>				
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### Sunderland Public Health Transition Plan 2012/2013 - KEY

PCT		
Initials	Name	Title
NC	Nonnie Crawford	Director of Public Health
PL	Pam Lee	Public Health Consultant
GG	Gillian Gibson	Public Health Consultant
TD	Tony Douglas	Project Manager
BS	Ben Seale	Commissioning Manager
LR	Louise Robson	Chief Operating Officer
KH	Kate Hudson	Head Of Finance
DH	David Hambleton	Director of Commissioning
FAD	Faisal Al Durrah	Public Health Consultant
IP	Ian Pattison	Clinical Commissioning Group
DB	Debbie Burnicle	Commissioning Development
ML	Mark Lambert	Consultant in Public Health Medicine
MO	Mark Overton	Public Health Consultant
VT	Vicki Taylor	Director of Human Resources & Organisational Development
JL	Janine Lutz	Human Resources
MD	Moir Davidson	Director of Governance & Quality
CD	Carole Donaldson	Associate Director, Quality & Patient Safety
CM	Chris Macklin	Director of Finance



TC	Tricia Cresswell	Consultant in Health Protection – Health Protection Agency North East
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LA		
Initials	Name	Title
SR	Sarah Reed	Assistant Chief Executive
CH	Claire Harrison	Senior Project Manager
KG	Karen Graham	Assistant Policy Lead for Health
NR	Neil Revely	Executive Director – Health, Housing and Adults
PC	Peter Coates	Programme Manager
JJ	Janet Johnson	Deputy Chief Executive
JoJo	John Jordan	Corporate Risk Manager
DS	Dave Smith	Chief Executive
ST	Sonia Tognarelli	Head of Financial Resources



**CABINET MEETING – 14 MARCH 2012**  
**EXECUTIVE SUMMARY SHEET – PART I**

**Title of Report:**  
Equality Scheme

**Author(s):**  
Deputy Chief Executive

**Purpose of Report:**  
To request approval for publication of the Equality Scheme (Appendix A)

**Description of Decision:**  
Cabinet is recommended to: Agree this approach to meeting the specific duties of the Equality Act 2010 and agree the attached Equality Scheme appended and equality objectives

**Is the decision consistent with the Budget/Policy Framework?**      **\*Yes**

**If not, Council approval is required to change the Budget/Policy Framework**

**Suggested reason(s) for Decision:**  
Under the Equality Act 2010, the Council is required to set out its approach to equality, and agree equality objectives. A full set of equality objectives must be published by the 6<sup>th</sup> April 2012

**Alternative options to be considered and recommended to be rejected:**  
It is proposed that the Equality Scheme and associated objectives are published to meet the requirement to have equality objectives published by the 6<sup>th</sup> April 2012. Other options such as a quick refresh of the existing scheme would not have met legal requirements or maximised the benefits of taking a joined-up approach.

**Is this a “Key Decision” as defined in the Constitution?**      **Yes**

**Is it included in the Forward Plan?**  
**Yes**

**Relevant Scrutiny Committee:**

**Sustainable Communities Scrutiny Committee**



**EQUALITY SCHEME**

**REPORT OF THE DEPUTY CHIEF EXECUTIVE**

**1. PURPOSE OF THE REPORT**

- 1.1. To request approval for publication of the accompanying Equality Scheme (Appendix A).
- 1.2. This report sets out the Council's Equality Scheme in response to the Public Sector Equality Duty. This report seeks approval of the Equality Scheme for publication. Setting out the Council's approach to equality, and the agreement of equality objectives are both required by law. The objectives must be published by the 6<sup>th</sup> April 2012.

**2. DESCRIPTION OF THE DECISION (RECOMMENDATIONS)**

- 2.1. Cabinet is recommended to:
  - a) Agree this approach to meeting the specific duties of the Equality Act 2010;
  - b) Agree the attached Equality Scheme appended and equality objectives.

**3. INTRODUCTION/BACKGROUND**

- 3.1. The 2010 Equality Act places a number of equality obligations on public bodies, including councils. The Public Sector Equality Duty, set out in Section 149 of the Equality Act, came into force on the 5<sup>th</sup> April 2011. This duty seeks to ensure that public bodies consider the needs of all individuals in shaping policy, delivering services and in relation to their own employees.
- 3.2. The Equality Act sets out a more joined-up approach to equality and extends coverage to nine 'protected characteristics' (age, race, sex, disability, gender re-assignment, pregnancy and maternity, religion or belief, sexual orientation and marriage and civil partnership). All public authorities must have "due regard" to three key areas in relation to the 'protected characteristics' in both service provider and employer roles:
  - Eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Act;
  - Advance equality of opportunity between people who share a protected characteristic and people who do not share it; and
  - Foster good relations between people who share a protected characteristic and people who do not share it.

- 3.3. Further specific duties came into force on the 10<sup>th</sup> September 2011 and require public bodies to be transparent about how they are responding to the Equality Duty. This duty requires public bodies to publish relevant proportionate information showing compliance with the Equality Duty, and to set equality objectives. Guidance from the Equality and Human Rights Commission (issued December 2011) suggests information will usually fall into two main categories:
- Information to identify equality issues
  - Information to identify steps taken to have due regard to the aims of the general equality duty
- 3.4. The specific duties aim to ensure the public have enough information available to them regarding decision making and the equality data underpinning this to allow informed public scrutiny.

#### **4. CURRENT POSITION**

- 4.1. The current Corporate Equality Scheme and three equality schemes for disability, race and gender require updating in light of the Equality Act 2010. The legislation has also expanded the protected characteristics to nine as set out in 3.1 and requires publication of what the Council is doing to meet these new obligations. A draft Equality Scheme was published for engagement in January 2012. This new draft reflects the legislative changes and included a series of draft Equality Objectives which the Council must publish by the 6<sup>th</sup> April 2012. The attached Equality Scheme (Appendix A) is a revised version of this draft which responds to the feedback gained through the engagement process and proposed for publication.
- 4.2. The Scheme sets out how the Council intends to meet its aspirations and obligations in relation to equality reflecting an overarching ambition to reduce discrimination, improve equality of opportunity for all and foster good relations across Sunderland. It also includes a series of equalities objectives and links to a series of equality profiles for the protected characteristics.
- 4.3. The document includes a summary of the Council's priorities and the legal context which have informed its development. It also summarises the actions undertaken by the Council in order to achieve positive equalities outcomes. The Scheme outlines how equalities are incorporated into the decision-making process, policy and strategy development and service design and delivery through Equality Analysis. Explanation is also provided on how we build and maintain our understanding of key issues and develop appropriate responses. This is accomplished through the Equality Forums (previously referred to as Independent Advisory Groups or IAGs), Cohesion Networks, consultation and engagement and the ARCH hate incident reporting system. It also sets out how equality is addressed through the procurement procedures.

- 4.4. The Scheme further addresses the Council's role as an employer setting out what is already in place to ensure that the needs of our diverse staff are understood and responded to.
- 4.5. The Scheme incorporates a series of Equality Objectives. These set out what the Council intends to achieve over the course of the Scheme to meet the aspirations set out in paragraph 4.1. Progress on these, as measured through a detailed action plan, will be monitored by the Council's Corporate Communities Group. The objectives will be refreshed on an annual basis to ensure they remain relevant.
- 4.6. A series of Equality Profiles accompany the Scheme which outline our understanding of the key issues relating to different 'protected characteristics'. These have been shared as part of the engagement process but will also be subject to an extended period of development with the Equality Forums over the next year.
- 4.7. A summary of the engagement feedback is also provided in Appendix 3 of the Equality Scheme. This demonstrates what feedback was received and supports scrutiny of how we have responded to this and incorporated it into this proposed published version.

## **5. REASON FOR THE DECISION**

- 5.1. Under the Equality Act 2010, the Council is required to set out its approach to equality, and agree equality objectives. A full set of equality objectives must be published by the 6<sup>th</sup> April 2012.
- 5.2. The draft Equality Scheme was published in January 2012, which met the Council's legal obligation to publish its information covering employees and service users and the protected characteristics by the 31<sup>st</sup> January 2012.

## **6. ALTERNATIVE OPTIONS**

- 6.1. It is proposed that the Equality Scheme and associated objectives are published to meet the requirement to have equality objectives published by the 6<sup>th</sup> April 2012. Other options such as a quick refresh of the existing scheme would not have met legal requirements or maximised the benefits of taking a joined-up approach.
- 6.2. This Equality Scheme brings together both the Council's aspirations and the legal obligations reflecting a positive document which reflects both local aspiration and national legislative requirements.

## **7. RELEVANT CONSIDERATIONS/CONSULTATIONS**

- 7.1. The draft Equality Scheme was published for a period of engagement during late January and February 2012. This has taken a number of forms:
- Online consultation through the online consultation portal
  - Publication on the council web pages (both inter- and intra- net)
  - An engagement event on the 1<sup>st</sup> February 2012 at the Quayside Exchange for partner organisations including VCS organisations and Equality Forums
  - Attendance at, and communication with, specific targeted groups
- 7.2. The feedback has been largely positive and shows clear support for the broad direction outlined in the equality objectives and the approach taken in the Scheme. It also highlighted areas for further development. These issues and our response are summarised in Appendix B.
- 7.3. Equality Analysis of the Equality Scheme has been undertaken and the summary of this is at Appendix C. The Analysis does not show any major equality concerns as the Scheme is designed specifically to address the equality in relation to the 'protected characteristics'. Nevertheless it does highlight the particular importance of a comprehensive information baseline.
- 7.4. The Equality Scheme specifically responds to the Council's aspirations and aims as set out in the Sunderland Strategy and the Corporate Outcomes Framework. This is outlined in the body of the Scheme and in the Objectives which are broadly grouped by the three key areas of Council work, People, Place and Economy.
- 7.5. Following publication further work will be undertaken with Equality Forums to continue to update and refine the 'live' equality profiles over the next year. A review of the Equality Scheme and equality objectives will be undertaken later in the year. This will feed into a refresh of the scheme to ensure it continues to meet the wider equality obligations of the Council and needs of the city.

## **8. LIST OF APPENDICES**

Appendix A – Sunderland City Council Equality Scheme 2012-2016  
Appendix B – Summary of Consultation Feedback and Response  
Appendix C – Equality Analysis Summary  
Appendix D – Equality Profiles

## **9. BACKGROUND PAPERS**

Sunderland City Council Equality Scheme Summary. This summary of the full Scheme is available in draft format from Kirsty McNally, Associate Policy Lead for Communities and Equalities on 0191 561 7961/561 7951. The summary will be finalised once the full scheme has been approved.





## **Sunderland City Council**

### **Equality Scheme 2012 – 2016**

This document can be provided in a number of different formats. If you would like a copy of this in an alternative format, please contact a member of the People and Neighbourhoods Team on 0191 561 1240

## Foreword

The council recognises and values highly, the diversity of people within the city and is clear that everyone should be treated as equals, irrespective of their circumstances or background. So, it is with pleasure that we present Sunderland City Council's draft Equality Scheme 2012-16 following consultation with local communities and stakeholders.

The council is committed to eliminating unlawful discrimination, harassment and victimisation and to ensuring that all of our policies, the development and delivery of services, and our employment practices reflect this.

Through the development and implementation of this Equality Scheme, we will continue to promote equality of opportunity amongst different groups of people and ensure that potentially vulnerable groups and individuals are supported, and their needs are addressed, in ways that are best suited to them. We will also continue to work to foster good relations between different groups and communities in the city.

This scheme outlines how the council will seek to achieve this, and how we will facilitate local people to participate in 'city life'. We want to ensure that everyone has the opportunity to be involved in shaping and influencing the decisions and services that affect them and their communities.

Central to the design of the scheme is the city council's belief that by addressing inequalities, and helping to remove the barriers to opportunities that can be faced by many people, strong and resilient communities - and the individuals within them - can flourish.

Cllr Paul Watson  
Leader of the Council

Dave Smith  
Chief Executive

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## 1.0 Introduction

- 1.1. Sunderland City Council is committed to improving opportunities for all the people in the city and welcomes the benefits a diverse population can bring to an area. A rich and vibrant mix of people contributes to building the unique culture that makes Sunderland the place it is. We want to celebrate this diversity and continue to build on the positive work already undertaken in Sunderland. This Equality Scheme reflects and demonstrates a new joined-up approach to equalities for the Council, replacing the Corporate Equality Plan and three separate equality schemes (covering race, disability and gender).
- 1.2. This Scheme sets out what we want to achieve in equalities, building on the Council's previous work, and demonstrates how we are meeting the general and specific equality duties placed on the public sector by the Equality Act 2010. This Scheme provides information on the arrangements we have in place to ensure equalities underpins all that we do to promote equality of opportunity and shows how we meet our equality duties, including arrangements to undertake equality analysis. It sets out what we are doing in relation to the nine protected characteristics of age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation and marriage and/or civil partnership. The legal context to the Equality Act 2010 and Public Sector Equality Duty is contained within Section 2.0: Legal Requirement.
- 1.3. The Scheme explains how we prioritise objectives and where information will be published to allow the public to examine and challenge the Council. Our evidence includes details of intelligence gathered from equality analysis, consultation, engagement and involvement with key stakeholders including residents, Council staff, Elected Members, partner organisations, equality forums and Voluntary and Community Sector organisations. A summary of the feedback from our engagement is included in Appendix 3.

- 1.4. Our approach is framed around recognition that disadvantage and discrimination may take a variety of forms. It can be based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation and marital or civil partnership status or also other factors such as, but not exclusively, people living in poverty, single parent households, people with carer responsibilities, ex-servicemen and women and ex-offenders. The 'protected characteristics' cover a wide range of ways in which an individual could face discrimination and most people will face the potential for discrimination based on these at some point during their lifetime. Our approach recognises the complexity of individuals within the context of their location and the impact combinations of factors can have. When people have more than one of these characteristics they can experience multiple forms of discrimination and inequality.
- 1.5. A welcoming and inclusive city brings a wide range of benefits for everyone. If individuals are able to live their lives to their full potential through work, volunteering and education and learning opportunities as part of a cohesive community, Sunderland will remain a vibrant place where people and businesses will choose to locate. If people choose to live, shop or socialise elsewhere this doesn't just mean the loss of a resident but also a loss of revenue for local businesses, a loss of a potential worker and colleague who can bring unique skills to a team or organisation and lost volunteers. To achieve this requires a delicate balance between providing all of our services and facilities as accessible and welcoming to all as standard, but also ensuring that where specific provision is needed that this is provided in a way which meets needs based on understanding of the issues faced by people with different characteristics.
- 1.6. Whilst a key aspiration is for Sunderland to be welcoming and accessible to all as a matter of course, the complexity of individuals and the context in which they live, means we appreciate the varied

impact different characteristics can have for individuals at different times. To avoid discrimination and improve equality of opportunity does not mean that we will treat everyone the same all of the time. Particular interventions or actions will be most appropriate for some people at specific times and focused actions on particular forms of disadvantage will be most successful in promoting equality for different groups at different times. An approach which seeks to treat everyone the same all of the time and which does not reflect individual needs will not achieve our aspiration for a more equal Sunderland in which people also feel more equal.

- 1.7. The Scheme and particularly the objectives have been developed in light of the challenging financial context. In such times it is vital to ensure that actions are realistic and focus on tackling issues to achieve positive outcomes in an efficient and effective way. The actions accompanying the objectives have been developed to be cost-effective and targeted at the key issues raised through research and consultation. The approach taken throughout the Scheme recognises the increased impact on our communities varying needs in the current climate.

## **2.0 Legal Requirement**

- 2.1. The Equality Act 2010 introduced the Public Sector Equality Duty which came into force on the 5<sup>th</sup> April 2011. This Duty applies to all public authorities.

## **Public Sector Equality Duty**

2.2. The Public Sector Equality Duty brings together previous gender, race and disability duties and extends the protection from discrimination to include nine 'protected characteristics', which are:

- age
- disability
- gender reassignment
- pregnancy and maternity
- race
- religion or belief
- sex
- sexual orientation
- marriage and civil partnership status (in respect of the need to eliminate discrimination between the two).

2.3. The Public Sector Equality Duty is designed to ensure achieving equality of opportunity, avoiding discrimination and building good relations are considered when delivering public authorities day to day business. Equality considerations must therefore be reflected in the design of all policies and the delivery of all services. In short, the Council must have due regard of the need to:

- a) Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
- b) Advance equality of opportunity between people who share a protected characteristic and those who do not
- c) Foster good relations between people who share a protected characteristic and those who do not (this includes tackling prejudice and promoting understanding)

2.4. The Act explains that having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

This applies to both service prioritisation and employment.

### **The Equality Act 2010 (Specific Duties) Regulations 2011**

2.5. The specific duties came into force on the 10<sup>th</sup> September 2011 and require public bodies to be transparent about how they are responding to the Equality Duty; to publish relevant, proportionate information showing compliance with the Duty, and to set equality objectives. The specific duties aim to ensure the public have enough information available to them regarding decision making and the equality data underpinning this, to allow informed public scrutiny. This will focus decision-makers on real consideration of equality issues. The regulations require public authorities to publish:

- Information to demonstrate their compliance with the equality duty
- Schools information and their equality objectives
- Equality objectives, that are specific and measurable

## **3.0 The diversity of Sunderland's residents**

3.1. The Council appreciates the benefits diversity brings to the city and will continue to celebrate this contribution; it also recognises that in order to give people equal access to services, we sometimes need to tailor our response. Equality of opportunity cannot be achieved by



simply providing the same service to everyone in the same way. This means it is incredibly important that we understand the needs of different people and groups. Most people experience inequality at some point in their lives, but some people experience greater inequality than others, including inequality in accessing services. If the Council doesn't understand what inequalities people in the city face and what can be a barrier for someone accessing services, then it cannot adapt the service to offer equal access and eliminate potential inequality. The most effective means of understanding and addressing an individual's needs is by engaging with them. It is also important when the Council is designing policies and services that it considers the general needs of residents and breaks down assumptions about Sunderland and the people who live in it.

3.2. To enhance understanding of the needs of our residents we collate and analyse intelligence relating to the nine protected characteristics as well as other information relating to other pertinent characteristics such as poverty. This helps us to understand who we are providing services to and how changes and decisions relating to those services may impact on our residents. This is at the heart of all decision making and service planning. Equality profiles relating to the protected characteristics accompany this document and they will continue to be developed, through an annual refresh, as further intelligence is gathered. Additional profiles will be developed for non-protected characteristics and for the five geographic areas in the city on an ongoing basis.

3.3. There is existing corporate guidance for gathering equality information; this will be refreshed during 2012.

3.4. The key sources of information that help us to understand the diversity of the people of Sunderland are:

- Data collection

- Research, engagement and resident feedback
- Equality analysis

3.5. The Council recognises that developing understanding through these key sources is essential to shaping the services we provide and shaping the Council's equality objectives.

## 4.0 Our Plans and Priorities

4.1. Our approach to equality and diversity is informed by our overall aims as a council and as part of the Sunderland Partnership. Our equality objectives have been developed in line with these high-level aspirations, which are summarised below, and also draw on the specific equality needs of the city's residents. To make sure our approach is appropriate and truly reflects our city we have made use of the full range of information available and wish to undertake appropriate engagement. Our understanding draws upon the intelligence already gathered through data and statistical analysis. Objectives based on this analysis are published (see Appendix 1) as part of this scheme and will be updated annually to reflect current data, intelligence and feedback from residents, groups and organisations.

### Council Priorities and Objectives

4.2. The Council's overall aims are set out in the Corporate Outcomes Framework. The framework provides a set of strategic priorities and key outcomes for the Council as a whole. The priorities are grouped under three broad headings of People, Place and Economy:

- **People:** Raising aspirations, creating confidence and promoting opportunity

- **Place:** Leading the investment in an attractive and inclusive city and its communities
- **Economy:** Creating an entrepreneurial University City at the heart of a Low Carbon regional economy

The following city level outcomes, drawn from a wider set that relate to People, Place or Economy, are particularly relevant to equalities:

- A prosperous and equitable city
- A city where every resident is healthy and enjoys a high standards of wellbeing
- A city that cares for its most vulnerable
- A city which is, and feels, safe and secure
- A city where opportunities meet people's aspirations
- A vibrant, attractive city with a strong cultural identity
- An inclusive city economy for all ages

4.3. These priorities are reflected in the Council's Service Business Plans which define the actions we will take to achieve these outcomes. Actions are identified for the next three years to deliver continued improvement in service delivery and use of resources. The targets and outcomes take account of the actions contained in key plans and strategies and link to the Council's Corporate Plan, the key overarching document for the Council. The information coming through Service Business Plans is analysed centrally to identify any combined impacts of changes to service provision.

### **Sunderland Partnership Objectives**

4.4. The Sunderland Strategy 2008-2025 sets out further aims for the Sunderland Partnership to achieve on behalf of the city. These aims are currently being refreshed to create a Sunderland Outcomes Framework. The aims of the Sunderland Outcomes Framework will

complement the Council's Corporate Outcomes Framework and the Council's Equality Scheme.

- 4.5. A working group looking at 'Creating Inclusive Communities' focuses on issues relating to equality and cohesion across the Sunderland Partnership. The Partnership is one of the groups that has been engaged in the development of this scheme and associated Equalities Objectives.

### **Council Equality Objectives**

- 4.6. The Council's equality objectives have been developed based on an understanding of the needs of different communities in Sunderland and the Council's Corporate Outcomes Framework these reflect both our aspirations for Sunderland in relation to equality and our legal duties. They have been informed through a combination of existing intelligence, analysis of services and decisions for their impact on equality, and responding to requirements of equality law. Views from residents, Council staff, Elected Members, Voluntary and Community Sector organisations and other partners are vital in further developing these. Each year we will take a fresh look at all of the information we have available to us and update the objectives where appropriate.

