

SCRUTINY CO-ORDINATING COMMITTEE

AGENDA

Meeting to be held in the Civic Centre (Committee Room No. 1) on Thursday, 30th June, 2016 at 5.30 p.m.

Membership

Cllrs, Atkinson, D. Dixon, English, Foster, Francis G. Galbraith, Heron, Lauchlan, F. Miller, P. Smith, David Snowdon, Dianne Snowdon, Waters and N. Wright

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	Report of the Head of Law and Governance (copy attached).	

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No items

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

22ND June, 2016.

At an Extraordinary meeting of the SCRUTINY COMMITTEE held in the CIVIC CENTRE SUNDERLAND on THURSDAY, 13th APRIL, 2016 at 5.30 p.m.

Present:-

Councillor N. Wright in the Chair

Councillors R. Davison, J. Fletcher, L. Scanlan, David Snowdon and Dianne Snowdon.

Also in attendance:-

South Tyneside Council

Mr P Baldasera, Strategy and Democracy Officer

Councillor W Brady

Councillor M Butler

Councillor W Flynn

Councillor G Kilgour

Councillor P Hay

Councillor A Hetherington

Councillor A Huntley

Councillor G Hobson

Councillor J McCabe

Councillor K Stephenson

Councillor A Walsh

South of Tyne Health Care Group

Mr J Anderson, Chairman, City Hospitals Sunderland NHS Foundation Trust

Mr K Bremner, Chief Executive, City Hospitals Sunderland NHS Foundation Trust

Ms C Harries, Director of Corporate Affairs, City Hospitals Sunderland NHS Foundation Trust

Mr I Martin, Medical Director, City Hospitals Sunderland NHS Foundation Trust

Mr N Mundy, Chairman, South Tyneside NHS Foundation Trust

Mr S Williamson, Chief Executive South Tyneside NHS Foundation Trust

Sunderland City Council

Ms K Brown, Scrutiny and Members' Services Coordinator

Ms C Burnham, Head of Scrutiny and Area Arrangements

Councillor R Copeland

Mr N Cummings, Scrutiny Officer

Ms R Hood, Assistant Head of Law and Governance

Mr D Noon, Principal Governance Services Officer

Councillor D Turner

Councillor G Walker

Healthwatch

Mr D Tate

Apologies for Absence

Apologies for absence were submitted to the meeting on behalf of Councillors D Dixon and Howe.

Declarations of Interest (including Whipping Declarations)

There were no declarations of interest made.

South of Tyne Health Care Group - Update

The Head of Scrutiny and Area Arrangements submitted a report (copy circulated) to provide further information to Members from both Sunderland and South Tyneside scrutiny functions on City Hospitals Sunderland NHS Foundation Trust and South Tyneside NHS Foundation Trust's proposed implementation of a health alliance to reconfigure services across South of Tyne.

(For copy – report see original minutes)

Members were advised that City Hospitals Sunderland NHS Foundation Trust and South Tyneside NHS Foundation Trust, who between them served a population of 430,000 people across a large geographical area south of Tyne & Wear had for many years collaborated to jointly provide some clinical services, (e.g. stroke and paediatrics), in a way in which the local communities got the best and safest healthcare using the resources and specialist skills available. Both organisations now believed that to protect the future sustainability of healthcare across both communities, required more significant transformation leading to greater integration of services, and that this needed to be delivered at speed and scale.

Both Trusts recognised the importance and value of having a local hospital providing a range of emergency and planned services, but they equally recognised the urgent need to rebalance services across South of Tyne and Wear as it was no longer safe or sustainable for either organisation to duplicate the provision of services in each location. As a result, both Trusts had agreed to form and implement a health alliance, working together as a "South of Tyne Healthcare Group", and embark on an ambitious programme of reconfiguring services across South of Tyne in a way that best delivered patient outcomes.

The proposals were announced on 1st March 2016 and both Sunderland and South Tyneside Overview and Scrutiny functions had expressed concerns and requested further information around the proposals and implementation of the trusts plans.

At this juncture the Chairman of the Committee, Councillor Norma Wright, welcomed the Chief Executives Ken Bremner (City Hospitals Sunderland NHS FT) and Steve Williamson (South Tyneside NHS FT) together with Chairmen John Anderson (City Hospitals Sunderland NHS FT) and Neil Mundy (South Tyneside NHS FT) who had been invited to attend the meeting to provide a presentation to Members of both Scrutiny functions around the proposals.