- 4.7. The Council's high level objectives are expressed in terms of People, Place and Economy. **Our aim for people is to:**
- raise aspirations,
  - create confidence and
  - promote opportunity.

### **Objectives for the organisation and workforce:**

1. Share innovation, best practice and understanding to enhance partnership working in relation to equalities.

2. Ensure the Council as an employer has a robust understanding of its diverse workforce and through this promotes understanding and demonstrates compliance with the Public Sector Equality Duties.
3. Ensure all Council employees understand their responsibilities for equality and behave in a way that promotes equality when providing services and working with colleagues and partners.

**Objectives for people:**

4. Support people to overcome individual barriers and manage their own health and wellbeing, and the health and wellbeing of others.
5. Support people to overcome barriers to educational opportunities, gaining employment and career progression.
6. Support people with advice, support and in some cases protection, so they feel safer and more secure.

**Objectives relating to how and where people live and work:**

7. Ensure people have a place to live that meets the needs and entitlements of their household.
8. Supporting each neighbourhood to create a strong and inclusive sense of community.
9. Support efforts to grow and attract new industries, jobs opportunities to provide wider opportunities to suit a diverse population

**Objectives relating to promoting understanding and challenging unacceptable behaviour:**

10. Promote understanding and celebrate the cultures that make Sunderland special.
11. Challenge unlawful discrimination, harassment and victimisation and make it clear they are unacceptable.

## **5.0 What we have in place to help us deliver equality**

- 5.1. We have a robust structure and sound processes to actively promote equality of opportunity for all. The structure is made up of the following:
- The Leader and Deputy Leader of the Council have portfolio responsibility for equality and diversity
  - Council Cabinet takes collective responsibility for decisions impacting on equalities
  - The Executive Management Team has operational responsibility for ensuring that equality objectives are met.
  - The Corporate Communities Group drives equality issues across the Council; the group is chaired by the Assistant Chief Executive and reports directly to the Council's Executive Management Team
  - The Strategy, Policy and Performance Management function provides strategic support to council services with regard to equality issues
  - The Council is represented on the Sunderland Partnership's Inclusive Communities Group; this group influences equality and diversity issues across the key partnership documents and work streams

- The Council is represented on the Regional Equalities Network, this helps the Council ensure it is up to date with, and influencing, regional as well as local issues
- Use of the Equality Framework for Local Government, a tool that has been developed for local government to support councils to address their legal obligations under anti-discrimination law and to promote best practice in equality and diversity
- A refreshed and user-friendly approach to equality analysis including guidance to inform the process and a recording tool to summarise and set out the key findings from the analysis
- Area Voluntary and Community Sector Networks supported by the Council's Community Services and engaged with the Council's Area Committees
- Community Cohesion Networks are facilitated by the Sunderland Partnership
- Equality Forums and associated networks supported by the Sunderland Partnership, these feed into the Sunderland Partnership's Inclusive Communities Group
- Employee Representative Groups for all equalities protected characteristics; these are currently being refreshed.
- Equalities is included in the Equality Codes of Practice through the Sunderland Compact

5.2. In addition to the structures mentioned above, council employees are essential in delivering services in a way that promotes equality. To ensure this happens, there are two teams that provide a key role in improving and facilitating this area of work. The People and Neighbourhoods Team have responsibility for designing policy and strategy related to Communities and Equalities, this involves supporting staff within the organisation to understand their responsibilities and consider the needs of different groups of people within their work. The Partnership Team works with residents and partners to encourage community understanding and

support residents to raise issues that are important to them with the council and other partner organisations. This work takes place through Equality Forums and associated networks as well as the Community Cohesion Networks.

## **6.0 Progress made to date and key achievements**

- 6.1. The Council has made considerable progress in the way it addresses equality issues, outlined below. Section 11 outlines how progress will continue to be measured, reported and published.

### **Equality Framework for Local Government**

- 6.2. In 2008 the Council was assessed as level 3 (of a possible 5) against the Equality Standard for Local Government. When the Equality Standard became the Equality Framework, Level 3 was translated to 'Achieving'. The Framework now has three achievement levels of 'Developing', 'Achieving' and 'Excellent'. The Council is now working towards a declaration of 'Excellent' status.

### **Equality Forums**

- 6.3. The Council employs staff that work within the Sunderland Partnership Team to support residents to influence their city. Part of this involves supporting and linking with a number of equality forums that allow participation of residents or partners interested in issues affecting the nine protected characteristics. The equality forums take different forms based on the needs of the people they represent, for example, face to face groups or internet groups. The groups and their inter-linkages are outlined in the table below.



<b>Group Name</b>	<b>Membership</b>	<b>Links to other groups</b>	<b>Protected Characteristic</b>
The Disability Independent Advisory Group (DIAG)	Residents Representatives of organisations who work with disabled people	Physical Disability and Sensory Needs Group (a sub-group of the DIAG)	Disability
BME Practitioners Forum	Partners (VCS organisations, Public bodies) Representatives of organisations who work with disabled people	BME independent Forum BME Network	Race
BME Independent Forum (currently being re-developed)	Residents	BME Practitioner's Forum BME Network	Race
LGBT Practitioners Forum	Partners (VCS organisations, Public bodies) Representatives of organisations who work with BME people	LBGT Electronic Network	Sexual Orientation Gender Reassignment Marriage and Civil Partnership

LGBT electronic network	Residents	LGBT Practitioners Forum	Sexual Orientation Gender Reassignment Marriage and Civil Partnership
Sunderland Interfaith Forum	Residents Representatives of organisations who work with people of faith		Faith or belief
Gender Agenda	Residents Representatives of organisations who's work relates to gender	Domestic Violence Partnership Group	Gender Pregnancy and Maternity
Older Person's Advisory Group (Run by Age UK)	Residents	Five are based over 50s forums Partnership Team	Age
Young People's Equality Forum	Residents	Youth Parliament Cohesion Networks (Youth Worker and Schools) Sunderland Voluntary Sector Youth Forum	Age

6.4. The equality forums are encouraged to set their own agendas and raise key issues of interest or concern with the Sunderland Partnership, the Council or any other partner organisation. The

Council also invites the equality forums to contribute to key consultations but, as independent groups, they set their own agenda.

- 6.5. To ensure the equality forums have a voice in the decision making processes of the city the Inclusive Communities Partnership Group includes representatives of both the equality forums and partner organisations. The council's People and Neighbourhoods Team are represented at the Inclusive Communities Group to ensure strong links between community issues and policy development. Issues raised at the Inclusive Communities group can also be reported into the Sunderland Innovation and Improvement Group, a key group of the Sunderland Partnership.
- 6.6. Equality forums have been directly involved in developing the Sunderland Compact (an agreement between the organisations of the Sunderland Partnership and Voluntary and Community Sector organisations) to improve their relationship for mutual advantage and community gain. Each equality forum has the opportunity to develop its own specific code of practice to be appended to the main Sunderland Compact. It is anticipated that all the equality forums will eventually do this; however it is recognised that the forums need to develop at their own pace.
- 6.7. The Partnership Team also supports an annual Partnership Conference, which aims to supports Equality Forums in coming together to network and share experiences. This also provides opportunity to discuss and contribute to work on key themes such as financial inclusion, engagement and community safety.

### **Sunderland ARCH**

- 6.8. ARCH is a network of organisations working together across the city to help support victims of hate incidents and, where possible, take action against the suspect. ARCH currently allows reporting of racist,

religious, homophobic, transphobic or disability hate incidents. In addition to victim support, through the data collected on the ARCH system, intelligence can be used to direct resources in an area where more incidents are occurring. Area data is also discussed at the Community Cohesion Networks so that better understanding of issues can be sought and solutions or preventative work generated. ARCH is currently being rolled out into schools to enable more co-ordination with anti-bullying.

## **Cohesion Networks**

6.9. As part of efforts to promote good relations between people with different characteristics and contribute to building cohesive communities the Sunderland Partnership supports Cohesion Networks in the five areas of the city. These groups work at an operational level and include a wide variety of organisation and projects which work directly with the public in the area. These groups build on the positive work already going in areas but also look to see where additional value can be added and respond to particular threats to cohesion from a partnership perspective.

## **Intelligence**

6.10. The Sunderland Partnership Team log issues arising from both the Cohesion Networks and the Equality Forums to ensure there is a record of community concerns. This takes on board community issue-based intelligence recorded as part of other local area work such as VCS Networks and Local Multi Agency Problem Solving groups and allows identification of common themes and issues to be addressed. This data can be split by geographical area, theme or group (protected characteristic). The issues are reported to, and monitored by, the Inclusive Communities Partnership Group and the Sunderland Improvement and Innovation Group. This log will also feed into the

Council's Intelligence Hub and will help to strengthen the ongoing refresh of the Equality Profiles.

## **Equality Analysis**

- 6.11. In reaching our decisions, designing policies and strategies and reviewing service provision it is crucial that we take into consideration the people of Sunderland and their varied requirements so we can provide the most appropriate and effective service. This is also required in order to meet our legal requirements. If we are to achieve this we will need to know who uses a service or who isn't using it and what the catchment of a service is or should be. We need to understand how an individual's needs may differ according to their characteristics.
- 6.12. To help the Council gain understanding of the impact on people with protected characteristics it carries out equality analysis in relation to policies, services and key decisions. This information is made available to decision makers to inform their decisions. The Equality Analysis Tool consists of a guidance document to provide context and stimulate discussions to underpin analysis of how a proposal, policy or decision could impact on individuals with protected characteristics. This is accompanied by a simple recording tool on which information relating to impacts and actions is noted. The guidance is used in discussions where the potential impacts are identified and noted and actions are devised to address potential negative impacts. Together these form the Equality Analysis.
- 6.13. This revised approach to Equality Analysis emphasises analysis of the needs and requirements of individuals, and understanding the impact a service or decision may have. This ensures the Council gains real understanding and insight into the impacts of its services and decisions on protected characteristics and other key groups which face disadvantage. It has been developed in line with the new

guidance and legal requirements included in the 2010 Equality Act and Public Sector Equality Duty.

6.14. Our approach to assessments supports the consideration of information from a range of sources and can include:

- Results of engagement with protected groups and others
- Professional knowledge
- Population data
- Service user feedback
- Consultation responses
- Research intelligence
- Existing (protected characteristic, area and themed) needs assessments.

6.15. As the Council recognises the broad nature of potential discrimination and disadvantage, in addition to the 9 protected characteristics as defined by the law, our Equality Analysis approach includes specific space for the consideration of other groups who face potential additional challenges. The main focus of the analysis will vary depending on the particular area of focus for the decision as the particular characteristics impacted upon by a proposal will vary according to the nature of the proposal; however we are particularly aware of the significant impact and cross-cutting nature of economic deprivation and poverty for the city. Analysis of these issues will be considered alongside the other statutory characteristics.

6.16. This process is written into the Business Service Planning cycle so that all services must consider equalities as part of their annual planning. It is also integral to decision making through the Cabinet reporting procedure and the delegated decision processes.

6.17. Summaries of equality analysis are published on the council website to allow the public to understand how decisions have been made. The

information coming from equality analysis is then centrally collated to ensure we have due regard to equality needs across all the functions when a number of decisions are made together, for example, when budget setting.

### **Equalities and Finance**

6.18. Our approach to financial planning includes clear recognition of the importance of equality which is integrated through the process. Given the current challenging financial context, Equality Analysis becomes even more essential to taking effective financial decisions which meet the needs of the diverse people of Sunderland and address our legal obligations. Our approach recognises that this must be undertaken throughout the process with use of Equality Analysis to consider proposals at different stages of their development to be truly effective. Analysis therefore is undertaken throughout the development and implementation of proposals.

6.19. The Equality Analysis approach has been particularly relevant for the Council's annual budget-setting process. The need to achieve additional savings in response to reduced resources will undoubtedly result in changes to the way many services are delivered in the future. As part of the budget decision making process it is therefore crucial that equalities analysis is integrated into the budget-setting process to inform decision-making, meet legal requirements and reflect the needs of residents and service users. This is achieved through the following approach.

6.20. Each directorate within the Council undertakes Equality Analysis of their proposals using the Council's Equality Analysis approach which is outlined earlier in this section. The approach enables its directorates to consider the impact of the proposals in relation to the nine protected

characteristics and any other groups which face disadvantage or discrimination such as carers or those living in poverty.

6.21. This analysis is summarised and shared with decision-makers as part of the preliminary financial planning process with full analysis, or service review as appropriate, provided to inform later stages of the decision-making process. This analysis reflects the information available on the proposals and the analysis will continue to be updated to reflect additional information as proposals are developed further and monitored during implementation to make sure potential disadvantage and discrimination is considered throughout the process.

6.22. This approach ensures that information is used to analyse the potential impact of proposals at an early stage of the process. It also enables later refinement and additions to the analysis to provide a fuller understanding of the impact as the proposal is developed and further information becomes available.

## **Equality and Customer Service**

6.23. The Council has an ambitious strategy for customer service which seeks to put the customer at the heart of our delivery systems. It approaches accessibility, responsiveness and quality of all services from the customer's viewpoint of:

- Help me quickly, courteously and professionally
- Get it right first time
- Give me what I need (not necessarily what I want)
- Include me, and give me choice

6.24. This approach to customer service has significant overlap with our approach to equality. Both rest on an understanding of the people who use, or could use, a service to make sure they are delivered from the perspective of the customer or service-user.



6.25. The Council has a number of mechanisms in place to ensure accessibility of services. Translation and interpretation services are provided via the Council's Language Point Service, all of the Customer Service Centres have been designed in accordance with disability standards and guidelines and have hearing loops as standard. The latest Customer Service Centre development at Fawcett Street includes an Adult Changing Place, height adjustable desks and accessible PCs. Telephone services are provided via Minicom and BT Ttypetalk and SMS is used to facilitate easier access for hard of hearing customers. Our web-site meets accessibility standards and has 'Read Me' facility which converts text to speech.

6.26. Customer feedback provides a useful way in which we can learn about the issues facing people in Sunderland accessing our services and can highlight where work can be done to achieve better outcomes for all. The new Complaints and Customer Feedback Service monitor trends in customer views gained from feedback, including equality issues, and are working with service areas to ensure this continuous learning is embedded within service delivery arrangements.

6.27. In addition to the ARCH arrangements for reporting hate incidents customer concerns on equality issues, or concerns that have an equality aspect to them, can be signposted through the Complaints and Feedback service.

6.28. The revised Customer Service and Access Strategies contain a number of actions to ensure accessibility for all as not to exclude or unfairly disadvantage anyone accessing Council services.

## **7.0 Procurement and Commissioning**

7.1. As the council looks to commission more of its services it becomes even more vital that the processes we use promote equality. The

council recognises that it has a lot of influence on private business through its spending power and therefore must ensure the organisations it is dealing with are aware of their requirements in relation to equality. The law states that the authority retains responsibility for meeting the equality duty, even if a function is carried out by an external supplier.

- 7.2. Equality and diversity are reflected throughout the Council's Procurement Framework and, through the equality analysis process, across service design and review before undertaking procurement. When a service or directorate is considering changing the way it delivers a service, or looking at what services it provides, it is crucial to undertake an equality analysis of the options to ensure due regard is given to meet the equality duty. In essence that is, to eliminate unlawful discrimination, foster good relations and promote equality of opportunity in relation to the nine protected characteristics. This approach also enables the Council to best consider and meet the needs of all residents. Once it has been decided to procure a service externally, an equality risk assessment matrix is completed to determine if it is high or low risk in relation to equality and diversity. If the procurement is considered low risk then standard harmonised documents are used. However, if it is identified as being high risk additional questions on equality and diversity are asked in order to ensure that fuller information is gathered and used in the Pre-Qualification stage of procurement.
- 7.3. The Invitation to Tender for the successful firms includes basic questions as a minimum within the specification. However, there is scope to add further questions as appropriate to reflect the particulars of the tender and ensure any key concerns are addressed and particular needs met. At the evaluation stage of the tender process, equality and diversity is given due regard.

- 7.4. Once a contract is awarded, the specification for the contract forms part of the contract monitoring process. This process ensures that a contractor is meeting their obligations as set out in the specification for the tender and meeting the key deliverables for the tender. The equality and diversity requirements of the Council are set out in the specification and the method statement which ensures this is part of the monitoring considerations.
- 7.5. The Council will be revising and refreshing its approach to procurement in 2012 during which the procurement framework will be updated. Further work will take place to ensure that the requirements of the Equality Act 2010 and Public Sector Equality Duty are fully accounted for in contract monitoring of commissioned services. Equality and diversity will continue to be an integral part of the process to ensure that obligations are met.

## **8.0 Consultation and Engagement**

- 8.1. The Council recognises the importance of involving people in shaping and influencing decisions, so that policies and services truly reflect the needs and aspirations of the people of Sunderland. Part of this is ensuring equality is incorporated into our engagement and consultation processes, helping to ensure service delivery is based on local needs.
- 8.2. As a Council we appreciate that consultation and engagement must reflect the diversity of the city's residents. Sometimes this requires the Council to take different approaches to engagement in order to ensure that all sections of the community have the opportunity to be involved. The Council collects monitoring information on equalities when consulting so we can understand whether people with protected characteristics have different experiences or requirements. Whenever surveys or research is conducted in future we will consider whether it

is appropriate to collect demographic information of the results by protected characteristic. Further information on deciding which monitoring questions to ask is provided through the Equality Data Collection and Monitoring Guidance, which will be refreshed during 2012/13.

8.3. The Council's Consultation Toolkit sets out the agreed approach to consultation and helps officers, plan, design and implement effective consultation. This toolkit explains the importance of thinking about who might be affected or interested in a decision including non-service users and that this should guide consultation. Equality and diversity is central to this and the toolkit emphasises the need for representative and/or inclusive engagement. It also sets out equality and diversity underpinning an understanding and appreciation of different requirements and preferences and this should be incorporated into individualised and appropriate approaches to ensure that engagement and consultation is comprehensive and inclusive. The Compact's Involvement and Consultation Code of Practice also ensures that Equality and Diversity issues are taken into consideration when working with Voluntary and Community Sector organisations.

8.4. When preparing new policies or strategies, taking decisions or reviewing service delivery we will involve a variety of partners and engage stakeholders, including Voluntary and Community Sector organisations and groups such as the Equality Forums, Community Spirit (Citizen Panel) and staff equality groups as appropriate. These groups cover a range of protected characteristics. Consultation and engagement has contributed to developing this scheme in a way that intends to meet the needs of all people in Sunderland. During consultation a number of groups will be engaged, including:

- The Sunderland Partnership Inclusive Community Group and associated Equality Forums

- Elected Members via Cabinet and Scrutiny Committee
- The Council's Corporate Communities Group and Employee Groups
- Sunderland's Voluntary and Community Sector organisations via Area VCS Network and Sunderland Compact mechanisms
- Trade Unions via the Joint Consultative Forum

Continuous feedback and analysis will feed into equality objectives on an annual basis.

## 9.0 The Council as an Employer

### Employment

9.1. We have a range of policies and guidance to embed accessibility and fairness into employment and throughout recruitment processes. In particular, the Recruitment and Selection Code of Practice provides generic guidance for those with responsibility for undertaking recruitment and includes information on how to ensure that the process is fully accessible and non-discriminatory by outlining key areas for consideration and some thoughts to consider. This Code of Practice was revised in June 2011 to reflect changes to legislation and is supplemented by a Guidance Note for Managers involved in Recruitment and Selection which provides additional information in relation to health questions. Information regarding equality and diversity is gathered through the recruitment process and is considered alongside employee equality data on an annual basis.<sup>1</sup>

9.2. Further policies and procedures, such as the Whistleblowing Procedure, the Harassment at Work Policy and the Grievance Procedure ensure employees are supported to raise concerns

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<sup>1</sup> The Council's Human Resources and Organisational Development service has produced a Workforce Diversity Report that is published alongside this scheme

regarding conduct and relationships in the workplace. This includes concerns regarding harassment, victimisation or discrimination.

## **Staff Development**

- 9.3. Equality and diversity is covered in the Council's e-learning programme. This training is mandatory for all staff and provides them with information on equality and diversity including definition and practical examples. In addition we ensure that relevant topical equality and diversity issues are also covered within each individual training programme.

## **Council Employee Groups**

- 9.4. We have a number of employee groups that reflect the equality strands. We call on these to help us with the development of policies and strategies and in carrying out equality analysis. There are currently six such groups: age, disability, gender, race, religion or belief and sexual orientation.

## **10.0 Schools**

- 10.1. Schools play an important role in building a diverse and inclusive community and also have a key role in meeting the Public Sector Equality Duty. The Duty places a specific obligation on schools to publish their equality information and objectives by the 6<sup>th</sup> April 2012. The Council, through Governor Support, is assisting schools to meet their obligations under the new duty. This support is primarily being done through the Governors Agenda Report Book, which contains information on educational issues that Governors should be aware of and/or need to take action on. The Agenda Report Book is considered the most effective method of communicating with all school governors in the city.

- 10.2. Further support will be provided to schools through the development of standard templates and associated guidance.

## **11.0 Monitoring and measuring progress**

- 11.1. Equality objectives will be monitored on a quarterly basis through the Corporate Communities Group and Sunderland Partnership's Inclusive Communities Group. On an annual basis the equality objectives will be refreshed and reported to the Council's Executive Management Team through the Corporate Communities Group and into the Inclusive Communities Group. Progress will be reported on the website for public scrutiny. Any substantial change to the equality objectives will be referred to the Leader and Deputy Leader as Cabinet members with portfolio holder responsibilities for equalities. The equalities agenda is also accountable to the Sustainable Communities Scrutiny Committee. The refresh will be informed by an analysis of the information coming through annual Service Business Planning and budget setting Equality Analyses, along with information from consultation, engagement and resident feedback to compile issues and recommendations.

### **Arrangements for reviewing the scheme**

- 11.2. Initially this scheme will be reviewed after 6 months to make sure that it is meeting the needs of the people of Sunderland and providing a useful and user-friendly summary of our approach and objectives. This will make sure that there is adequate time for further input once the scheme has been published for those who have additional comments which were not fed into the initial engagement period. Following this initial refresh, the scheme will be reviewed and amended at least every four years or following any relevant changes in the law and Government guidance. It will also be reviewed following any significant

changes to council structures to ensure that necessary structures for implementation, monitoring and review are in place and reflected in the scheme.

11.3. At each review of the scheme staff of the council, members of the public and partner organisations will be consulted to ensure that the scheme continues to meet their needs and expectations. These consultations will take place in accordance with our consultation strategy and the principles of the Sunderland Compact.

### **How we will measure and report our progress**

11.4. The objectives will have targets which are measurable and have clear timescales and responsibilities attached. These will be monitored on a quarterly basis and reviewed each year by the Corporate Communities Group, through which route staff of the council will be involved in the monitoring of progress. Progress against objectives will be reported to the Inclusive Communities Partnership Group and through that route the public will be involved in the ongoing monitoring of the scheme.

11.5. Where appropriate more in-depth investigations will be undertaken looking at specific areas of interest. These will focus on providing a fuller understanding of what challenges there are, and how we are performing in delivering services to individuals who face discrimination or disadvantage in order to meet our aspiration to improve equality of opportunity.

11.6. Communities, staff and partners will be engaged in the ongoing development of objectives and will be encouraged to challenge the council's practices through the routes described above.



**Appendix 1: Engagement Schedule**

<b>Group or consultation method</b>	<b>Date</b>
Publication of the draft via the on-line consultation database	23 <sup>rd</sup> January – 16 <sup>th</sup> February 2012
Information to the Voluntary and Community Sector (VCS) and feedback sought via: - Area VCS Networks - VCS organisations who are Sunderland Compact signatories	23 <sup>rd</sup> January – 16 <sup>th</sup> February 2012
Sunderland Partnership via: - Inclusive Communities Group - Sunderland Innovation and Improvement Group	25 <sup>th</sup> January 2012 8 <sup>th</sup> February 2012
Equality Forums	Electronic information shared
Sunderland Compact signatories	Electronic information shared
Engagement event for all interested stakeholders	1st February 2012
Joint Consultative Forum	25 <sup>th</sup> January 2012
Employee Groups (age, disability, gender, race, religion or belief and sexual orientation)	23 <sup>rd</sup> January – 16 <sup>th</sup> February 2012
Corporate Communities Group	Electronic comments
Sustainable Communities Scrutiny Committee	Engaged during February engagement period.
Council Cabinet consideration and approval	14 <sup>th</sup> March 2012
Publication	6 <sup>th</sup> April 2012

## **Appendix 2: Summary of Engagement Feedback**

As part of the process of preparing this Scheme the Council undertook a period of engagement during which a range of partners and interested groups took part. This process provided considerable depth of information on the key equality issues for people in Sunderland and suggestions for how to improve the Scheme, the profiles and expand on the objectives. Where possible these have been incorporated into this version of the Equality Scheme; however some of the comments will influence the action plan that will progress the objectives and some comments will influence the development of the profiles. The profiles will be going through an additional development process over the next twelve months to expand and refine them to provide greater detail on the day-to-day experiences of people in Sunderland.

### **Key equality issues for Sunderland raised during engagement**

The engagement highlighted a number of significant themes which have been expanded on in this version of the Scheme. These included the importance of promoting an inclusive, accessible and welcoming city as standard within Sunderland and the opportunity to use this to promote the city more widely. Efforts to tackle misconceptions and promote a generally positive environment were also highlighted as a key area for further development. This in particular was felt to be vital during a challenging economic period which has brought significant and fast changes. There was broad definition of equality bringing together the impact of both complex individual needs, and the location a person lives and works in. The session also highlighted the importance of responding to those needs which are not visible and the implications of disclosure on accessing services and feelings of safety and inclusion.

### **General Comments on the document and engagement process**

The response to the document was generally positive and it was felt that it covered the majority of the information in a comprehensive and comprehensible way; although a number of respondents felt a shorter and

less 'heavy' document would be helpful, we have therefore published a short, simplified summary document alongside the main report focusing on the challenges and actions for the future. A number of responses highlighted practical steps which could support the development of the objectives and supporting action plan.

The equality profiles received a significant proportion of the responses and highlighted a number of areas for further development to better reflect the day-to-day experiences of people in Sunderland including case studies. As the profiles are fundamental to underpinning all of the information required for equalities to be fully incorporated they will be fully revised through a process of work with the Equality Forums over the next year.



## Appendix B – Summary of Consultation Feedback and Response

Some of the sections of the Equality Scheme feel 'heavy'.	A short Executive Summary has been prepared to provide a simpler and more easily digested introduction.
More could be made of the benefits of equality and diversity within Sunderland and to celebrate diversity to enhance the city as a welcoming and open place for all.	The redraft of the document has additional sections in the introduction which highlights the benefits of equality and diversity and actions are included in the emerging action plan.
The progress and achievement made should be used as an opportunity to promote Sunderland outside of the city.	The emerging action plan will include actions which will promote Sunderland as a welcoming and opening place.
It is important to have accessible ways to contact the Council.	A section on customer service has been added, which includes accessible communications. The link between the Equality Scheme, the Customer Service Strategy, and customer complaints will be made to increase customer insight.
Recognition that some protected characteristics are visible and others invisible.	Equality profiles will be adjusted to reflect issues relating to 'visibility'.  Awareness of issues relating to visibility will be integrated into equality training.
Safety and perceptions of safety were raised as a significant issue for a number of people with protected characteristics.	The section on ARCH hate incident reporting has been strengthened and further actions to address the reporting of hate issues and the victim support that follows will be included in the emerging action plan.
Changes to welfare and financial reductions will have a significant impact on both demand for services and the ability of organisations to meet these.	This issue includes a number of issues beyond the scope of the Equality Strategy and the text has been changed to reflect this challenge.
Employment, training and volunteering opportunities are vital to individuals but prejudices can remain which prevent people from accessing opportunities.	An action to address prejudice in employment and volunteering opportunities will be included in the emerging action plan.

There is support for the wider aspects of equality such as poverty or living in areas of deprivation.	The section of the document has been further strengthened to explain clearly how this is already included in processes.
Scope for the profiles to be developed on an ongoing basis.	The profiles will be 'live' documents and will be developed through a process of improvement and consultation with the Equality Forums.

## Appendix C: Equality Analysis Summary

### **Policy/Decision/Project/Activity Title:**

**Equality Scheme 2012-2016**

**Responsible Officer: Kirsty McNally, Associate Policy Lead for Communities and Equalities**

### **3. Summary of Impacts and Response to Analysis**

Please provide a summary of the overarching impacts that have been highlighted through the analysis process through the three questions below. It is important to recognise that individuals may belong to one or more of these characteristic groups and the combined impact could be greater than any single impact.

#### **Who will the policy/decision/project/activity impact on and who will benefit?**

The strategy will impact on all residents of the city with particular emphasis on those who share the protected characteristics.

#### **Who will not benefit and why not?**

N/A

#### **Who should be expected to benefit and why don't they?**

N/A

### **4. Response to Analysis, Action Plan and Monitoring,**

In this section please outline what actions you propose to take to minimise the negative, and maximise the positive, impacts that have been identified through the analysis. By considering and implementing these actions the policy or action can be refined to make sure that the greatest benefits are achieved for the people of Sunderland. The performance monitoring process should also be set out to explain how ongoing progress is going to be followed to make sure that the aims are met.

From the analysis four broad approaches can be taken, (No major change, continue with the policy/action despite negative implications, adjust the policy/decision/action or stop the policy/action). Please indicate, using the list below, which is proposed.

- |   |              |
|---|--------------|
| No Major Change                             | ( <b>x</b> ) |
| Continue Despite Negative Implications      | ( )          |
| Adjust the Policy/Decision/Project/Activity | ( )          |
| Stop  | ( )          |

## Action Plan

ACTION	WHO	WHEN	MONITORING ARRANGEMENTS
Ensure that up to date, comprehensive and more refined equality profiles for the protected characteristics are developed as these underpin the information necessary for equalities to become fully incorporated in the Council's and wider Partnership activities.	People & Neighbourhoods Team	Quarterly	As with the Scheme itself this will take place through the Corporate Communications Group and EMT, through the Leader and Deputy Leader as equalities portfolio holders and the Partnership Inclusive Communities Group
Revise and update equality analysis prior to the six month review and revision of the Equality Scheme itself.	People & Neighbourhoods Team	By September 2012	As above



## Equality & Diversity Profile – Age

**This profile presents the current information available. We would like your feedback. Does it reflect your understanding of key issues for age? If not, what would you change or add?**

### The Population at Risk of Disadvantage & Their Experiences

#### Older People

The group that are most at risk of exclusion in this context are those aged 50 and over, and particularly those aged 65 and over. This group of adults can experience a range of disadvantages in terms of both access to, and benefiting from, facilities, services and solutions designed to support the city's population and in terms of wider societal disadvantage, including feelings of stigma and discrimination, lack of respect and social isolation.

The distribution of the population aged 65+ and 85+ years is shown in the maps below. The population of people aged 65+ years is currently 46,950, which represents 17% of the population in Sunderland; the population aged 85+ is 5,240 (1.8%). Figure 1 expresses the proportion of older people in the wards as a set of colours. Some groups of older people are more at risk than others because of their additional disadvantages. For example, it's estimated 39% of the population aged 65+ years (18,600) have problems with daily living tasks due to ill-health & disability (with the proportion increasing with age), whilst 3,100 people of this age group having dementia. However, Sunderland's older population is not just disadvantaged because of disability, but also because of their socio-economic demographics – those who might be most economically disadvantaged. Deprivation associated with older people's income is an area in which the city has made only gradual progress over the last six years, despite overall improvements in deprivation level.



The number of people aged 50+ years is expected to increase over the next 10 years (by 12% from 2010 to 113,900), with the single largest increase being in those aged 80+ years. Although this is to be welcomed – because it means more older people are living longer – it presents challenges to the city, because, although individual health outcomes may be improving in the city, the number of people with health - and then subsequent daily living - problems will also increase (in terms of daily living, by 28% even if health outcomes improve). This presents not only pressures on health and social care services, but also raises questions as the extent to which the city as a whole is shaped around the needs of this group, e.g. in terms of housing, physical infrastructure etc.

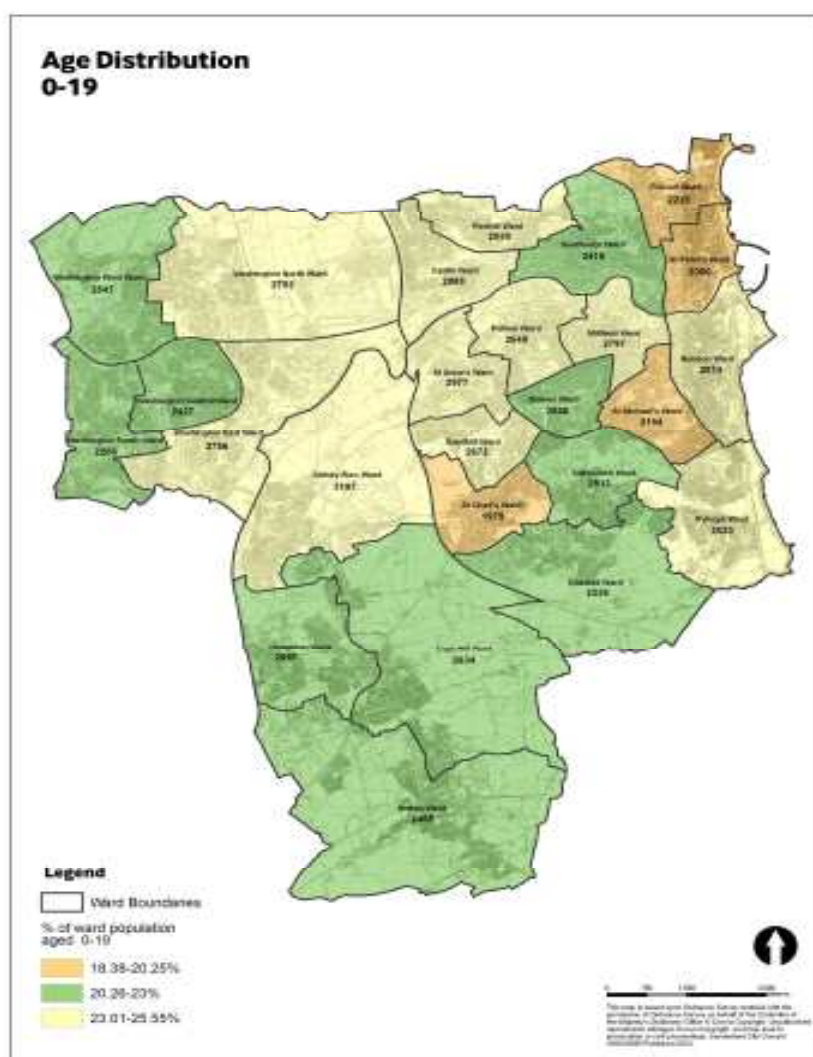
As part of the development of the 50+ Strategy and national and local research in Sunderland, people in this age group, and particularly people aged 65+ years, identified a number of issues they felt were most relevant to improve their experience of living in Sunderland:

- Most older people feel they can remain as healthy as possible, but some people have difficulties in maintaining their physical and mental well-being as they get older and would like help in tailoring solutions to help them keep fit and well;
- Older peoples' perception of safety in their own homes and their communities is generally high and as high as the population as a whole. However, there are concerns from some older people in accessing community facilities or public spaces at night;
- Some people do report they feel they experience discrimination because of their age in a range of settings, including, for those over 50, in terms of employment opportunities. In particular, older people, with a range of knowledge, skills and experience, are not always seen as a resource within local communities;
- A smaller group of individuals experience harm, abuse and neglect because of their age and circumstances. For example, there were 411 safeguarding notifications for people aged 65+ years in 2010/11 due to a range of issues, including financial abuse, with the alleged perpetrators generally known to them;
- Older people are more likely to be well-established in their local communities (96% of the population stated they had lived in Sunderland for 10 years or longer), and also have more positive views than the population as a whole about belonging to these communities, of people getting on well together and of people looking out for each other;
- Recognition that older people often need to be supported in caring responsibilities (e.g. for a spouse etc.), and sometimes this is a significant commitment for older people. For example, the last MORI Survey indicated 11% of people aged 65+ years had caring responsibilities, with nearly two-thirds providing 20+ hours of informal care per week;
- The overwhelming majority (98%) of older people in the same survey thought their housing was suitable for their care/health needs, with most people reporting they could afford housing costs. However, rising energy costs have led to higher levels of fuel poverty in the city;
- Recognition that older people may suffer from social isolation in their communities because of their life-circumstances, and the need to develop

or maintain family and social networks, including peer and inter-generational networks.

### Children & Young People

The 0-19 age group currently represents 22.6% of Sunderland's current population. The distribution of this population is shown in the map below. In the next ten years the 15-19 age group is projected to decrease, however, in contrast the under 15 age group is projected to increase. This highlights that children and young people are and will remain a significant group of the local population.



There are areas in which children and young people can be at a disadvantage or at risk of discrimination in access to services, the level and quality of service provided, and how they are treated by the service providers due to their age. Specific areas of disadvantage for children and young people are discussed below – these are all national, rather than local, findings. We will develop further information to look at the picture for young people more locally.

## Healthcare

- According to Ofsted, British Medical Association and Children's Commissioner findings:
  - Those aged 16-18 with a mental health condition or chronic illness received insufficient priority by children's health and social care services;
  - Services for older children contrasted unfavourably with those for very young children;
  - People aged 16 – 17 years can find themselves caught between services for children and those for adults with some 17 year olds not able to access any mental health services;
  - Lack of and poor services, for teenagers who need treatment for smoking, alcohol and drug addiction;
  - Lack of age appropriate services and emergency in-patient resources.

## Child Protection

- Research suggests that the experience of older children can be compared less favourably to that of younger children as 'unspoken assumptions' are often made that older children have brought abuse upon themselves;
- The Children's Society research on young people running away from home found that protection thresholds for teenagers accessing child protection services could be so high that only a risk to life would lead to action.

## Access to justice

- The relationship that young people have with the police and how they feel they are perceived is a feature of research by the Joseph Rowntree Foundation with the research exploring children's views of experiencing domestic violence, parental substance misuse and health problems found that the police would not listen to or speak directly to the children involved despite the children calling for help. The national Flanagan report into policing found that young people from groups with lower socio-economic demographics perceived the police to be heavy handed;
- Under 16s are excluded from police user satisfaction surveys on policing and community safety, in line with the Home Office Guidance to exclude victims under the age of 16.

## Public leisure facilities

- The use of the 'mosquito' device which emits a high pitched sound that only children and young people can hear has been used across the country. The sound can only be heard by children and young people and does not discriminate against behaviour rather it discriminates against all children and young people regardless of the legality of their actions and behaviour. The Children's Commissioner for England has reported on high volume of correspondence from children and young people about the

effects this has on them participating in community life and also its contribution to the negative image of children in society, and it has also been raised by the UN Committee on the Rights of the Child that it may violate the rights of children to freedom of movement and peaceful assembly;

- The Public Accounts Committee has indicated that two-thirds of local authorities are failing to consider the needs of children and teenagers when planning green spaces.

### Shops and restaurants

- The Children's Rights Alliance for England found that in some shops children would be required to leave their school bags at the door before entering, others were asked to empty their pockets before leaving to prove they had not been shoplifting and others would not allow children and young people to enter unless they were accompanied by an adult.

### Public transport

- The Equal Opportunities Commission found that the design of buses 'take insufficient consideration of the difficulties experienced by women who are encumbered by accompanying children' and more should be done to provide an adequate balance between providing adequate seating capacity, shopping bags, pushchairs, wheelchairs and mobility scooters';
- A survey of 500 mothers by Mother and Baby magazine found that 72% thought public transport was difficult for mothers and babies, 60% found bus drivers unhelpful, only 9 out of 25 train operators offered nappy changing facilities;
- The Department of Transport have reported children experiencing problems with bus drivers with examples of them failing to stop to pick people up. There are further reported issues for young people with difficulties in getting drivers to accept their bus passes and accessing buses which would entitle them to cheaper fares.

### Employment & Benefits

- Young people are also discriminated against in employment with minimum wages set lower rates for apprentices (£2.60 per hour), 16-17 year olds (£3.68), and 18-20 year olds (£4.98) in comparison to adults (£6.08) even if the job carried out is the same. There is also age related differentiated rates in terms of social security benefits, council tax benefits, and job seekers allowance;

### Media Image

- Young people are often seen to be portrayed negatively and occasionally stereotypically within the media. These negative perceptions of young people in general, can contribute to poor treatment that young people will often receive by adults, challenging negative public perceptions remains a priority locally and nationally.

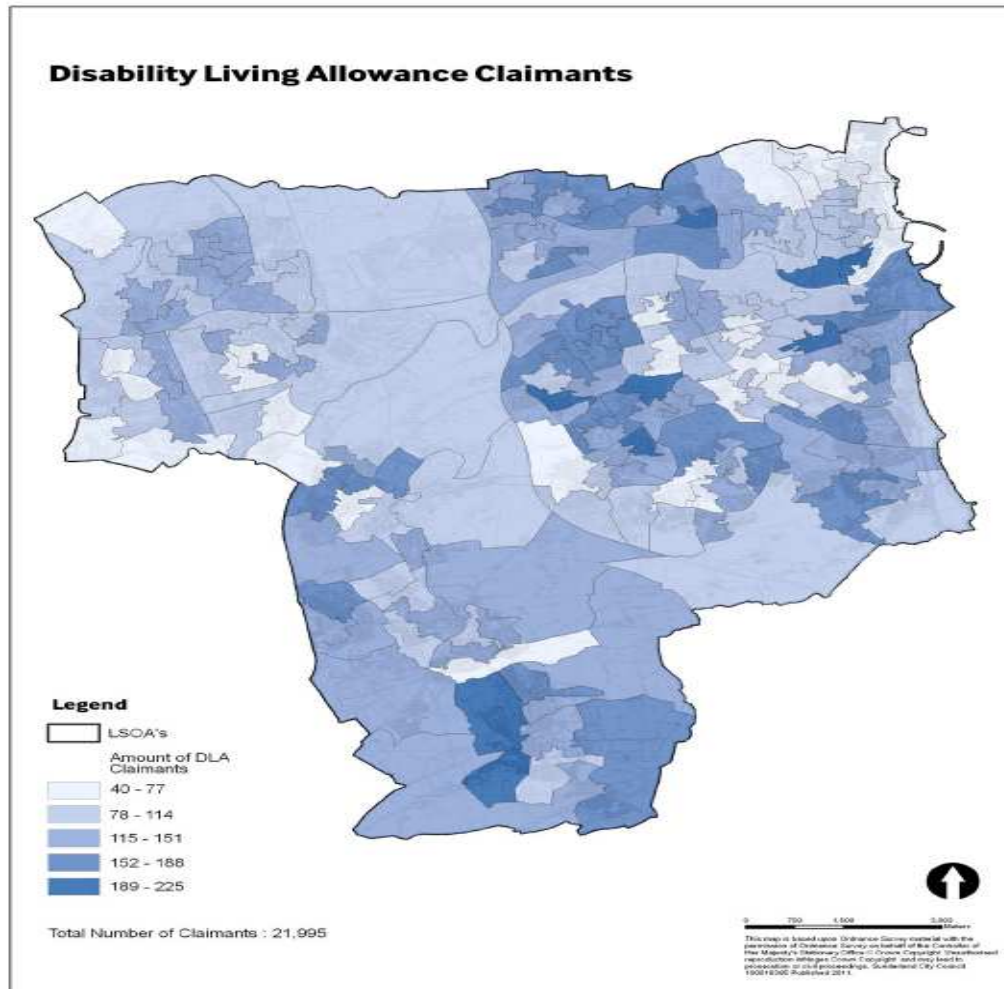
## Equality & Diversity Profile – Disability

**This profile presents the current information available. We would like your feedback. Does it reflect your understanding of key issues for disability? If not, what would you change or add?**

### **The Population at Risk of Disadvantage & Their Experiences**

Those with physical and learning disabilities are at risk of exclusion, for a number of reasons. This can be linked to an inability to access work or training opportunities, meaning that individuals can feel economically excluded, or being unable/finding it difficult to access universal mainstream services such as leisure facilities. This can result in feelings of social isolation, discrimination and stigma.