The four representatives of the Group delivered a detailed powerpoint presentation on the proposals based around the following themes:-

- i) the urgent need for change in the interests of the Groups patients and residents
- ii) the opportunities to improve quality and the patient experience
- iii) the financial context of the proposals outlining both the opportunities and the risks
- iv) an outline of the approach to be taken by the Group; and
- v) the next steps which would ultimately result in the implementation of the services changes from April 2017.

The Chairman thanked Mr Anderson, Mr K Bremner, Mr N Mundy and Mr Williamson for their presentation and expressed her concern that the members of Sunderland and South Tyneside Councils had felt it necessary to call the extraordinary meeting. She acknowledged that legally it could be argued that the proposal did not amount to a 'substantial variation' of service, however in addition to the 'letter of the law' there was also the 'spirit of the law'. In this regard she believed the Group should have consulted with the scrutiny functions of both councils if only out of courtesy.

In addition, the Chairman expressed her dissatisfaction with the name of the Group (The South of Tyne Health Care Group). Whilst secondary to members concerns in respect of the potential clinical implications of the alliance, she believed it represented the continual marginalisation of Wearside and did not accurately reflect the geography of the Group's catchment area.

Mr Mundy replied that the Group did listen however it had clearly misjudged the strength of feeling of Members. Mr Bremner added that in establishing the Group, City Hospitals Sunderland NHS Foundation Trust and South Tyneside NHS Foundation Trust had not created a new legal entity. The Group represented an alliance between the two trusts and had no legal standing.

Mr Bremner reassured members that anything that was service specific would be brought before Scrutiny and decisions would not be taken without the input from the Scrutiny Committee members. He stated that he wished to make it clear that the Group had not tried to evade a consultation process. He acknowledged the Chair's point about the spirit of the law but reiterated that from the Group's point of view they had nothing to consult on.

Mr Williamson advised that the Group would do all that was required to come up with a name for the Alliance that was suitable to both areas. The Alliance would work with the clinical teams to support the recruitment challenges within certain specialisms. Both organisations were working positively towards providing the best of outcomes. It was important to allow the clinical teams the best space to develop options. He reassured members that the Group would take account of all issues and for example were working with NEXUS to find a solution to concerns raised in respect of transportation.

Councillor McCabe stated that a decade previously South Tyneside had lost its vascular services to Sunderland. Now there was the possibility of the loss of further services. This would further damage the ability of South Tyneside's hospital to recruit. Mr Williamson replied that the Alliance was determined to be driven by what would be the best clinical outcomes for its residents. Co-location may be the best option as there were capacity issues at both hospitals which would negate the possibility of transferring services from one hospital to another. He acknowledged

that South Tyneside District Hospital was a major employer however he did not for see a huge change at the front line in respect of the clinical staff. There would be no change in emergency access at the hospital. Recruitment from abroad had decreased and work was being undertaken with Sunderland University to boost the recruitment of nurses locally. The flexibility of the proposals would help attract specialist consultants. There were real opportunities in South Tyneside and the Haven Court Care hub was a major commitment that provided an example of how South Tyneside could offer expertise into Sunderland.

Mr Bremner stated that within the context of the NHS there was a push to do certain operations in greater numbers as this generated better outcomes. The trusts in Sunderland and South Tyneside needed to respond to Newcastle and the Units north of the Tyne. In response to Councillor McCabe's statement he contended that South Tyneside did not lose its vascular services to Sunderland, it gained access to much improved services. It was a fact of life that the two trusts could no longer do everything they did at the moment at every location in the community. What the Alliance wanted to provide was a comprehensive range of high quality services for both communities.

Councillor McCabe cited the loss of the Palmers Hospital as an example of a bad experience in which he believed the CCG had 'led members up the garden path'. The hospital had treated 27,000 patients in its last year. The triage nurse had recently directed 16,000 patients under the new arrangements. So what had happened to the other 12,000 people? Had they started to self-medicate or had they just decided to move elsewhere? Access to service was really important and it was essential to ensure that the access was there before any changes were implemented. Services had been moved away from a hospital that was next to a metro station, bus terminus and taxi rank in Jarrow to an area where access was not as good. Councillor McCabe stated that members and residents had warned against the move from the start. They had painted a scenario which had ultimately come to pass. He added that you can tell me a lie once but you can't tell me it twice.

The Chairman advised that the NECA Overview and Scrutiny Committee were currently undertaking an investigation into transport in the region and recommended that Councillor McCabe's comments in this regard were submitted to that Committee as evidence.