There are estimated to be 7.3% of the children's population aged 0 – 17 years with disabilities, which equates to 4,100 children in the city. There are estimated to be 52,800 adults aged 20+ in the city with physical or learning disabilities, with 33% of these (17,550) having severe disabilities. Of these 52,800 adults, 26,300 are aged 20 – 64 years, with the number of people with disability increasing with age. Information from the Department for Work and Pensions indicates that there are currently, 21,995 individual claimants of disability living allowance in the City. The distribution of claimants is shown in the map below, which expresses the proportion of people in the wards as a set of colours.



It is estimated 2.4% of the adult population have learning disabilities, of which 0.4% are thought to have more significant learning disabilities, those who are most likely to need help from others in daily living.

It should be recognised that not all people with disabilities will need help in daily living, particularly those with milder disabilities. However, those with significant/severe disability will be those that require, support in daily solutions. In the majority of cases this support is provided through family and friends. The MORI Survey 2010 highlighted that: 15% of people in Sunderland say they provide informal care for a friend or relative to help them with day to day tasks such as washing or cleaning, 57% of those undertaking care work gave more than 10 hours a week, with 38% devoting more than 20 hours a week.

Research suggests that there are a range of contributory factors that increase the risk of people with disabilities needing care, support and assistance in daily living. These factors include:

- Socio-economic factors associated with the individual, including whether they have any other conditions which limit daily living;
- Individual or household circumstances; whether the individual has an informal carer (particularly supporting them at home) and the



- circumstances of this arrangement, communication difficulties, opportunity (or otherwise) to develop social networks and relationships; and employment opportunities;
- Analysis also suggests the population of people aged 18 – 64 years with daily living problems is broadly associated with the level of deprivation within that area of the city, e.g. more people self-identify problems with daily living in Coalfields than in Washington;

The number of people likely to have functional dependencies aged 20+ years between 2010 and 2025 are projected to be 63,137. This is an increase of 19.6%. Over the same period, the numbers with “significant” or “very significant” dependencies, who are those most likely to need some help with daily living, particularly from the public sector are projected to be 21,762, an increase of 24%. The prevalence level of 2.5% of the overall population with learning disabilities is unlikely to change over the next 15 years. However, research suggests that whilst the incidence of people with learning disabilities isn’t increasing, individuals, particularly those with severe disabilities, are surviving longer with their conditions both into adulthood and older age. There is an increased risk of dementia for some people with learning disabilities, furthermore increasing the need for public sector care and support.

This presents challenges not only to health and social care services, but also raises questions as the extent to which the city as a whole is shaped around meeting the varied needs of people with disabilities, e.g. in terms of housing, physical infrastructure etc.

Some of the issues reported to be facing people with disabilities include:

#### Equitable access to services/Infrastructure of the City

- § The city aims to assure people with disabilities and/or vulnerabilities are enabled to access universal services, however, despite this, many vulnerable people and their carers report access to such services is mixed in the city. 3 main barriers were often cited:
  - Lack of meaningful information and advice available to them and/or professionals working with them about these opportunities;
  - Practical issues, or perceptions of barriers, relating to access to these services. This includes physical, economic, social and/or cultural access to services or these locations despite the improvements made to citywide services;
  - Lack of individuals’ self-confidence or self-motivation in accessing these services, which increased their social isolation, but also linked to externalised concerns about societal stigma about disabilities, which may relate to issues associated with community safety;
- § When examining attitudes to the amenities and infrastructure of Sunderland, the 2010 MORI survey found that people with a long term illness were more critical about aspects relating to disabled access and support. They were more dissatisfied than average with resting places, disabled car parking and disabled access to public buildings;

- § The survey also found individuals to be generally less satisfied with the quality of leisure centres, within their local area than all residents;
- § These findings were consistent with more recent consultation activities, which also highlighted, other issues faced by disabled residents in 'getting around' the City with specific feedback relating to pavements, buses, metro's and access to lifts;
- § It was suggested by this group that a dedicated website outlining disabled facilities and venues across the City, such as accessible restaurants would help to improve some of the issues faced by disabled people;
- § Consultation activities to gain an understanding of customers preferences when accessing council services, found that;
  - disabled respondents are less likely than non-disabled respondents to prefer to use the website and internet in general – 37% of disabled respondents do not use the internet compared to 12% of non-disabled respondents;
  - In terms of an automated telephone system, again the most important factor was the option to speak to a real person followed by the list of options to be kept short. There were however concerns about its use for specific groups such as those with sensory impairments and people with learning disabilities;
  - When asked about their experience when they last contacted the council, respondents with a disability are also more likely to rate information received as poor/very poor (16.1%) than non-disabled respondents (9.5%);

#### Shaping Policy

- § Evidence from the 2010 MORI Survey, found that 41% of residents with an Illness/Disability agreed that the Council asks for the views of local people, but only 24% felt they could influence decisions, affecting their local area only, this was slightly lower than all residents;

#### Economic contribution

- Some people also reported they experience discrimination, in terms of employment opportunities;
- § Local and national research suggests vulnerable individuals, particularly those with complex needs, need to be supported to develop a greater sense of self-confidence and self-esteem to help them become "job-ready" to enter or re-enter employment that's suited to their skills, experience and preferences;
- § The impact welfare reform will have on individual residents is relatively unknown, however, initial local analysis has indicated that there will be a large proportion of people who will see significant changes to the help they receive in the form of benefits. This may further increase, the number of people who feel financially isolated;

#### Perception on community safety

- § The MORI Survey found that 20% of people with disabilities felt unsafe in Sunderland;
- § In 2011 (April onwards), there were 275 hate incidents reported to the ARCH partnership, 16 incidents related to disability. It should be

recognised however that the number of incidents that actually take place are likely to be under reported;

#### Housing

- § Currently there are a number of people with learning disabilities, who are residing in residential care, outside of the area. This can result in feelings of isolation if people are not able to access appropriate social support networks and there is a need for appropriate accommodation support to be available within Sunderland to allow those people to return to the City;
- § Feedback from the 'Valuing People Now' consultation, highlighted that people with a learning disability;
  - Felt there was a lack of options available to them in terms of housing;
  - Where housing was available, it was often considered to be in less desirable parts of the City;
  - Although the type of housing and support people would prefer or need is quite individual there was a consensus around wanting to live in a safe area close to friends and families;
- § The city has identified a need to improve supported accommodation options for people with learning disabilities, given the anticipated pressure for supported accommodation over the next 15 years;



## Equality & Diversity Profile – Religion and Belief

**This profile presents the current information available. We would like your feedback. Does it reflect your understanding of key issues for religion and belief? If not, what would you change or add?**

### The Population at Risk of Disadvantage & Their Experiences

'Religion or Belief' refers to: "Any religion, religious belief or similar philosophical belief which has a clear structure or belief system." National research suggests those with religious or philosophical beliefs can find themselves victims of prejudice, discrimination, harassment and abuse from others. However, the disadvantages for individuals with this belief can be more subtle in relation to accessing, or benefiting from, facilities, services and solutions designed to support the city's population, as well as lack of access to opportunity, such as good quality housing and work.

Table 1 shows the breakdown of Sunderland's population according to individuals' stated religion from the 2001 Census (the 2011 Census results are not yet available). The relatively low diversity of individuals from different faith backgrounds within Sunderland (compared to England as a whole), can underplay the importance of fully understand the religious needs of specific residents. However, it is important to note that the level of diversity is thought to have increased significantly since 2001. It is likely that this trend will continue in the medium-term.

As with black and ethnic minority groups, individuals in the major faith groups tend to be concentrated within specific wards.

Religion	2001 ONS Census	
	Sunderland	England
Christian	81.5%	71.7%
Buddhist	0.1%	0.3%
Hindu	0.1%	1.1%
Jewish	0.0%	0.5%
Muslim	0.7%	3.1%
Sikh	0.2%	0.7%
Other	0.1%	0.3%
No religion	9.6%	14.6%
Not stated	7.6%	7.7%

The proportion of people from Christian and Jewish faiths continues to decline, the former mirroring an increase in the proportion of people no religion. However, the loss of the city's synagogue and the religious observance of not travelling by car on the Shabbat led to a net outward migration of Sunderland's Jewish population over time, so there are very few residents of the city from this faith.

The Census information doesn't reflect denominations within these broad headings: for example, the Catholic Church estimated that 10.4% of the population in the diocese to which Sunderland belongs were Catholic in 2001 (though this figure is thought to have subsequently declined) – equating to one in eight of the Christian population. Discrimination and prejudice can

occur between denominations of the same religion, as well as between different denominations.

Sunderland developed an Inter-Faith Forum to facilitate inter-faith exchange, communication and understanding amongst faith groups in Sunderland. The common view of this Forum was that this dialogue, and the management and administration of the network, should be the responsibility of faith groups in Sunderland, rather than the Council or Sunderland Partnership, but statutory agencies should be able to listen to, and understand the perspectives, of people of faith in the city on a range of issues. One issue therefore highlighted was the need to build better trust between diverse faith groups and public agencies such as the Council. This echoes the findings of national research, discussed below.

The Inter-Faith Forum identified another improvement area as being a greater level of inter-faith working to promote greater tolerance, understanding, and knowledge, of inter-faith work in communities to tackle potential misunderstanding and prejudice, despite educational initiatives in schools. A lack of awareness of religious needs can result in innocent misunderstandings, such as the need to shape services around faith-based lifestyle requirements of different faith groups.

When considering meaningful interaction with people from different backgrounds, findings from the 2010-11 citizenship survey indicated that, 82 per cent of people mixed socially at least once a month with people from different ethnic or religious backgrounds in a range of settings (excluding at home). Although this proportion was higher than in 2007-08 (80%) and 2009-10 (80%), this was unchanged from 2008/09. People were most likely to mix socially with people from different backgrounds at the shops (64%), followed by work, school or college (54%), and then a pub, club, café or restaurant (45%).

There were 275 hate incidents reported to the ARCH partnership (agencies who come together, such as the police and Council, to tackle discrimination and prejudice against minority groups), 2 of which were classified as religious-based incidents. A further 227 racist incidents were reported (with some overlap and linkage reported between the two characteristics). It should be recognised however that the number of incidents that actually take place are likely to be under reported.

The citizenship survey 2010/11, found that, 7 per cent of adults in England felt racial or religious harassment was a 'very' or 'fairly' big problem in their local area. People from ethnic minority backgrounds were more likely than white people to feel that racial or religious harassment was a 'very' or 'fairly' big problem (13% compared with 6%) Results from an earlier survey highlighted that younger people aged 16-64 were generally more likely to think this was a problem than older people (14 per cent in comparison with 15 of those aged 75 years). Women were also more likely than men to think that racial or religious harassment was a very or fairly big problem in their local area (8% compared with 6%).

44% of people reported that there was more religious prejudice today than there was five years ago; although this figure represents a year on year decline since 2008-09. White people were more likely to think that levels of racial prejudice had increased than people from ethnic minority backgrounds (47% compared with 23%) and were also more likely to think that levels of religious prejudice had increased (45% compared with 33%).

Research undertaken by the Home Office (Religious discrimination in England and Wales) in 2001 found that a consistently higher level of unfair treatment was reported by Muslim organisations than by most other religious groups; unfair treatment in every aspect of education, employment, housing, law and order and all local government services covered by the questionnaire. Information available from The Muslim Council of Britain also highlighted that Muslim men of Pakistani and Bangladeshi origin are disproportionately unemployed compared to other Asians. (<http://www.mcb.org.uk/library/statistics.php#4>)





## Equality & Diversity Profile – Gender Reassignment

**This profile presents the current information available. We would like your feedback. Does it reflect your understanding of key issues for gender reassignment? If not, what would you change or add?**

Although social attitudes have become more accepting towards trans people, there is a persistent assumption that there are only two genders (female and male) and this gender is the same as biological sex at birth. However, National studies suggest that around 0.6% of the population experience some degree of gender variance (i.e. trans-gender).

Specific areas of disadvantage for transgender people include:

- Transgender people are often victims of violence particularly trans women (Male To Female) as they are visibly trans for several years after starting living in their new gender role. Transphobic violence is more often directed at them than (Female To Male) trans men (1);
- In 2011 (April onwards), there were 275 hate incidents reported to the ARCH partnership, 2 of which were classified as transphobic incidents. It should be recognised however that the number of incidents that actually take place are likely to be under reported;
- Some, particularly young people in these groups struggle to come to terms with their gender identity and experience self-generated, family and/or societal pressure to conform to traditional societal stereotypes. This can lead to difficulties and confusion for individuals, including in terms of low self-esteem, lack of confidence and social isolation and even mental illness;
- Young transgender people report insecure housing, economic hardship, legal problems and difficulty in accessing appropriate healthcare. They have limited family support, high rates of substance abuse and high risk sexual behaviours (1);
- In regards to mental health and emotional well being, the UK's largest survey of trans people (N = 872) found that 34% (more than one in three) of adult transgender people have attempted suicide. Similar rates were reported in a US study (1);
- People from these groups report they often experience and/or expect more subtle prejudice regularly in terms of lack of access to, and being unable to benefit from, services and solutions designed to support the population as a whole. This includes perceptions of prejudices in employment, housing, access to health and Council services and public protection (e.g. police) and social, leisure and culture opportunities. There is therefore a need to better promote how public and private services can support individuals in these groups to their respective communities and to provide meaningful equality & diversity training to front-line staff to help shape these services to best meet the needs of these groups;
- Recognition that people in these groups may suffer from social isolation in their communities because of their sexual or gender orientation, and the need to develop or maintain family and social networks. Furthermore,

some people in these groups may want to celebrate and promote their self and group identity, partly to challenge the expectations of societal norms of gender orientation and its associated prejudices;

1 <http://www.nmhdn.org.uk/our-work/mhep/gender/transgender/>

## Equality & Diversity Profile – Mental Health

**This profile presents the current information available. We would like your feedback. Does it reflect your understanding of key issues for mental health? If not, what would you change or add?**

### **The Population at Risk of Disadvantage & Their Experiences**

Mental health needs arise from a combination of risk factors of varying intensity that adversely affect an individual's sense of mental well-being and affect people differently because of their varying degrees of emotional resilience. Some of these factors can be characterised as inherent factors, which includes genetic and biological factors (e.g. age and sex), whilst others can be characterised as, to some degree or other, "modifiable". This includes personally modifiable characteristics, such as:

- Family and socio-economic characteristics (e.g. marital status or social class);
- Individual or household circumstances (e.g. life events, educational qualifications, social networks, financial status, housing tenure);
- Environmental and/or societal factors (e.g. crime or deprivation index)

For this reason there are also differences in the occurrence of mental health needs amongst communities, with some groups more susceptible to mental illness than others, including within geographical locations in the city.

Mental health problems are extremely common – up to 1 in 4 people will experience mental ill health at some point in their lives, with approximately one in six suffering at any one given time. National research suggests there is a broad positive correlation of *relative* deprivation in an area and the degree of mental well-being within this area. Taken as a whole, Sunderland has high levels of socio-economic deprivation (albeit improving steadily). For example, 88 out of 146 sub-wards are in the first deprived 20% of sub-wards nationally (IMD2010). Sunderland therefore has higher levels of mental ill health than average compared to England and the North East as a whole.

The occurrence of child mental illness is estimated at 7.3% of children aged 5–10 and 10.1% of those aged 11–15 years have some form of mental health need. When considering adults, it is estimated 17% of the adult population experience some form of neurotic disorder, of which around 70% experience anxiety or depression in Sunderland at any given time. Mental illness occurrence rates are more common amongst women (nearly 1 in 5, and particularly amongst women from South Asian groups) than men. Approximately 4.4% - 5.8% of the adult population have some form of personality disorder and it is estimated that 1% - 2% of the adult population have more severe mental illness, such as schizophrenia (around 0.5%) or bipolar disorders (0.5% - 1.4%), with the highest occurrence amongst 16 – 44 years.

The future number of people with mental ill health in the city could be driven by several factors including:

- Medium-term economic impact on city due to effects of economic downturn which would result in potentially more people suffering longer-term worklessness;
- Increased number of older people in the population, with mental ill health for older people nationally thought to be under-recognised in the city;
- Societal changes, such as the increased number of single people living alone, may increase the level of social isolation which may negatively impact on individuals' well-being;

From national and local research, some of the issues reported to be facing people with mental illness include:

- Access to meaningful information and advice is reported to be an area for improvement, including initial access to assessment;
- Many people with mental disorders are either undiagnosed; it is thought older people particularly are at risk of suffering from a mental illness which is not diagnosed, or not in contact or treatment; e.g. it is estimated nationally that 35% of those with depression and 51% with anxiety disorders are not in contact with services;
- People with mental ill health are reportedly more susceptible to physical illness and lifestyle choices that may make them more susceptible to ill-health. For example, research suggests:
  - People with mental health needs are more prone to having a poor diet, smoking, drug and alcohol misuse and low rates of physical activity;
  - Are more at risk to coronary heart disease, bowel disease and diabetes;
  - People with severe mental illness are also at an enhanced risk of self-harm and suicide and are more likely to develop significant health problems at a younger age than the general population, and die faster from them;
- Work is known to be a positive protection factor in reducing the likelihood of people becoming mentally ill. Conversely, meaningful training, development and employment opportunities are part of recovery pathways for those with common and several mental health problems. However, Sunderland suffers from a significant degree of worklessness than the population of England, with worklessness rates representing 23% of the population, significantly higher than the 19% experienced nationally. The single most common reason for people accessing Incapacity Benefit is because of mental illness;
- The most common barriers faced by people with mental illness when trying to improve their quality of life can be a lack of confidence, low self-esteem, poor social skills and social networks and a lack of motivation. Furthermore, these issues were cited as major barriers in preventing individuals from accessing universal or mainstream services from which they could benefit. People with severe mental health problems such as psychiatric disorders also often suffer from significant social exclusion and a lack of social opportunities;
- One issue highlighted by people with severe and enduring mental illnesses accessing services is whilst most thought such services of generally high

quality, there were concerns over their effectiveness in promoting their independence in the longer-term – this is particularly true of people in supported accommodation;

- A number of vulnerable people with mental illness who have remained in supported accommodation or secondary mental health wards for extensive periods of time often find it difficult to progress to the next transition in their lives, inhibiting their ability to live their lives independently;
- There remain issues associated with suitable accommodation options for (particularly older) people with severe mental illness (that often have physical difficulties) discharged from long-stay secondary Mental Health wards. Resulting in people living in housing environments that may not be suitable for them, including those living in private-rented or RSL properties. Furthermore, such individuals have a heightened risk of homelessness because of potential income deprivation and/or challenging behaviours that may result in a threat to their continuing tenancies;



## Equality & Diversity Profile – Race

**This profile presents the current information available. We would like your feedback. Does it reflect your understanding of key issues for race? If not, what would you change or add?**

### The Population at Risk of Disadvantage & Their Experiences

People from black and minority ethnic (BME) groups can experience a range of disadvantages in living in the city. BME residents can find themselves victims of prejudice, discrimination, harassment and abuse. However, the disadvantages can be more subtle and might include in terms of both access to, and benefiting from, facilities, services and solutions designed to support the city's population, as well as lack of access to opportunity, such as good quality housing and work. Given the diversity of the relatively small BME population within Sunderland, there is a particular risk the city and its public agencies don't fully understand the needs of specific residents.

Latest population estimates from the Office of National Statistics, have shown that in Sunderland the BME population is significantly increasing. The overall White British population of Sunderland decreased from 263,200 to 262,300 between 2008 and 2009; by comparison, the BME population is believed to have increased by 9.6% over the same period. Currently the BME population within Sunderland is generally considered to be quite 'young', with, for example, only 0.5% of the city's population over 65 from BME groups.

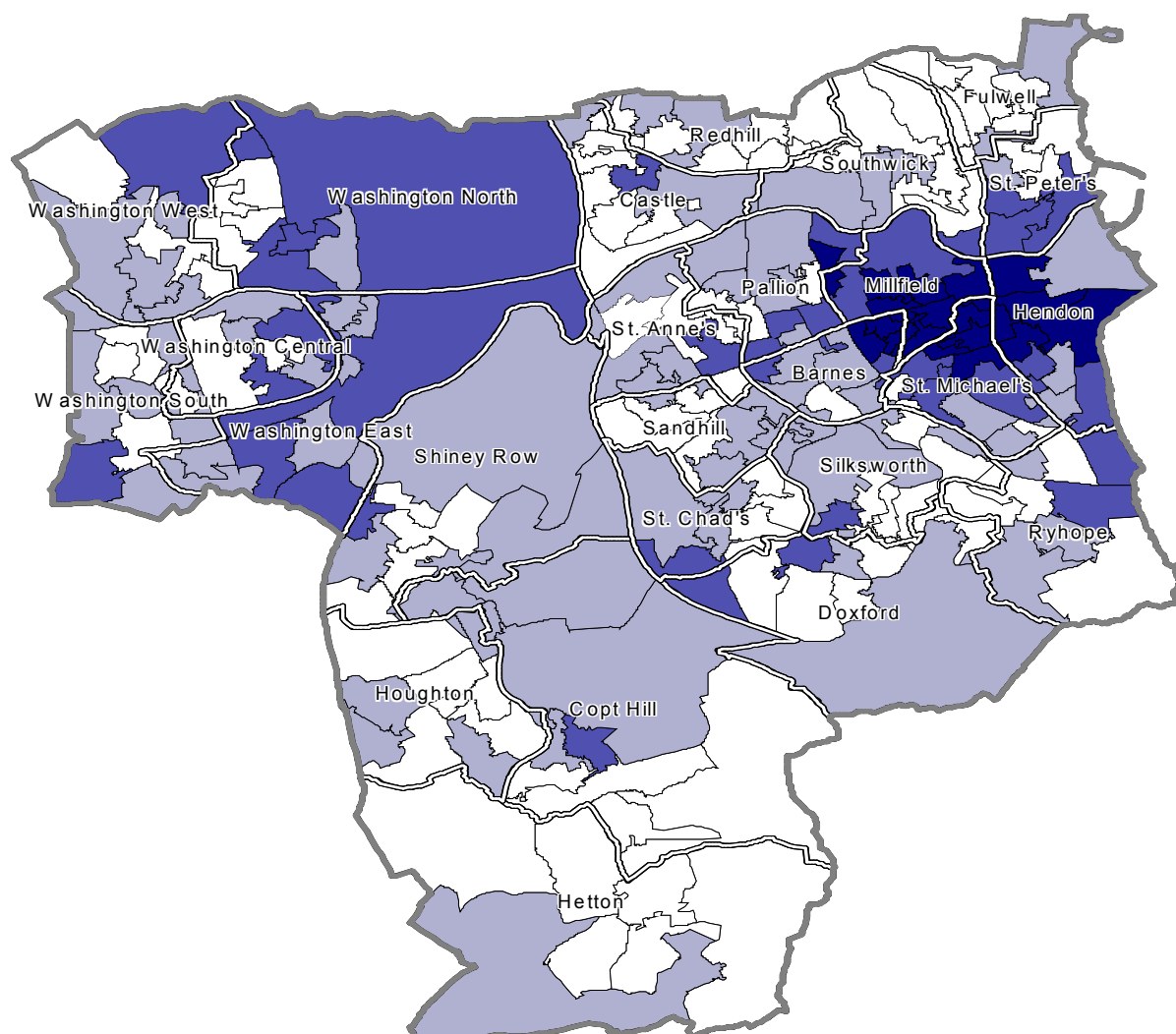
Sunderland has a very rich diverse community comprising of numerous cultural and social origin. The table below highlights the ethnic split of people residing in Sunderland and how this has changed between 2001 and 2009.

<b>Ethnic Group Population</b>	<b>2001</b>	<b>2003</b>	<b>2004</b>	<b>2007</b>	<b>2009</b>
<b>White</b>	<b>98.1%</b>	<b>97.2%</b>	<b>97.1%</b>	<b>96.1%</b>	<b>95.7%</b>
(Includes White Irish, White Other)					
Black	0.1%	0.4%	0.4%	0.5%	0.7%
(Caribbean, African)		(1100)	(1100)	(1500)	(1900)
Asian	0.9%	1.1%	1.1%	1.5%	1.7%
(Indian, Pakistani, Bangladeshi)		(3100)	(3100)	(4100)	(4700)
Chinese	0.2%	0.4%	0.4%	0.5%	0.3%
		(1000)	(1000)	(1400)	(800)
Other (All Mixed, Other Asians)	0.6%	0.9%	1.0%	1.4%	1.7%
and Others		(2700)	(2800)	(3900)	(4700)
<b>Total Black and Ethnic Minority Population as % of whole popn</b>	<b>1.9%</b>	<b>2.8%</b>	<b>2.9%</b>	<b>3.9%</b>	<b>4.4%</b>

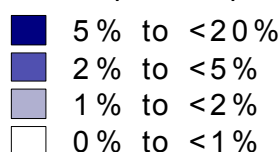
Source: **Table EE1**, ONS Mid-2009 Estimates

The map below shows the geographical distribution of the black and ethnic minority population across the city – however, it should be noted this is based on the 2001 census.

## Distribution of black and minority ethnic group population by lower tier super output area within Sunderland at 2001 Census



Percentage of population that are from black and minority ethnic groups by lower tier super output area at 2001 Census



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Information from the Office of National statistics, on components of population change 2009-2010, has highlighted a year on year increase in Sunderland, of international in-migration. These figures have increased from 1686 in 2007-08, to 1976 in 2008-09 and 2836 in 2009-10, a substantial growth of 68%. As a result of the government's dispersal policy, the City has also seen an increase in the number of asylum seekers since 1999. In September 2011 the number of asylum seekers in the city was 170, of whom 100 are single households & 24 families. The North East Refugee Service indicated the



largest number of refugees in the NE England were from Iraq, Iran and Zimbabwe.

The precise numbers of Gypsies and Travellers within the United Kingdom are unknown. The Commission for Racial Equality (CRE) estimates that there are between 270 and 360,000 Gypsies and Travellers in England alone living in bricks and mortar housing, around three times the number maintaining a nomadic lifestyle (Commission for Racial Equality 2006). Official government statistics (based upon the bi-annual Caravan Count – July 2009), estimated the number of gypsy/traveller caravans on sites across England authorised and unauthorised to be 17,437 (Source: Communities & Local Government).

There is limited information around the exact number of Gypsies and Travellers visiting Sunderland, although it is thought that this varies on a year by year basis. The City also lacks an in depth knowledge of the numbers of Gypsies and Travellers who live in the city in bricks and mortar accommodation. This highlights that Gypsy/Travellers are still living on the fringes of 'settled society' and suggests they are not getting access to basic amenities/services including health care and education. Gypsy/Traveller websites estimate that this population is on the increase, which may be due in part to dynamics of this population which is generally more youthful, with larger households, earlier ages of marriage/having children and stronger ties to extended families, than that of the general population.

The above analysis illustrates that although the BME population within Sunderland is comparatively small it is diverse and subject to dynamic changes. With this in mind the likelihood is, that there will be many issues and concerns, some of which will be general but others that will be very specific to relatively small groups of residents.

Research on local communities, undertaken by BME Independent Advisory Group, has indicated that there is a need to improve knowledge of local BME communities in Sunderland, in respect of their size, location and age profile. This information is required to ensure that Sunderland is able to better understand and fulfil the needs of these groups and ensure there are services available to meet those needs, delivered in a culturally sensitive way.

From national and local research, specific areas of disadvantage for BME population include:

#### Access to information

- § Local evidence, collected from residents, has highlighted a lack of general information available to BME communities. One significant reason for this is the language barrier, with a number of key information leaflets and publications, produced only in English
- § Not having adequate access to information, means that the BME community are often not aware or informed of general advice on day to day living such as claiming benefits; city services including; health, leisure and social activities; and community events.

### Access to services

- § Although the City has seen increases in the number of services aimed at the BME population, given the diversity of this community it is likely this only goes some way to meet the needs of residents;
- § Some BME residents may be unable to access specific retail services, such as specialist food and clothing stores, places of worship and community centres;
- § According to national research, general services such as libraries and leisure centres are often inadequately equipped to meet the needs of such a diverse population;
- § Services specific to the BME community are often situated within concentrated pockets in the city, where there is a greater proportion of residents. This can mean that individuals who live outside of those areas have difficulty in accessing these services.

### Health & Social Care

- § There is limited understanding of the needs of the BME population within Sunderland. This is particularly relevant when considering health care, in which there is historically poor engagement with services;
- § Information from International Community Organisation of Sunderland (ICOS) highlighted a number of barriers in accessing health, particularly in relation to GP services which are not always accessible to migrant communities;
  - Walk in Centres have also been reported to work differently in other countries and there is a need to make information relating to these services more readily available to BME communities to improve access and take up services;
  - Mental health can also be an issue amongst individuals from BME communities. For example: women from South-East Asian communities are reported to suffer from particularly high levels of mental illness; a number of asylum seekers residing in the city suffer from post traumatic stress disorder; and suicide is reported to be high amongst the Polish community. Given the poor take-up of health services, this raises some questions as to how these individuals are accessing the treatment they require and how this can be improved.

### Social Isolation

- § BME people account for only 4% of the overall population in Sunderland. This may result in some black and minority ethnic people feeling socially isolated, given that they may not have access to extensive social and family networks. This is particularly relevant amongst those residents from less established groups, who may lack a sense of belonging within their local area;
- § There are a number of former asylum seekers who have had their applications refused, living in the city supported by voluntary/charitable agencies. Given their specific situation, this may be a hidden population who are isolated from the wider community.

### Access to work/education

- § Language can often be a barrier in accessing both work and education for BME individuals, and this is the case for both adults and children;
- § There are very few education projects that explicitly address BME needs;
- § BME communities, with a large proportion of individuals employed by independent agencies, often have limited employment rights, access to health care, sickness pay and holiday entitlement and are often poorly paid.
- § There are particular barriers to some groups accessing work and adult education. For example, the Shakti project found many women from ethnic groups in the North East have little economic independence, with a significant minority of those from South East Asian communities looking after families full-time;

#### Community cohesion

- § Most people in Sunderland remain positive about community integration in their local area, though the proportion that feel positive (72%) is lower than the England average (85%);
- § The BME population within Sunderland, although growing is still substantially smaller than the white population. This in itself can be quite daunting for BME communities, with the majority of those individuals residing in pockets across the City. For those residents who are well established in the area it is likely there will be a high feeling of belonging within this area, however, for those communities that are less well established this can be issue;
- § Information from the 2010 MORI survey indicated that people from BME communities are more likely to feel strongly that people from different backgrounds get on well in local neighbourhoods (37% v. 17%), although this could largely be dependent on the area in which people reside, with a larger proportion of people from the Coalfields area disagreeing with this statement than residents from Washington;

#### Perception of community safety

- § Those from BME communities will often find themselves victims of discrimination and hate crime. In 2011 (April onwards), there were 275 hate incidents reported to the ARCH partnership, 227 of which were classified as racist incidents. It should be recognised however that the number of incidents that actually take place are likely to be under reported;
- § There were a number of reported incidents across the City, against both individuals and businesses, with younger BME and white residents becoming involved in affrays;
- § Data from previous MORI surveys have indicated that BME residents feel less safe walking alone in the city centre at night and women also feel less safe;

Specific areas of disadvantage for gypsies/travellers include:

#### Access to information

- § Due to the transient nature of Gypsies it is difficult to keep them informed of services available to them. They are generally, not in a location long

enough to gather relevant information for services they may need to access;

#### Access to services

- § Sunderland currently does not have any permanent, transit or stopover Gypsy or Traveller sites, although this has been identified as a need (specifically a stop over site for approximately 12 pitches). Therefore services provided are done so on an ad hoc basis and delivered at the site of the unauthorised encampment. Also, given the varying numbers of Gypsies and Travellers visiting the City, the needs of each group can vary significantly;
- § Gypsies and Travellers who temporarily reside in the city are regularly unable to access services as they will not have a fixed address and often have to move on with little or no notice;
- § There are procedures in place to overcome these issues, however, the nature of their lifestyle mean they often move on before they have the opportunity to access services they may be interested in;

#### Health & Social Care

- § Members of the Gypsy and Traveller community have a life expectancy of at least 10 years less than the general population. They are also 20 times more likely to suffer from the death of a child. Children are also less likely to have inoculations carried out. These issues are all important factors that are taken into consideration when Gypsies and Travellers visit the city. Difficulty seeing a GP can often result in visits to A&E;
- § All encampments receive a visit from a health visitor to try and resolve some of these issues, however, the nature of their lifestyle means they often move on before they have the opportunity to access services they may be in need of;

#### Social Isolation

- § Gypsies and Travellers generally reside in locations which include industrial estates and pieces of waste land;

#### Access to work/education

- § Traveller children often grow up outside of educational systems and nationally were found to be the lowest attaining amongst all Ethnic Minority groups (Source: [www.grtleeds.co.uk](http://www.grtleeds.co.uk)). Poor education means most Travellers are disadvantaged in the job market and have therefore traditionally been self employed;

#### Community Safety

- It is often the perception of the general population that crime increases when there are Gypsies and Travellers in the city, however, crime reports have shown that this is not the case;

## Equality & Diversity Profile – Sex

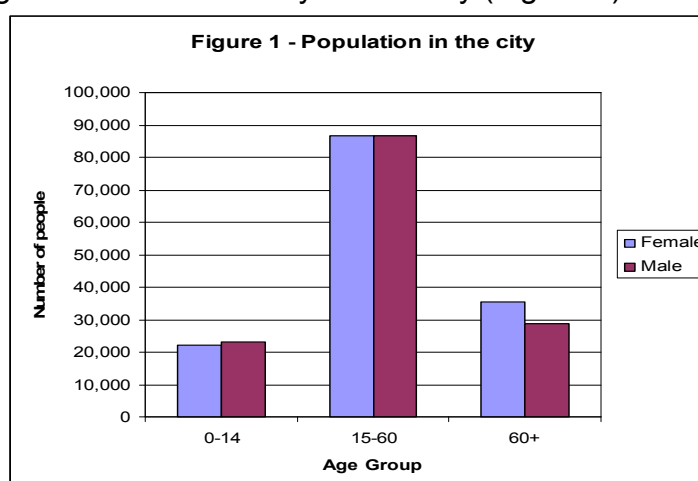
**This profile presents the current information available. We would like your feedback. Does it reflect your understanding of key issues for sex? If not, what would you change or add?**

### Risks of Disadvantage & People's Experiences

The purpose of this profile is to explore the extent to which men and women experience equitable access and outcomes to opportunities and services that are available to everyone as citizens of the city, an aim framed in national and European legislation. In these terms, there are specific areas of potential disadvantage for both sexes, but these issues need to be framed in the wider context of societal stereotypes, expectations and prejudice about gender roles that can help promote, or alternatively bound, opportunity, outcomes and access for both sexes.

Women are those who more often experience disadvantage in a number of areas of their lives. In 2010, there were 144,637 women and girls in the city, with the age distribution shown in Figure 1. This represents 51% of the population largely because women's life expectancy is longer than men, so there were a greater number of older women than men in the city. This trend of a greater number of (older) women in the city is expected to continue as part of the ageing population over the 15 years. At the same time, there was a smaller number of girls aged under 15 than boys in the city (Figure 1).

It should be noted disadvantage amongst some specific groups of women (and indeed men) can be compounded because of inequalities associated with more than one strand of diversity. For example, older women may be at particular risk of disadvantage because of age *and* gender discrimination.



Women can also be at risk of disadvantage periodically for example in pregnancy and maternity, local data, highlights a slight decrease in the number of births in 2010/11 when compared with the previous year; 3442 and 3515 respectively (data provided by the PCT).

From national and local research, specific areas of disadvantage for women include:

- Potential for prejudice, stigma and harassment in individuals' not conforming to (sometimes cultural) stereotypes associated with women's and men's gender, marital or relationship status – these issues can also affect men, although the stereotypes are clearly different. For women, expected stereotypes involve expectations of both domestic and caring roles – whether caring for children, the disabled or the elderly. In the 2010 Residents' Survey, 19% of women stated they had caring responsibilities of adults, compared to 12% of men. Some communities, e.g. those from black and ethnic minority groups, are reported to have particular expectations of women, e.g. the Shakti project found many women from ethnic groups in the North East have little economic independence, with a significant minority of those from South East Asian communities looking after families full-time;
- These issues of stereotypes also exist in terms of expectations of employment for both sexes. For example, there is a strong gender bias in learning and employment in areas such as health, public services and care sectors towards women; and in areas such as construction, engineering and planning environment towards men. Women are also much more likely to be employed part-time, data from 2010-11, show this to be 39.4% of women in comparison to 11.7% of men (Source NOMIS – APS);
- Women are also less likely to be self-employed than men. Figures from 2010/11, estimate the number of women self employed in Sunderland to be 4.6%,(of those in employment) for males however, this is estimated to be more than double at 10%;
- Women are more likely to experience or perceive barriers to employment, education, vocational and life-long learning and, even if this is not an issue, this may affect their own and others' perspectives on their work-life balance between their own, family and work commitments;
- Women can be at risk of pregnancy and maternity-related discrimination both outside of the workplace, or in employment if a woman is treated unfavourably because: of her pregnancy, pregnancy-related illness, is on compulsory maternity leave, is exercising her right to take ordinary or additional maternity leave;
- More recent national studies suggests that the cumulative impact of the welfare reforms are likely to be disproportionately affect women, particularly those in the bottom 10% of income households, than men, because of the range of benefits to which they have access – evidence suggests that a greater proportion of women's income is derived from benefits associated with families rather than private salaries than men;
- Women continue to suffer a gender pay gap between men doing comparative jobs. The median gross weekly full time salary for a women residing in Sunderland in 2011 was £394.50, in comparison this was £442.90 for males (Source NOMIS);
- Women also continue to have less representation in public life and senior decision-making roles. This is despite a stronger performance at Key Stage 4 for girls as opposed to boys: 60% of girls achieved 5 or more A\* - C GCSEs (including English & Maths) compared to 50% for boys in Sunderland; this difference is greater than the national average position;
- Women experience barriers not just to income levels (see below) but also access to economic or personal independence for some women, including

in terms of their partnership rights. This can lead to, or is associated with, financial poverty or reduced life opportunities particularly for some groups in lower socio-economic categories, including in terms of wellness and sporting opportunities;

- Mental health problems are more common amongst women than men (19.7% and 12.5% of the respective populations suffer from mental illness), and there is even higher prevalence amongst certain groups (e.g. SE Asian women: 34%). These higher rates of mental disorders can be associated with issues of self-esteem and self-confidence;
- Women are more likely to be victims of specific crimes or incidents, such as rape and domestic violence, and are more likely to have concerns over their safety in the community. In the 2010 Residents' Survey, 19% of women stated they felt unsafe in their communities and in the city centre, respectively, compared to 17% of men. National findings suggests an additional concern is the level of under-reporting of such crimes to the police;
- A particular issue in Sunderland is the higher level of gender-related violence and abuse than England average – there were 1,555 incidents of domestic violence in the city, the highest in the North East region. However, domestic violence is believed to under-reported and national research suggests at least 1 in 4 women in the UK will experience this in their lifetime. There is significantly more repeat victimisation than for any other type of crime, with, on average, a woman assaulted at least 35 times before she reports an assault to the police;

Specific areas of disadvantage for men include:

- Men, particularly those in lower socio-economic groups in deprived areas, are more likely to suffer from a range of life-limiting conditions at a younger age than women, with reduced life expectancies. There is mixed evidence in the city as to whether the “gap” between Sunderland and England in terms of inequalities associated with mortality rates and/or life expectancy is improving. At least part of the reason for these issues is associated with men's lifestyles and changing behaviours, e.g. reducing alcohol consumption;
- As discussed above, boys are more likely to achieve lower results at Key Stage 4 than girls;
- Nationally, research suggests men are more likely to suffer from a greater degree of social isolation and severe mental illness (including psychotic disorders) than women and are less likely to come forward for advice, information or help about their personal circumstances. Men aged below 25 years are the single largest group of individuals that are at risk of suicide, with the same group at risk of homelessness;





## Equality & Diversity Profile – Sexual Orientation

**This profile presents the current information available. We would like your feedback. Does it reflect your understanding of key issues for sexual orientation? If not, what would you change or add?**

### **The Population at Risk of Disadvantage & Their Experiences**

Lesbian, gay and bisexual (LGB) groups can experience a range of disadvantages largely in terms of societal disadvantage, including feelings of stigma and discrimination, lack of respect and social isolation. A consequence of these issues is that some individuals in these groups may have difficulty in terms of both access to, and benefiting from, facilities, services and solutions designed to support the city's population.

The Office of National Statistics 2010 Household Survey reported 1.0% of the adult population considered themselves to be homosexual, with 0.5% bisexual, although around 3% of the population refused to answer. Previous national studies indicated 6% of the population are gay or bisexual. This is consistent with the figures for Sunderland, where it is estimated that there are circa 17,250 (1) people who identify as LGBT. Figures recorded in the 2010 MORI Survey are lower than these levels however this may be due to some people being reluctant to report their sexuality for a variety of personal reasons - around 4% of the sample refused to disclose their sexuality.

Since the Civil Partnership Act came into force in December 2005, there were over 46,000 civil partnerships formed in the UK, according to the Office for National Statistics, and 97 in Sunderland. The number of civil partnerships in the UK peaked in 2006, with many same-sex couples in longstanding relationships formalizing their status as soon as the law was introduced. However since this time figures have shown a steady decline. Although the national trend is consistent with that of Sunderland, the decrease in civil partnerships has been less substantial, at around 30-35%.

It is likely the proportions of LGB people within the overall population will remain around the same over the next few years, but figures may appear to increase because of higher self-reporting, as trust and tolerance increases in Sunderland. Currently there is very limited availability to Sunderland specific information and data however, the key issues reported to be facing people within these groups include:

- Some, particularly young, people in these groups struggle to come to terms with their sexual identity and experience self-generated, family and/or societal pressure to conform to traditional societal stereotypes. This can lead to difficulties and confusion for individuals, including in terms of low self-esteem, lack of confidence and social isolation. It is estimated that 65% of young LGB people experience homophobic bullying in Britain's schools and seven out of ten of these state that it has an impact on their school work (2). What many people might value is advice, information and

practical support in coming to terms with their identity, including in terms of peer support networks;

- Experience of prejudice in many public and private sector services and in society as a whole, can lead to physical or psychological harm,. This can lead to clear examples of harassment. However, people from these groups report they often experience and/or expect more subtle prejudice regularly in terms of lack of access to, and being unable to benefit from, services and solutions designed to support the population as a whole. This includes perceptions of prejudices in employment, access to health and Council services and public protection (e.g. police) and social, leisure and cultural opportunities. There is therefore a need to better promote how public and private services can support individuals in these groups to their respective communities and to provide meaningful equality and diversity training to front-line staff to help shape these services to best meet the needs of these groups;
- In 2011 (April onwards), there were 275 hate incidents reported to the ARCH partnership, 31 of which were classified as homophobic incidents. It should be recognised however that the number of incidents that actually take place are likely to be under reported;
- In regards to Housing it is reported that nationally, one in five LGB people expect to be treated worse than heterosexuals when applying for social housing (3) and 40% of homeless youths identify as LGBT, compared to 6% in the population as a whole(4);
- LGB individuals are also estimated to use mental health services more often than the heterosexual population, with 25% of LGB people report experiencing negative attitudes from healthcare staff (1);
- When considering Adoption & Fostering, nationally nine in ten lesbian and gay people expected to face barriers if they applied to become foster parents (3);
- Within the workplace, one in six people in Great Britain have witnessed homophobic bullying (5). A third of lesbian and gay people think those that are open about their sexual orientation are more productive in the workplace (3);
- Recognition people in these groups may suffer from social isolation in their communities because of their sexual orientation, and the need to develop or maintain familial and social networks. Furthermore, some people in these groups may want to celebrate and promote their self- and group identity, partly to challenge the expectations of societal norms of sexual orientation and its associated prejudices.

(1)Mental and emotional needs assessment of the LGBT populations of NHS South of Tyne & Wear; (2)The School Report, Stonewall; (3)Serves You Right, Stonewall; (4) [www.communities.gov.uk/youthhomelessness/wideneeds/lgbtmodule/](http://www.communities.gov.uk/youthhomelessness/wideneeds/lgbtmodule/); (5)Living Together, Stonewall;

<b>CABINET MEETING – 14 MARCH 2012</b>  <b>EXECUTIVE SUMMARY SHEET – PART I</b>	
<b>Title of Report:</b> School Admission Arrangements - September 2013	
<b>Author(s):</b> Executive Director Children's Services	
<b>Purpose of Report:</b> The purpose of the report is to seek approval of the school admission arrangements for September 2013.	
<b>Description of Decision:</b> Cabinet is recommended to approve: <ul style="list-style-type: none"> <li>i the admission policy and procedures;</li> <li>ii details of the oversubscription criteria;</li> <li>iii published admission numbers (PANS)</li> </ul>	
<b>Is the decision consistent with the Budget/Policy Framework?</b> <span style="float: right;"><b>Yes</b></span>	
<b>If not, Council approval is required to change the Budget/Policy Framework</b>	
<b>Suggested reason(s) for Decision:</b>  Cabinet approval of the admission arrangements is required prior to submission to Department for Education (DfE) and publication for parents making applications for admissions for the September 2013 school year.	
<b>Alternative options to be considered and recommended to be rejected:</b>  As the publication of admission arrangements is statutory there are no alternative recommendations to consider.	
<b>Is this a “Key Decision” as defined in the Constitution?</b> <div style="text-align: center;">Yes</div>	<b>Relevant Scrutiny Committee:</b>  Children, Young People and Learning
<b>Is it included in the Forward Plan?</b> <div style="text-align: center;">Yes</div>	



**SCHOOL ADMISSION ARRANGEMENTS - SEPTEMBER 2013 REPORT**

**REPORT OF THE EXECUTIVE DIRECTOR CHILDREN'S SERVICES**

**1. PURPOSE OF THE REPORT**

- 1.1 To seek approval of the school admission arrangements for September 2013.

**2. DESCRIPTION OF THE DECISION**

Cabinet is recommended to approve:

- i the admission policy and procedures;
- ii details of the oversubscription criteria;
- iii published admission numbers (PANS)

**3. BACKGROUND**

- 3.1 The School Standards & Framework Act 1998 (as amended by the Education & Inspections Act 2006, implementing Regulations and the associated statutory School Admissions Code) has established a framework for consultation on admission arrangements.
- 3.2 The Act requires the Local Authority (in respect of Community & Voluntary Controlled Schools) to determine, before the beginning of the relevant school year, the admission arrangements which are to apply in respect of that year.
- 3.3 The Local Authority is required to consult all schools (including Voluntary Aided and Trust schools and Academies), CE & RC Dioceses and neighbouring Local Authorities by 1 March 2012, about the admission arrangements for September 2013.
- 3.4 On 1 February 2012 a new Admissions Code came into force, affecting the 2013/14 admissions intake.

The key changes include:

- giving adopted children who were previously in care the same, highest priority for places as looked-after children;
- introducing a 'national offer day' for primary places, mirroring that for secondary offers;
- allowing schools to prioritise the children of staff employed there for two or more years, or who will meet a skills shortage;
- allowing infant classes to exceed the statutory limit where the 31st child is a twin or from multiple births, or of armed forces personnel;
- allowing academies to prioritise disadvantaged children who are eligible for the Pupil Premium; and

- allowing schools to take direct applications from parents to help reduce delays in finding a school place once term starts.
- 3.5 The changes have been reflected in the Admissions arrangements set out in Appendix 1 and the oversubscription criteria set out in Appendix 2. The criterion of allowing schools to prioritise the children of staff employed there for two or more years, or who will meet a skills shortage has not been included in the oversubscription criteria for 2013 but will be consulted on for 2014 admissions.

#### **4. CURRENT POSITION**

- 4.1 As in previous years, the Local Authority proposes to operate a co-ordinated scheme with Voluntary Aided and Trust schools, Academies and neighbouring Local Authorities. Academies in Sunderland operate within the same admissions policy as other community schools.
- 4.2 Appendix 1 sets out the proposed admission arrangements; Appendix 2 sets the oversubscription criteria. For 2013 there are no proposed changes to the arrangements or oversubscription criteria currently in place. Consultation, as outlined in paragraph 3.3, has taken place, with the deadline for responses being 1 March 2012. No responses to the consultation were received, therefore, with Cabinet approval; it is intended to forward the agreed admissions arrangements to the DfE, as required by regulation.
- 4.3 In line with regional and national trends, the birth rate locally is increasing after a sustained period of decline. This has led to a consequent increase in demand for school places in the primary sector. In September 2011 there was significant pressure on reception places in the Washington area, which resulted in a shortfall of places. This in turn resulted in the admission numbers at Lambton Primary and Oxclose Primary schools being increased for 2011 from 30 to 51 and 30 to 60 respectively. Projections show a similar increase in the numbers seeking places in Washington for September 2012, as compared to previous years. There is a projected dip in numbers in 2013 with a rise again in 2014 and 2015, the furthest ahead any sound projections can be made.
- 4.4 A programme of meetings has taken place with headteachers and chairs of governors in each ward area of Washington to explore solutions to accommodate the projected shortfall in places for September 2012. Ward members, who have valuable knowledge about their local schools and areas have also been involved in this planning process which will support the focus on solutions for those communities and schools within Washington where there is pressure on places. Solutions are being explored, for September 2012 and longer term for 2014 and beyond. The solution for 2012 will include increasing the PANs of one or more primary schools to accommodate additional numbers. PANs for September 2012 were originally agreed by Cabinet on 9<sup>th</sup> March 2011. any proposed increases to these PANs will be circulated before the Cabinet Meeting on 14<sup>th</sup> March 2012.

- 4.5 Some areas in the South of the city also experienced pressure on places for September 2011, which resulted in the admission number being increased from 30 to 60 at South Hylton Primary school for September 2011. The position for September 2012 looks similar and groups of schools in the south area have been visited to explore solutions. Again, the solution for 2012 will include increasing the PANs of one or more primary schools in the area and these will be circulated before the Cabinet Meeting on 14<sup>th</sup> March 2012.
- 4.6 Members may be aware that Grindon Hall Christian School in Nookside Sunderland (currently an independent fee paying school) has applied to the Secretary of State for Education to become a Free School from September 2012. Free Schools are independent non-profit making organisations which can be either primary or secondary and which can be established by any interested party. Admissions to Free Schools are determined between the school and the DfE, and admission criteria for Grindon Hall is currently in the process of being agreed. Whilst the Local Authority will not be involved in the allocation of places, the impact of the admissions policy on neighbouring schools will need to be considered in future planning of places. It is understood that there will be two classes of 20 places in each year group for pupils aged 4-16.
- 4.7 Appendix 3 shows the PANs for September 2013 proposed by the Local Authority, as part of the consultation. The following changes are proposed:
- Farringdon Primary** - increase the PAN to 60 to reflect the oversubscription and successful appeals trend of the previous three years
- Highfield Primary** - increase the PAN to 60 to reflect the oversubscription and successful appeals trend of the previous two years, and the projected oversubscription for September 2012
- Academy 360** also proposes to increase its PAN to 60 to reflect projected oversubscription in 2013.
- Houghton Kepier Academy** – also proposes to increase its PAN from 210 to 250 for September 2013.

## 5. REASONS FOR THE DECISION

- 5.1 Cabinet approval of the admission arrangements is required prior to submission to DfE and publication for parents making applications for the September 2013 school year..

## **6. ALTERNATIVE OPTIONS**

- 6.1 As the publication of admissions arrangements is statutory there are no alternative options to consider.

## **7. LEGAL IMPLICATIONS**

- 7.1 In line with the School Admissions Code 2012, Local Authorities must determine, consult on and publish its admission arrangements.

## **8. RELEVANT CONSULTATION**

- 8.1 Consultation took place with Headteachers and Chairs of Governing Bodies of Community, Voluntary Controlled, Voluntary Aided and Trust Schools and Academies; Church of England and Roman Catholic Dioceses and neighbouring Local Authorities.

## **9. BACKGROUND PAPERS**

- 9.1 Cabinet report of 9<sup>th</sup> March 2011.



## **APPENDIX 1**

### **Co-ordinated Admissions Scheme for secondary schools in the area of Sunderland Local Authority**

#### **Introduction**

**1. This scheme is made by Sunderland City Council under the Education (Co-ordination of Admission Arrangements) (Secondary) (England) Regulations 2002 and applies to all Secondary Schools in Sunderland.**

**The proposed Co-ordinated Admission scheme for Sunderland LA is set out below and complies with the changes introduced in the new School Admissions Code, which reflects new legislation laid out in the Education and Inspections Bill 2006.**

**A separate scheme exists in relation to primary schools**

#### **Interpretation**

##### **2. In this Scheme -**

"the LA" means Sunderland City Council acting in their capacity as local authority;

"the LA area" means the area in respect of which the LA is the local authority;

"primary education" has the same meaning as in section 2(1) of the Education Act 1996;

"secondary education" has the same meaning as in section 2(2) of the Education Act 1996;

"primary school" has the same meaning as in section 5(1) of the Education Act 1996;

"secondary school" has the same meaning as in section 5(2) of the Education Act 1996;

"school" means a community or voluntary school (but not a special school) which is maintained by the LA;

"voluntary controlled schools" means such of the schools as are voluntary controlled schools, where the LA sets the admissions criteria and offers places;

"VA schools" means such of the schools as are voluntary-aided schools;

"academy" means such of the schools as have academy status;

"admission authority" in relation to a community or voluntary controlled school means the LA and, in relation to a VA or Trust school or academy means the governing body of that school;

"the specified year" means the school year beginning at or about the beginning of September 2013;

"admission arrangements" means the arrangements for a particular school or schools which govern the procedures and decision making for the purposes of admitting pupils to the school;

"parent/carer" means any person who holds parental responsibility as defined under the 1989 Children Act and with whom the child normally resides;

"casual admission" means any application for a place in the first year of secondary education that is received after 1 April 2013 including those received during the academic year commencing in September 2013 and applications for a place in any other year group received at any time from the commencement of the Scheme; and

"eligible for a place" means that a child has been placed on a school's ranked list at such a point, which falls within the school's published admission number.

### **3. Commencement and extent**

This scheme applies in relation to the admission arrangements for the schools for admission year 2013/2014 (the specified year).

The LA will include in its admission arrangements for the specified year the provisions set out in Schedule 1 to this scheme, or provisions having the same effect.

The governing body of each of the VA schools and academies will include in its admission arrangements for the specified year the provisions set out in the Schedule, so far as relevant to that school, or provisions having the same effect.

### **4. The Scheme**

1. The Scheme shall be determined in accordance with the provisions set out in Schedule 1 and processed in accordance with the timetable set out in Schedule 2.
2. The Scheme shall apply to every secondary school in the LA area as identified in Appendix 1 (except special schools) and shall take effect from 16 April 2012.

3. The Scheme will also include applications from parents seeking admission to Sunderland schools who live within the following neighbouring LAs:

- Durham LA
- Gateshead LA
- South Tyneside LA

We will also co-ordinate our admission process with any other Admission Authorities where relevant.

## **SCHEDULE 1**

### **PART I - THE SCHEME**

1. There will be a standard form known as the Application form (AF).
2. The AF will be used for the purpose of admitting pupils into the first year of secondary education in the specified year, and for any applications made for a "casual admission" into any year group in the admissions round leading up to, and during, the academic year 2013/2014.
3. The AF must be used as a means of expressing up to 3 preferences for the purposes of section 86 of the School Standards and Framework Act 1998, by parents resident in the LA area wishing to express a preference for their child-
  - a. to be admitted to a school within the LA area (including VA and trust schools and academies);
  - b. to be admitted to a school located in another LA's area (including VA and trust schools and academies).
4. **The AF will -**
  - a. allow the parent to express up to 3 preferences by completing the form, including, where relevant, any schools outside the LA's area, in rank order of preference,
  - b. invite parents to give their reasons for each preference,
  - c. specify the closing date and where the application form must be returned, in accordance with paragraph 10.
5. **The LA will make appropriate arrangements to ensure:**
  - a. that the AF is available on request from the LA and on-line at **[www.sunderland.gov.uk](http://www.sunderland.gov.uk)** and
  - b. that the AF is accompanied by a written explanation of the co-ordinated admissions scheme.
6. **The LA will take all reasonable steps to ensure that:**
  - a. every parent resident in the LA area who has a child in their last year of primary education receives a copy of the AF (and a written explanation); and
  - b. every parent whose application falls within the category of a casual admission receives a copy of the AF (and written explanation), on request, and understands the process.

Parents will be advised that they will receive no more than one offer of a school place and that:

a place will be offered at the highest ranking nominated school for which they are eligible for a place under the admission criteria; and

explain that, if more than one school is nominated and no order of ranking is stated, the parent will be regarded as having ranked the schools in the order appearing on the form (the first-mentioned being ranked the highest); and

if a place cannot be offered at a nominated school, a place will be offered at an alternative school.

7. All preferences expressed on the AF are valid applications. The governing body of a VA school or Academy can require parents who wish to nominate, or have nominated, their school on the AF, to provide additional information on a supplementary form only where the additional information is required for the governing body to apply their oversubscription criteria to the application. Where a supplementary form is required, it will be sent to parents by the governing body for completion and returned to the school.

8. Where a school receives a supplementary form from a Sunderland resident it will not be regarded as a valid application unless the parent has also completed an AF and the school is nominated on it. Where supplementary forms are received directly by VA schools or academy, the school must inform the LA immediately so it can verify whether an AF has been received from the parent and, if not, the LA will contact the parent and ask them to complete an AF. Under the requirements of the scheme, parents will not be under any obligation to complete an individual school's supplementary form where this is not strictly required for the VA or Academy governing body to apply their oversubscription criteria.

9. Any school which operates criteria for selection by ability or aptitude must ensure that its arrangements for assessing ability or aptitude, to enable decisions to be made on nominations, conform with the timing requirements of the scheme as set out in Schedule 2. (NB no Community or VA School or Academy in Sunderland operates criteria for selection-based ability or aptitude).

### **Processing of AFs**

10. Completed AFs are to be returned to the LA by **Wednesday 31 October 2012**. It will be the responsibility of parents to ensure that AFs are returned directly or via primary schools to the LA, in a paper format or on-line by the closing date.

### **Determining offers in response to the AF**

11. The LA will act as a clearing house for the allocation of places by the relevant admission authorities in response to the AFs. The LA will only make any decision with respect to the offer or refusal of a place in response to any preference expressed on the AF where-

- (a) it is acting in its separate capacity as an admission authority, or
- (b) an applicant is eligible for a place at more than one school, or
- (c) an applicant is not eligible for a place at any school that the parent has nominated.

The LA will allocate places in accordance with the provisions set out in paragraph 18 of this Schedule.

**12.** Completed application forms are to be returned to the LA by the due date.

**13.** Completed application forms that are received after the closing date will be considered on an individual basis, but the procedure must not prevent the proper processing under the Scheme of application forms received on time.

**14.** The LA will process all application forms. Any completed application forms must be treated as a confidential communication between the parent and the LA. All applications received by the closing date will be considered before any applications received after this closing date unless exceptional circumstances apply.

**15.** **By 30 November 2012** the LA will notify the admission authority for each of the schools of every nomination that has been made for that school, including all relevant details and any supplementary information received by this date which schools require in order to apply their oversubscription criteria. Where parents have nominated a school outside the LA area, the LA will also similarly notify the relevant authority/authorities by **23 November 2012**.

**16.** **By 18 January 2013** the admission authority for each school will consider all applications for their school and apply the school's oversubscription criteria (if appropriate) and provide the LA with a list of all potential applicants sorted (if appropriate) according to the school's oversubscription criteria.

**17.** **By 25 January 2013** the admission authority for neighbouring LAs schools will provide a list of potential applicants and waiting lists (if appropriate).

**18.** **By 4 February 2013** the LA will match these lists against the ranked lists of the other schools nominated and:

- Where the child is eligible for a place at the parents' first nominated school, that school will be allocated to the child.
- Where the child is not eligible for a place at the parental first nominated school, they will be allocated a place at the school, which is the next highest ranked nominated school where the child is eligible for a place.

- The LA will allocate a school place to those pupils who have not submitted an AF, after all other pupils who submitted an AF have been considered. The LA will allocate a place at the nearest appropriate school with a vacancy, as measured by the shortest safest walking route from the parental home residence to the main entrance(s) of the school.

Where the child is not eligible for a place at any of the nominated schools, the child will be allocated a place at the nearest appropriate school with a vacancy, as measured by the shortest safest walking route from parental home residence to the main entrance(s) of the school.

**19. 11 February 2013** -The LA informs its secondary schools of the pupils to be offered places at their schools, and informs other LAs of places in Sunderland schools to be offered to their residents.

**20. On 1 March 2013** parents will be notified that they are being offered a place at the allocated school. This letter will give the following information:

- The name of the school at which a place is offered;
- The reasons why the child is not being offered a place at any of the other higher ranked schools nominated on the AF;
- Information about their statutory right of appeal against the decisions to refuse places at the other nominated schools;
- Explain that the child will be considered for any places that might become available in schools they ranked higher than the school they are offered, in the re- allocation process after 5 April 2013.
- Contact details for the schools (in the case of nominated VA schools and academies where they were not offered a place) and all relevant LAs, so that they can lodge an appeal.

The letter will not inform parents of places still available at other schools.

**21. 22 March 2013:** the deadline for parents to accept the place offered. If they do not respond by this date it will be assumed that they have accepted the place, however the LA will continue to pursue parents for written confirmation of acceptance for oversubscribed schools.

## Re-allocation Lists (Waiting lists)

**22.** Children will be considered under the reallocation process for any places if they become available, after 1 March 2013 but before 5 April 2013, at any school they have ranked higher on their AF than the school they were offered. For example where a parent has originally been allocated a place at their second preference school, they may be considered for their first preference but not their third and so on. Where a parent has been offered a place at a school, which they did not nominate on their AF, they may be considered for all the schools they did nominate on their AF.

Where a parent receives a place at their highest ranked school, they will not normally be considered for re-allocation, nor will they be offered a place at any other school simply because it has places available.

Where there are more applicants than places available, then the priorities used within the school's admission criteria will be applied to all applicants according to ranking.

**23. 5 April 2013:** The LA re-allocates any places that may have become vacant since 1 March and in accordance with the school admission criteria, which will include the following:

- those who have not been offered any school place, for example, late applications from parents who have just moved into the area and have not been offered a school place;
- those who have subsequently expressed a preference for a new school not originally expressed on the AF, which will be ranked lower than any other previous preferences ranked on the AF.

## PART II - LATE APPLICATIONS

**24.** The closing date for applications in the normal admissions round is **31 October 2012**. As far as is reasonably practicable applications for places in the normal admissions round that are received late *for a good reason* will be accepted provided they are received **before 18 January 2013**, the date the allocation procedures begin. Examples of what will be considered as good reason include: when a lone parent has been ill for some time, or has been dealing with the death of a close relative; a family has just moved into the area or is returning from abroad (proof of ownership or tenancy of a Sunderland property will be required in these cases). Other circumstances will be considered and each case decided on its own merits.

### LATE APPLICATIONS RECEIVED AFTER 18 JANUARY 2013

**25.** Applications received after 18 January 2013 (which are not deemed as exceptional) will be considered as late and will not be processed until after 1 March 2013. Parents will, nevertheless, receive an offer of a school place on 1 March 2013 in accordance with the terms of the scheme.



## **NO AF RECEIVED BY 1 MARCH 2013**

**26.** Where no AF is submitted the child will, on 1 March 2013, be offered a place at the nearest appropriate school with a vacancy as measured by the shortest safest walking route from the parental home residence to the main entrance(s) of the school. The LA will be aware which parents this applies to as a result of liaison with junior and primary schools.

## **APPLICATIONS RECEIVED AFTER 1 MARCH 2013 BUT BEFORE 5 APRIL 2013**

**27.** Applications made direct to any school on the AF must be forwarded to the LA immediately. Where only the supplementary form is received the school must inform the LA immediately so it can verify whether an AF has been received from the parent and, if not, contact the parent and ask them to complete an AF. The LA will enter the details onto its central database and, after consultation with the relevant admission authority, offer a place at the school highest in the parent's order of preference that has a vacancy or if this is not possible, at the nearest appropriate school with a vacancy.

## **APPLICATIONS RECEIVED AFTER 5 APRIL 2013**

**28.** Applications received after 5 April 2013, and for places in year groups other than the normal year of entry to secondary school, will be treated as casual admissions. These applications should be made on the AF and sent to the LA, which maintains the school, which will

- determine any application for a community or controlled school for which it is the admission authority; and
- if the application is for a voluntary aided school or academy refer the application to the governing body of the school, which will make a determination and notify both the parent and the LA. Parents who are refused admission must be offered a right of appeal.

**29.** If any parents approach voluntary aided schools or academies directly about a casual admission, the governing body must ensure that the parent completes an AF (if they have not already done so). The AF should be sent to the maintaining LA as soon as practically possible, along with the governing body's decision on the application. The governing body will notify the LA of its decision in advance of notifying the parents and, if the parent is refused a place, the right of appeal must be offered.

**30.** The LA will keep track of any pupils who apply for casual admissions, and intervene as appropriate to ensure that they are placed in a school without undue delay, particularly in respect of looked after children.

## **WAITING LISTS FOR NORMAL YEAR OF ENTRY**

**31.** Waiting lists will be kept until **20 December 2013**.

## **SCHEDULE 2**

### **Timetable of co-ordinated scheme**

**31 October 2012:** Application forms, together with any supplementary forms (as required) to be returned to the LA.

**23 November 2012:** Details of applications to be sent to other LAs.

**30 November 2012:** Details of applications to be sent to VA schools and academies.

**18 January 2013:** VA schools and academies provide the LA with lists of potential applicants.

**4 February 2013:** The LA will match the ranked lists of all the schools and allocate places in accordance with paragraph 18 of Schedule 1.

**11 February 2013:** By this date the LA will notify schools, which parents have been offered places at their schools, and other LAs will be notified of places in Sunderland schools that will be offered to their residents.

**1 March 2013:** Notifications sent to parents.

**22 March 2013:** Last date for offers to be accepted by parents.

**5 April 2013:** Any places that have become available are allocated to parents in priority order in accordance with paragraph 23 of Schedule 1.

## **Appendix 1A**

### **CO-ORDINATED ADMISSIONS SCHEME – SECONDARY SCHOOLS**

**Admission Authorities in the Area of Sunderland to which the Scheme applies**

**The Scheme applies to the Governing Body as the Admissions Authority for the following Voluntary Aided Schools:**

St Aidan's RC School	Willow Bank Road Sunderland SR2 7HJ
St Anthony's RC School	Thornhill Terrace Sunderland SR2 7JN
St Robert of Newminster RC School	Biddick Lane Washington NE38 8AF
The Venerable Bede CE School	Tunstall Bank Sunderland SR2 0SX

**The Scheme applies to the Governing Body as the Admission Authority for the following Academies:**

Academy 360	Portsmouth Road Sunderland SR4 9BA
Castle View Enterprise Academy	Cartwright Road Sunderland SR5 3DX
Houghton Kepier Sports College	Dairy Lane Houghton-le-Spring DH4 5BH
Red House Academy	Rutherglen Road Sunderland SR5 5LN

**Community Schools where the LA is the Admission Authority:**

Biddick Sports College	Biddick Lane Washington NE38 8AL
Farrington Sports College	Allendale Road Sunderland SR3 3EL
Hetton School	North Road Hetton-le-Hole DH5 9JZ
Monkwearmouth School	Torver Crescent Sunderland SR6 8LQ

Oxclose School	Dilston Close Washington NE38 0LN
Sandhill View School	Grindon Lane Sunderland SR3 4EN
Southmoor School	Ryhope Road Sunderland SR2 7TF
Thornhill School	Thornholme Road Sunderland SR2 7NA
Washington School	Spout Lane Washington NE37 2AA

## **Co-ordinated Admissions Scheme for infant, junior & primary schools in the area of Sunderland Local Authority**

### **Introduction**

**1. This scheme is made by Sunderland City Council under the Education (Co-ordination of Admission Arrangements) (Primary) (England) Regulations 2002 and applies to all Infant, Junior & Primary Schools in Sunderland.**

**The proposed Co-ordinated Admission scheme for Sunderland LA is set out below and complies with the changes introduced in the new School Admissions Code, which reflects new legislation laid out in the Education and Inspections Bill 2006.**

**A separate scheme exists in relation to secondary schools.**

### **Interpretation**

#### **2. In this Scheme -**

"the LA" means Sunderland City Council acting in their capacity as local authority;

"the LA area" means the area in respect of which the LA is the local authority;

"primary education" has the same meaning as in section 2(1) of the Education Act 1996;

"infant, junior & primary school" has the same meaning as in section 5(1) of the Education Act 1996;

"secondary school" has the same meaning as in section 5(2) of the Education Act 1996;

"school" means a community or voluntary school (but not a special school), which is maintained by the LA;

"voluntary controlled schools" means such of the schools as are voluntary controlled schools, where the LA sets the admissions criteria and offers places;

"VA schools" means such of the schools as are voluntary-aided schools;

"Academy" means such of the schools as have academy status:

"admission authority" in relation to a community or voluntary controlled school means the LA and, in relation to a VA school means the governing body of that school;

"the specified year" means the school year beginning at or about the beginning of September 2013;

"admission arrangements" means the arrangements for a particular school or schools which govern the procedures and decision making for the purposes of admitting pupils to the school;

"parent/carer" means any person who holds parental responsibility as defined under the 1989 Children Act and with whom the child normally resides;

"casual admission" means any application for a place in the first year of primary education that is received after 10 May 2013, including those received during the academic year commencing in September 2013, and applications for a place in any other year group received at any time from the commencement of the Scheme; and

"eligible for a place" means that a child has been placed on a school's ranked list at such a point which falls within the school's published admission number.

### **3. Commencement and extent**

This scheme applies in relation to the admission arrangements for the schools for admission year 2013-2014 (the specified year).

The LA will include in its admission arrangements for the specified year the provisions set out in Schedule 1 to this scheme, or provisions having the same effect.

The governing body of each of the VA schools and Academy will include in its admission arrangements for the specified year the provisions set out in the Schedule, so far as relevant to that school, or provisions having the same effect.

### **4. The Scheme**

The Scheme shall be determined in accordance with the provisions set out in Schedule 1 and processed in accordance with the timetable set out in Schedule 2.

The Scheme shall apply to every infant, junior & primary school in the LA area as identified in Appendix 1 (except special schools) and shall take effect from 16 April 2012.

## **SCHEDULE 1**

### **PART I - THE SCHEME**

1. There will be a standard form known as the Application form (AF).
2. The AF will be used for the purpose of admitting pupils into the first year of primary education and for those transferring from infant to junior or primary schools in the specified year. The AF will also be used for any applications made for a "casual admission" into any year group in the admissions round leading up to, and during, the academic year 2013/2014.
3. The AF must be used as a means of expressing up to 3 preferences for the purposes of section 86 of the School Standards and Framework Act 1998, by parents wishing to express a preference for their child to be admitted to a school within the LA area (including VA schools and Academies).
- 4. The AF will -**
  - a. allow the parent to express up to 3 preferences by completing the form, in rank order of preference,
  - b. invite parents to give their reasons for each preference,
  - c. specify the closing date and where the application form must be returned, in accordance with paragraph 10.
- 5. The LA will make appropriate arrangements to ensure:**
  - a. that the AF is available on request from the LA and on-line at **[www.sunderland.gov.uk](http://www.sunderland.gov.uk)** and
  - b. that the AF is accompanied by a written explanation of the co-ordinated admissions scheme.
- 6. The LA will take all reasonable steps to ensure that:**
  - a. every parent resident in the LA area who has a child eligible to commence primary education and those transferring from infant to junior or primary schools receives a copy of the AF (and a written explanation); and
  - b. every parent whose application falls within the category of a casual admission receives a copy of the AF (and written explanation), on request, and understands the process.

Parents will be advised that they will receive no more than one offer of a school place and that:

- a place will be offered at the highest ranking nominated school for which they are eligible for a place under the admission criteria; and
- explain that, if more than one school is nominated and no order of ranking is stated, or a wish expressed that they be ranked equally, the parent will be regarded as having ranked the schools in the order appearing on the form (the first-mentioned being ranked the highest); and
- if a place cannot be offered at a nominated school, a place will be offered at an alternative school.

7. All preferences expressed on the AF are valid applications. The governing body of a VA school or the Trust Board/Governing Body of an Academy can require parents who wish to nominate, or have nominated, their school on the AF, to provide additional information on a supplementary form only where the additional information is required for the governing body to apply their oversubscription criteria to the application. Where a supplementary form is required it must be returned to the LA, along with the AF, so that the relevant forms can be passed to the VA school/s and Academy.

8. Where a school receives a supplementary form it will not be regarded as a valid application unless the parent has also completed an AF and the school is nominated on it. Where supplementary forms are received directly by VA schools and Academies the school must inform the LA immediately so it can verify whether an AF has been received from the parent and, if not, the LA will contact the parent and ask them to complete an AF. Under the requirements of the scheme, parents will not be under any obligation to complete an individual school's supplementary form where this is not strictly required for the VA governing body or Academy Trust Board to apply their oversubscription criteria.

9. Any school which operates criteria for selection by ability or aptitude must ensure that its arrangements for assessing ability or aptitude, to enable decisions to be made on nominations, conform with the timing requirements of the scheme as set out in Schedule 2. (NB no Community, Voluntary Controlled or Voluntary Aided School or Academy in Sunderland operates criteria for selection-based ability or aptitude).

### **Processing of AFs**

10. Completed AFs are to be returned to the LA by **Tuesday 15 January 2013**. It will be the responsibility of parents to ensure that AFs are returned directly or via nursery, infant or primary schools to the LA, in a paper format or on-line by the closing date. **(The LA will acknowledge receipt of all AFs).**



## **Determining offers in response to the AF**

**11.** The LA will act as a clearing house for the allocation of places by the relevant admission authorities in response to the AFs. The LA will only make any decision with respect to the offer or refusal of a place in response to any preference expressed on the AF where-

- (a) it is acting in its separate capacity as an admission authority, or
- (b) an applicant is eligible for a place at more than one school and is allocated a place at the highest ranked school, or
- (c) an applicant is not eligible for a place at any school that the parent has nominated.

The LA will allocate places in accordance with the provisions set out in paragraph 17 of this Schedule.

**12.** Completed application forms are to be returned to the LA by the due date.

**13.** Completed application forms that are received after the closing date will be considered on an individual basis, but the procedure must not prevent the proper processing under the Scheme of application forms received on time.

**14.** The LA will process all application forms. Any completed application forms must be treated as a confidential communication between the parent and the LA. All applications received by the closing date will be considered before any applications received after this closing date unless exceptional circumstances apply.

**15.** **By 8 February 2013** the LA will notify the admission authority for each of the schools and academy of every nomination that has been made for that school, including all relevant details and any supplementary information received by this date which schools require in order to apply their oversubscription criteria.

**16.** **By 13 March 2013** the admission authority for each school and academy will consider all applications for their school and apply the school's oversubscription criteria (if appropriate) and provide the LA with a list of all potential applicants sorted (if appropriate) according to the school's oversubscription criteria.

**17.** **By 22 March 2013** the LA will match these lists against the ranked lists of the other schools nominated and:

- Where the child is eligible for a place at the parents' first nominated school, that school will be allocated to the child.

- Where the child is not eligible for a place at the parental first nominated school, they will be allocated a place at the school, which is the next highest ranked nominated school where the child is eligible for a place.
- The LA will allocate a school place to those pupils who have not submitted an AF, after all other pupils who submitted an AF have been considered. The LA will allocate a place at the nearest appropriate school with a vacancy, as measured by the shortest safest walking route from the parental home residence to the main entrance(s) of the school.

Where the child is not eligible for a place at any of the nominated schools, the child will be allocated a place at the nearest appropriate school with a vacancy, as measured by the shortest safest walking route from parental home residence to the main entrance(s) of the school.

**18. 22 March 2013** -The LA informs its infant, junior & primary schools of the pupils to be offered places at their schools.

**19. On 16 April 2013** parents will be notified that they are being offered a place at the allocated school. This letter will give the following information:

- The name of the school at which a place is offered;
- The reasons why the child is not being offered a place at any of the other higher ranked schools nominated on the AF;
- Information about their statutory right of appeal against the decisions to refuse places at the other nominated schools;
- Explain that the child will be considered for any places that might become available in schools they ranked higher than the school they are offered, in the re- allocation process after 10 May 2013.
- Contact details for the schools (in the case of nominated VA schools where they were not offered a place), so that they can lodge an appeal.

The letter will not inform parents of places still available at other schools.

**20. 3 May 2013:** the deadline for parents to accept the place offered. If they do not respond by this date it will be assumed that they have accepted the place, however the LA will continue to pursue parents for written confirmation of acceptance for oversubscribed schools.

## **Re-allocation Lists (Waiting lists) 10 May 2013**

**21.** Children will be considered under the re-allocation process for any places if they become available after **16 April 2013** at any school they have ranked higher on their AF than the school they were offered. Where a parent has been allocated a place at their second preference school, they may be placed on the re-allocation list of their first preference but not their third and so on. Where a parent has been offered a place at a school, which they did not nominate on their AF, they may be placed on the list of all the schools they did nominate on their AF.

Where a parent receives a place at their highest ranked school, they will not normally be considered for re-allocation, nor will they be offered a place at any other school simply because it has places available.

Where there are more applicants than places available, then the priorities used within the school's admission criteria will be applied to all applicants according to ranking.

**22. 10 May 2013:** The LA re-allocates any places that may have become vacant since 15 April and in accordance with the school admission criteria which will include following:

- those who have not been offered any school place, for example, late applications from parents who have just moved into the area and have not been offered a school place; and
- those who have subsequently expressed a preference for a new school not originally expressed on the AF which will be ranked lower than any other previous preferences ranked on the AF.

## **PART II - LATE APPLICATIONS**

**23.** The closing date for applications in the normal admissions round is **15 January 2013**. As far as is reasonably practicable applications for places in the normal admissions round that are received late 'for a good reason' will be accepted provided they are received **before 7 March 2013**, the date the allocation procedures begin. Examples of what will be considered as good reason include: when a lone parent has been ill for some time, or has been dealing with the death of a close relative; a family has just moved into the area or is returning from abroad (proof of ownership or tenancy of a Sunderland property will be required in these cases). Other circumstances will be considered and each case decided on its own merits.

## **LATE APPLICATIONS RECEIVED AFTER 7 MARCH 2013**

**24.** Applications received after **7 March 2013**, which are not deemed as exceptional will be considered as late and will not be processed until after **16 April 2013**. Parents will, nevertheless, receive an offer of a school place on **16 April 2013** in accordance with the terms of the scheme.

## **NO AF RECEIVED BY 16 APRIL 2013**

**25.** Where no AF is submitted the child will, on **16 April 2013**, be offered a place at the nearest appropriate school with a vacancy as measured by the shortest safest walking route from the parental home residence to the main entrance(s) of the school. The LA will be aware of which parents this applies to as a result of liaison with nursery, infant & primary schools.

## **APPLICATIONS RECEIVED AFTER 16 APRIL 2013 BUT BEFORE 10 MAY 2013**

**26.** Applications made direct to any school on the AF must be forwarded to the LA immediately. Where only the supplementary form is received the school must inform the LA immediately so it can verify whether an AF has been received from the parent and, if not, contact the parent and ask them to complete an AF. The LA will enter the details onto its central database and, after consultation with the relevant admission authority, offer a place at the school highest in the parent's order of preference that has a vacancy or if this is not possible, at the nearest appropriate school with a vacancy (as defined in paragraph 17).

## **APPLICATIONS RECEIVED AFTER 10 MAY 2013**

**27.** Applications received after 10 May 2013, and for places in year groups other than the normal year of entry to infant, junior & primary schools will be treated as casual admissions. These applications should be made on the AF and sent to the LA, which will

- determine any application for a community or controlled school for which it is the admission authority; and
- if the application is for a voluntary aided school or academy refer the application to the governing body of the school, which will make a determination and notify the LA in advance of their notification to the parent. Parents who are refused admission must be offered a right of appeal.

**28.** If any parents approach voluntary aided schools or academies directly about a casual admission, the governing body must ensure that the parent completes an AF (if they have not already done so). The AF should be sent to the maintaining LA as soon as practically possible, along with the governing body's decision on the application. The governing body will notify the LA of its decision in advance of notifying the parent and, if the parent is refused a place, the right of appeal must be offered.

**29.** The LA will keep track of any pupils who apply for casual admissions, and intervene as appropriate to ensure that they are placed in a school without undue delay, particularly in respect of looked after children.

**Waiting lists for normal year of entry**

**30.** Waiting lists for schools should be kept until **20 December 2013**.

## **SCHEDULE 2**

### **Timetable of co-ordinated scheme**

<b>15 January 2013:</b>	Application forms, together with any supplementary forms (as required) to be returned to the LA.
<b>8 February 2013:</b>	Details of applications to be sent to VA schools and Academies.
<b>8 March 2013:</b>	VA schools and Academies provide the LA with lists of potential applicants.
<b>22 March 2013:</b>	The LA will match the ranked lists of all the schools and allocate places in accordance with paragraph 17 of Schedule 1.
<b>22 March 2013:</b>	By this date the LA will notify schools which parents have been offered places at their schools.
<b>16 April 2013:</b>	Notifications sent to parents.
<b>3 May 2013:</b>	Last date for offers to be accepted by parents.
<b>10 May 2013:</b>	Any places that have become available are allocated to parents in priority order in accordance with paragraph 22 of Schedule 1.

## **Appendix 1A**

### **CO-ORDINATED ADMISSIONS SCHEME – INFANT, JUNIOR & PRIMARY SCHOOLS**

**Admission Authorities in the Area of Sunderland to which the Scheme applies**

**The Scheme applies to the Governing Body as the Admissions Authority for the following Academy:**

Academy 360	Portsmouth Road Sunderland SR4 9BA
Benedict Biscop CE Primary School	Marcross Drive Sunderland SR3 2RE
Bexhill and Town End Academy	Bexhill Road Sunderland SR5 4PJ
	Borodin Avenue Sunderland SR5 4NX
Redby Primary Academy	Fulwell Road Sunderland SR6 9QP

**The Scheme applies to the Governing Body as the Admissions Authority for the following Voluntary Aided Schools:**

Bishop Harland CE Primary School	Ramillies Road Sunderland SR5 5JA
English Martyrs RC Primary School	Redcar Road Sunderland SR5 5AU
Our Lady Queen of Peace RC Primary School	Station Road, Penshaw Houghton-le-Spring DH4 7JZ
St Anne's RC Primary School	Hylton Road Sunderland SR4 9AA
St Bede's RC Primary School	Hampshire Place Washington NE37 2NP
St Benet's RC Primary School	Fulwell Road Sunderland SR6 9QU
St Cuthbert's RC Primary School	Grindon Lane

	Sunderland SR4 8HP
St John Bosco RC Primary School	Bradford Avenue Sunderland SR5 4JW
St John Boste RC Primary School	Castle Road Washington NE38 0HL
St Joseph's RC Primary School	Rutland Street Sunderland SR4 6HY
St Joseph's RC Primary School Washington	Village Lane Washington NE38 7HU
St Leonard's RC Primary School	Tunstall Village Road Sunderland SR3 2BB
St Mary's RC Primary School	Meadowside Sunderland SR2 7QN
St Michael's RC Primary School	Durham Road Houghton-le-Spring DH5 8NF
St Patrick's RC Primary School	Smith Street Sunderland SR2 0RQ

**Community and Voluntary Controlled Schools where the LA is the Admission Authority:**

Albany Village Primary School	Albany Village Washington NE37 1UA
Barmston Village Primary School	Barmston Centre Washington NE38 8JA
Barnes Infant School	Mount Road Sunderland SR4 7QF
Barnes Junior School	Mount Road Sunderland SR4 7QF
Barnwell Primary School	Whitefield Estate Houghton-le-Spring DH4 7RT
Bernard Gilpin Primary School	Hall Lane Houghton-le-Spring DH5 8DA
Biddick Primary School	Kirkham Washington NE38 7HQ



Blackfell Primary School	Knoulberry Washington NE37 1HA
Broadway Junior School	Springwell Road Sunderland SR4 8NW
Burnside Primary School	Burnside Estate Houghton-le-Spring DH4 5HB
Castletown Primary School	Grange Road Sunderland SR5 2QB
Dame Dorothy Primary School	Dock Street Sunderland SR6 0EA
Diamond Hall Infant School	Well Street Sunderland SR4 6JF
Diamond Hall Junior School	Well Street Sunderland SR4 6JF
Dubmire Primary School	Brittannia Terrace Houghton-le-Spring DH4 6HL
Easington Lane Primary School	High Street Easington Lane DH5 OJT
East Herrington Primary School	Balmoral Terrace Sunderland SR3 3PR
East Rainton Primary School	School Road Houghton-le-Spring DH5 9RA
Eppleton Primary School	Church Road Hetton-le-Hole DH5 9AJ
Farringdon Primary School	Archer Road Sunderland SR3 3DJ
Fatfield Primary School	Southcroft Washington NE38 8RB
Fulwell Infant School	Ebdon Lane Sunderland SR6 8ED
Fulwell Junior School	Sea Road Sunderland SR6 9EE
George Washington Primary School	Wellbank Road Washington NE37 1NL

Gillas Lane Primary School	Seaton Avenue Houghton-le-Spring DH5 8EH
Grange Park Primary School	Swan Street Sunderland SR5 1EA
Grangetown Primary School	Spelterworks Road Sunderland SR2 8PX
Grindon Infant School	Gleneagles Road Sunderland SR4 9QN
Hasting Hill Primary School	Tilbury Road Sunderland SR3 4LY
Hetton Lyons Primary School	Four Lane Ends Hetton-le-Hole DH5 0AH
Hetton Primary School	Moorsley Road Hetton-le-Hole DH5 9ND
Highfield Primary School	Fordfield Road Sunderland SR4 0DA
Hill View Infant School	Helvellyn Road Sunderland SR2 9JJ
Hill View Junior School	Queen Alexandra Road Sunderland SR2 9HE
Holley Park Primary School	Ayton Road South Washington NE38 0LR
Hudson Road Primary School	Villiers Street South Sunderland SR1 2AH
Hylton Castle Primary School	Cramlington Road Sunderland SR5 3QL
Hylton Red House Primary School	Rotherham Road Sunderland SR5 5QL
John F Kennedy Primary School	Station Road Washington NE38 7AR
Lambton Primary School	Lambton Village Washington NE38 0PL

Mill Hill Primary School	Doxford Park Sunderland SR3 2LE
New Penshaw Primary School	Langdale Road Houghton-le-Spring DH4 7HY
New Silksworth Infant School	Blind Lane Sunderland SR3 1AS
New Silksworth Junior School	Blind Lane Sunderland SR3 1AS
Newbottle Primary School	Houghton Road Houghton-le-Spring DH4 4EE
Oxclose Village Primary School	Brancepeth Road Washington NE38 0LA
Plains Farm Primary School	Tudor Grove Sunderland SR3 1SU
Richard Avenue Primary School	Richard Avenue Sunderland SR4 7LQ
Rickleton Primary School	Vigo Lane Washington NE38 9EZ
Ryhope Infant School	Shaftesbury Avenue Sunderland SR2 0RT
Ryhope Junior School	Shaftesbury Avenue Sunderland SR2 0RT
Seaburn Dene Primary School	Torver Crescent Sunderland SR6 8LG
Shiney Row Primary School	Rear South View Houghton-le-Spring DH4 4QP
South Hylton Primary School	Union Street Sunderland SR4 0LS
Southwick Primary School	Shakespeare Street Sunderland SR5 2JX
Springwell Village Primary School	Westfield Crescent Gateshead NE9 7RX
St Paul's CE Controlled Primary School	Waterworks Road Sunderland SR2 0LW

Thorney Close Primary School	Torquay Road Sunderland SR3 4BB
Usworth Colliery Primary School	Manor Close Washington NE37 3BL
Usworth Grange Primary School	Marlborough Road Washington NE37 3BG
Valley Road Primary School	Corporation Road Sunderland SR2 8PL
Wessington Primary School	Lanercost Washington NE38 7PY
Willow Fields Community Primary School	Winslow Close Sunderland SR5 5RZ

## APPENDIX 2

### ADMISSION CRITERIA FOR COMMUNITY SECONDARY SCHOOLS – 2013/14

1. **‘Looked-after’ child** – a child that is looked-after’ by a Local Authority in accordance with Section 22 of the Children’s Act 1989 (b) and a child who were looked after, but ceased to be so, because of adoption (or become subject to a residence order or special guardianship order).
2. **Attendance in Key Stage 2 (age 7-10+) at a designated cluster junior or primary school**
3. **A sibling link** - an older brother/sister or older child (including adoptive or step-children) that shares the same parent/carer and lives at the same address, who will still be attending the preferred school at the time of admission.
4. **Exceptional medical or psychological reasons** (you must include a medical or psychological report, prepared by a professional, to confirm information that you include in this section. This report should explain why only this school can meet your child’s medical or psychological needs. Common childhood medical conditions such as asthma or giving a child’s or giving a child’s nervousness at starting new school as a psychological reason for choosing a particular school are unlikely to be accepted as exceptional). If you intend to use this criterion when expressing a preference, please contact the School Admissions Team before completing the application form. (Eligibility under this category will be considered by a meeting of Senior LA Officers).
5. **Pupils for whom preferences are expressed on grounds other than those outlined above.**

## NOTES

Within each of the above, places will be offered on the basis of distance from the centre of the home address to the main entrance of the school with priority being given to those living closest to the school. Distance is measured by the shortest safest walking distance, using a geographical information system (GIS).

Where a pupil has a statement of special education need naming a school, a place will be offered at that school (subject to confirmation by the SEN Unit).

At the first stage of allocations there will be no distinction between 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> etc. preference applications. Therefore all applications will be considered equally against the admission criteria. If a pupil then qualifies for a place at more than school, the parent's highest ranked preference will be offered and any lower ranking offers will be disregarded.

In determining allocations, priority will be given to those applications where the parental preference is received by the published deadline date.

**Where parents have twins, triplets or children from other multiple births and there are not sufficient places for all of the children, the parent will be notified in writing. The decision will then lie with the parent as to whether they take up the school place. However, where parents do not take up the school place, the place will be offered to the next child on the waiting list where appropriate.**

**Parents who are refused a place have a statutory right of appeal. Further details of the appeals process will be included with the notification letter but are also available from the School Admissions Team.**

## **ADMISSION CRITERIA FOR COMMUNITY AND CONTROLLED INFANT/JUNIOR/PRIMARY SCHOOLS – 2013/14**

1. **‘Looked-after’ child** – a child that is ‘looked-after’ by a Local Authority in accordance with Section 22 of the Children’s Act 1989 (b) and a child who were looked after, but ceased to be so, because of adoption (or become subject to a residence order or special guardianship order).
2. Attendance in Key Stage 1 (age 5 – 7) at the named feeder infant school  
**(This applies to Infant – Junior transfers only)**
3. **A sibling link** - an older brother/sister or older child (including adoptive and step-children) that shares the same parent/carers and lives at the same address, who will still be attending the preferred school at the time of admission.
4. **Exceptional medical or psychological reasons** (you must include a medical or psychological report, prepared by a professional, to confirm information that you include in this section. This report should explain why only this school can meet your child’s medical or psychological needs. Common childhood medical conditions such as asthma or giving a child’s or giving a child’s nervousness at starting new school as a psychological reason for choosing a particular school are unlikely to be accepted as exceptional). If you intend to use this criterion when expressing a preference, please contact the School Admissions Team before completing the application form. (Eligibility under this category will be considered by a meeting of Senior LA Officers).
5. Pupils for whom preferences are expressed on grounds other than those outlined above.

Within each of the above, places will be offered on the basis of distance from the centre of the home address to the main entrance of the school with priority being given to those living closest to the school. Distance is measured by the shortest safest walking distance, using a geographical information system (GIS).

### **NOTES**

Where a pupil has a statement of special education need naming a school, a place will be offered at that school (subject to confirmation by the SEN Unit).

At the first stage of allocations there will be no distinction between 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> etc. preference applications. Therefore all applications will be considered equally against the admission criteria. If a pupil then qualifies for a place at more than school, the parent’s highest ranked preference will be offered and any lower ranking offers will be disregarded.

In determining allocations, priority will be given to those applications where the parental preference is received by the published deadline date.

**Infant classes can exceed the statutory limit where it is not possible to offer places to twins or those from a multiple birth, without exceeding the PAN, or for children of armed forces personnel. These children would be admitted as an exception to the Infant Class Size Regulations and would continue to be treated as exceptions for the duration of Key Stage 1.**

**Parents who are refused a place have a statutory right of appeal. Further details of the appeals process will be included with the notification letter but are also available from the School Admissions Team.**



## APPENDIX 3

### Primary PANs for September 2013

School	Agreed PAN 2012	Proposed PAN 2013
Academy 360	45	60
Albany Village Primary	30	30
Barmston Village Primary	30	30
Barnes Junior	90	90
Barnes Infant	90	90
Barnwell Primary	30	30
Benedict Biscop CE Primary	30	30
Bernard Gilpin Primary	50	50
Bexhill Primary	45	45
Biddick Primary	30	30
Bishop Harland CE Primary	30	30
Blackfell Primary	30	30
Broadway Junior	60	60
Burnside Primary	30	30
Castletown Primary	50	50
Dame Dorothy Primary	30	30
Diamond Hall Junior	90	90
Diamond Hall Infant	90	90
Dubmire Primary	60	60
Easington Lane Primary	30	30
East Herrington Primary	60	60
East Rainton Primary	20	20
English Martyrs RC Primary	30	30
Eppleton Primary	30	30
Farringdon Primary	55	60
Fatfield Primary	30	30
Fulwell Junior	90	90
Fulwell Infant	90	90
George Washington Primary	60	60
Gillas Lane Primary	30	30
Grange Park Primary	30	30
Grangetown Primary	40	40
Grindon Infant	60	60
Hasting Hill Primary	50	50
Hetton Primary	20	20
Hetton Lyons Primary	60	60
Highfield Primary	45	60
Hill View Junior	106	106
Hill View Infant	106	106
Holley Park Primary	30	30
Hudson Road Primary	40	40
Hylton Castle Primary	30	30
Hylton Red House Primary	60	60

John F Kennedy Primary	60	60
Lambton Primary	30	30
Mill Hill Primary	60	60
Newbottle Primary	60	60
New Penshaw Primary	30	30
New Silksworth Junior	70	70
New Silksworth Infant	70	70
Our Lady Queen of Peace RC Primary	30	30
Oxclose Village Primary	30	30
Plains Farm Primary	30	30
Redby Primary	60	60
Richard Avenue Primary	60	60
Rickleton Primary	60	60
Ryhope Junior	60	60
Ryhope Infant	60	60
Seaburn Dene Primary	30	30
Shiney Row Primary	45	45
South Hylton Primary	30	30
Southwick Primary	45	45
Springwell Village Primary	30	30
St Anne's RC Primary	30	30
St Bede's RC Primary	30	30
St Benet's RC Primary	45	45
St Cuthbert's RC Primary	30	30
St John Bosco RC Primary	26	26
St John Boste RC Primary	25	25
St Joseph's RC Pry Sunderland	30	30
St Joseph's RC Pry Washington	30	30
St Leonard's RC Pry	30	30
St Mary's RC Primary	60	60
St Michael's RC Primary	30	30
St Patrick's RC Primary	25	25
St Paul's CE Controlled Primary	30	30
Thorney Close Primary	40	40
Town End Primary	30	30
Usworth Colliery Primary	60	60
Usworth Grange Primary	30	30
Valley Road Primary	60	60
Wessington Primary	30	30
Willow Fields Community Primary	20	20
<b>TOTAL</b>	<b>3,783</b>	<b>3,818</b>

### Secondary PANs for September 2013

School	Agreed PAN 2012	Proposed PAN 2013
Academy 360	165	165
Biddick	210	210
Castle View Enterprise Academy	180	180
Farringdon	180	180
Hetton	180	180
Houghton Kepier	210	250
Monkwearmouth	210	210
Oxclose	210	210
Red House Academy	120	120
Sandhill View	180	180
Southmoor	210	210
St Aidan's RC	180	180
St Anthony's RC	210	210
St Robert's RC	210	210
Thornhill	210	210
Venerable Bede CE	180	180
Washington	210	210
<b>TOTAL</b>	<b>3,255</b>	<b>3,295</b>



**CABINET MEETING – 14 MARCH 2012**

**EXECUTIVE SUMMARY SHEET -**

**Title of Report :**

MUSEUMS SERVICES IN SUNDERLAND

**Author(s):**

Executive Director of City Services

**Purpose of Report:**

The purpose of this report is to seek approval from Cabinet to withdraw from existing arrangements relating to the delivery of Museums Services in Sunderland.

**Description of Decision:**

Cabinet is recommended to:

- i) Authorise the issuing of the required 12 months notice to withdraw from the existing Tyne & Wear Joint Museum Agreement, and
- ii) Agree that the Executive Director of City Services, in consultation with the Portfolio Holder for Safer City & Culture, renegotiate appropriate arrangements for the delivery of Museum Services in Sunderland.

**Is the decision consistent with the Budget/Policy Framework?**

**Yes**

**If not, Council approval is required to change the Budget/Policy Framework**

**Suggested reason(s) for Decision:**

Museums will be tailored to meet customer expectations and aspirations with services enhanced, not compromised. The City Council will maximise opportunities for securing high profile exhibitions, educational and learning programme and tailored events activity. The services provided will ensure museum services are safeguarded and designed to ensure they are accessible to all

**Alternative options to be considered and recommended to be rejected:**

The following options have also been considered and rejected:

- i) Do nothing

This option was rejected as it maintains the existing arrangement which is not considered to provide the most efficient and effective museums service for Sunderland.

ii) Operate all aspects of the museums service:

This option would require the transfer of all aspects of the Museums Service to Sunderland. It is not considered to be cost effective nor would it enhance service delivery arrangements. Delivering some aspects of Museum Services through TWAM provides opportunities in terms of partnership working/membership with National Bodies, and funding opportunities on a local/regional and national level all of which is considered could continue to be delivered through a renegotiated arrangement. Whilst at an operational level there is confidence that efficiencies can be realised and service delivery improved, the provision of more specialist functions such as archaeological expertise currently shared with other Authorities would result in much higher costs.

**Is this a "Key Decision" as defined in the Constitution?**  
**Yes**

**Is it included in the Forward Plan?**  
**Yes**

**Relevant Scrutiny Committee:**

Sustainable Communities

**REPORT OF EXECUTIVE DIRECTOR OF CITY SERVICES**

**MUSEUMS SERVICES IN SUNDERLAND**

**1 PURPOSE OF THE REPORT**

- 1.1 The purpose of this report is to seek approval from Cabinet to withdraw from existing arrangements relating to the delivery of Museums Services in Sunderland.

**2. DESCRIPTION OF DECISION**

- 2.1 Cabinet is recommended to:
- i) Authorise the issuing of the required 12 months notice to withdraw from the existing Tyne & Wear Joint Museum Agreement, and
  - ii) Agree that the Executive Director of City Services, in consultation with the Portfolio Holder for Safer City & Culture, renegotiate appropriate arrangements for the delivery of Museum Services in Sunderland.

**3. BACKGROUND**

- 3.1 A Joint Museums Service for the County of Tyne and Wear (known as Tyne and Wear Museums) is provided and administered by a Joint Agreement constituted by an Agreement made between the following Councils:
- Newcastle (Lead Authority)
  - Gateshead
  - North Tyneside
  - South Tyneside
  - Sunderland
- 3.2 Managed through City Services the Agreement came into effect on 1 April 1986 and is due to expire on 31 March 2016. Newcastle City Council is the lead authority and all staff associated with Museums are employed by Newcastle City Council.
- 3.3 Tyne and Wear Archives and Museums Joint Committee govern these arrangements. Sunderland has six representatives on the Committee including one of the two vice chair positions.
- 3.4 Under existing arrangements Tyne and Wear Archives and Museums (TWAM) provide:

- Corporate Support
- Museum Customer Focused Specialist Services – including technical and specialist expertise in areas such as Archaeology, Arts, Collection Management and Conservation
- Archives Services
- Operations – direct museum service delivery arrangements in Sunderland

#### **4.0 SERVICE LEVEL AGREEMENT**

- 4.1 The Agreement is underpinned by a Service Level Agreement which governs the operational running of Sunderland Museum and Winter Gardens and Monkwearmouth Station Museum together with the provision of customer focussed specialist services such as the delivery of history, art, documentation, collections, archaeologists, conservation and design and technical support. There is a separate agreement with TWAM in respect of the delivery of Archives Services and Washington F Pit Museum.
- 4.2 The agreement also includes the costs in relation to corporate support provision provided by TWAM through Newcastle City Council which includes HR, Financial, and Legal services. The total budget associated with the TWAM arrangement is £1.4m (nett of relevant grant funding).

#### **5.0 GRANT FUNDING**

- 5.1 One of the benefits associated with the Agreement includes the support provided via grant arrangements.

This includes the following:

- **DCMS** – grant paid to TWAM to deliver a regional wide museum service. The level of grant attributed to Sunderland in this current financial year is £317,100. The grant is in place until 2015 and currently offsets some of the costs associated with the agreement.
- **Renaissance Strategic Support Fund** – Major Grants Programme Grant. The Arts Council is now the lead body charged with developing the arts and culture in England and is working to create the conditions in which “great art and culture can be made, experienced and appreciated by everyone”. This Grant supports the delivery of specialist services provided by TWAM specifically designed for Sunderland. TWAM have recently announced that they have been successful in a Renaissance grant application to cover the period 2012 to 2015 inclusive.



## **6.0 REVIEW OF ARRANGEMENTS**

- 6.1 A review of the existing arrangements has afforded the opportunity to rethink how Museum Services are currently delivered within Sunderland and how the City Council can play a more centric role in designing museum delivery. Centred at the heart of the review is the opportunity to influence and tailor services to ensure customer focused services are at the very forefront of service delivery, providing people with choice over what and how they access and use Museum Services.
- 6.2 In order to enable the Council to directly influence the operational, programming, exhibition and specialist elements of museums delivery, it is proposed to withdraw from the existing Agreement.
- 6.3 Under this arrangement the Council could potentially continue to work with TWAM via a renegotiated arrangement to commission elements of the customer focussed specialist services and a level of strategic support.
- 6.4 A Museums Service will be established being directly delivered by the City Council. This will be underpinned by continued close working with the Voluntary and Community Sector and other partners to support in terms of operations and programming.

## **7. REASON FOR DECISION**

- 7.1 Museums will be tailored to meet customer expectations and aspirations with services enhanced, not compromised. The City Council will maximise opportunities for securing high profile exhibitions, educational and learning programme and tailored events activity. The services provided will ensure museum services are safeguarded and designed to ensure they are efficient and accessible to all.

## **8 ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

- 8.1 The following options have also been considered and rejected:

- i) Do nothing

This option was rejected as it maintains the existing arrangement which is not considered to provide the most effective museums service for Sunderland.

ii) Operate all aspects of the museums service:

This option would require the transfer of all aspects of the Museums Service to Sunderland. It is not considered to be cost effective nor would it enhance service delivery arrangements. Delivering some aspects of Museum Services through others such as TWAM, provides opportunities in terms of partnership working/membership with National Bodies, and funding opportunities on a local/regional and national level all of which is considered could continue to be delivered through a renegotiated arrangement. Whilst at an operational level there is confidence that efficiencies can be realised and service delivery improved by bringing the operational management in-house, the provision of more specialist functions solely for Sunderland such as archaeological expertise currently shared with other Authorities could result in much higher costs for the Council.

## **9. RELEVANT CONSIDERATIONS/CONSULTATIONS**

- 9.1 The City Council is required to consult with the other local authorities to consider the impact that Sunderland terminating the Agreement will have on the level of grant paid to TWAM and the consequent viability of TWAM. Provided the Agreement is terminated by Sunderland, the Council will then renegotiate arrangements for the delivery of specialist services to enable the participation in joint funding opportunities and establishment of aligned regional museum outcomes.

### **a) Financial considerations**

As mentioned in Section 1.2 above the current City Council contribution for delivery of a museum service is £1.4m.

### **b) Legal Implications**

Under the existing Agreement Sunderland will need to consider a number of consequences and early termination clauses. These are however predicated on an assumption of full withdrawal and not the renegotiated proposal outlined in this report. The negotiations over the 12 month period of notice will address these issues.

### **c) Staffing**

Staff employed in the direct delivery of Museums Services in Sunderland will have the right to transfer under TUPE legislation to Sunderland City Council. The details associated with the transfer of staff will be finalised and progressed during the 12 month notice period.

#### **d) Equalities**

Appropriate arrangements are in place to assess and address any equalities issues related to the proposals. Further detailed equalities analyses will be undertaken as the service is redesigned during the 12 month notice period.

### **10. BACKGROUND PAPERS**

10.1 The following background papers were relied upon to compile this report.

- TWAM Joint Agreement
- TWAM Service Level Agreement