Councillor Hobson highlighted the transport issues as potentially the major objection that would be received from the public in respect of any transfer of services. There was no direct metro service between South Shields and Sunderland, bus journeys between both could sometimes involve 3 or 4 changes and car ownership was low. For people who were infirm or lacking in mobility this would represent a major obstacle.

Councillor Diane Snowden advised that recruitment was a problem across the whole of the NHS and asked if the Group had lobbied central government over the issue.

Mr Bremner advised that the Trust used the Health and Wellbeing Board to alert the City of impending issues. The NHS at a national level recognised that it was suffering from staff shortages and that these were worse in the north of England. Training was the key but until locally trained staff could be developed, recruitment from abroad would have to continue. Nurses were now being trained at Sunderland University and it was hoped that staff trained in the region would be more likely to

stay and practice in the region. The recruitment of specialist doctors in key areas such as A&E was a more difficult problem to resolve. There was an overall shortage of supply nationally with fewer students now going through medical school. In addition the North East was not seen as an attractive place by doctors to live and work.

Councillor Hay highlighted the dangers patients in South Tyneside would face if stroke services were transferred to Sunderland. It was a medical fact that in the case of someone suffering a stroke, the survival and recovery rates were directly related to the speed at which treatment was received.

Mr Williamson replied that it was true that speed of treatment was the key factor when considering the correlation between actions and outcomes however stroke consultants were in very short supply. The out of hours stroke service had been a key success however South Tyneside, Gateshead and Sunderland had all experienced problems. There was a need for clinical teams to urgently review the situation and it was possible that a 24 hour wrap around service may be the way forward. That may result in patients having to travel and they would need to be given the confidence that ambulances would be available. Mr Williamson stated that the Trusts could not shy away from the need to reform services but this would only be done in order to improve the outcomes for residents.

The Chairman stated that it was accepted that the decision making would need to be guided by the hands of the clinicians however she hoped that they would be mindful of the concerns raised by members.

Councillor Flynn appreciated the need for change but stated that while she accepted that the Group was the result of an alliance rather than a merger the suspicion remained that services would ultimately merge. The experience in Jarrow had not been good with promises being made that had not been kept.

Councillor Kilgour stated that in his opinion the consultation in respect of Jarrow had been a sham and members had felt insulted by it. The service in the town now was unrecognisable from that which had been promised. Members needed clarity that what was determined through the consultation process would be what was actually delivered. Any consultation needed to be posed in in such a way that constituents could have a valid input. Councillor Kilgour noted that neither members nor the Foundation Trusts had any jurisdiction over Nexus and public transport routes.

Councillor Huntley asked who would make the decision as to whether changes to services would be subject to a consultation process?

Mr Williamson replied that the decision would be taken by the two Foundation Trusts. They were under a statutory duty to consult if proposals amounted to a significant change in the delivery of services. The clinical teams would identify the need to make a change and the Trusts would influence the CCG to ensure the consultation was correct in all regards.

Councillor David Snowdon stated that the members present at the meeting represented over half a million people and therefore if changes were to be made then they needed to be kept in the loop. He referred to the Group's presentation and in respect of the Transformational Resources asked how long this had been available to the group. He also asked whether the 6 year plan would in reality last 6

years and given the statement that there was the potential for additional Transformational funding, how much was this likely to be.

Mr Bremner advised that the identified £15million was the amount allocated to both trusts in total, the payment of which would be subject to certain targets being met. In order to access the further additional resources, the Group would need to submit a plan during June. There were currently no details as to how much additional money would be made available if the bid was successful.

Mr Mundy added that the Sustainability and Transformation plan was not about making cuts, it was about transforming services. In reality the plan was about more than the next 6 years it was about delivering continuing improvements and ensuring that they were sustainable.

Councillor Walker stated that on hearing the presentation and the debate there was now an acceptance that it was an alliance rather than a merger. He asked how confident was the Group that its internal systems were robust enough to share information across both sides of the Alliance.

Mr Mundy replied that it was a very good point and it was something the Trusts were aware of and were addressing. Mr Bremner added that access to clinical information was of primary importance. The Group had integrated hospital information systems which whilst not perfect were one of the best in the NHS. Getting the clinical systems right was important but equally there would be a need to share information with the primary care sector. Mr Williamson added that Sunderland would be ideally placed to do so given the CCG's Vanguard status.

There being no further comments or questions for Messrs Mundy, Williamson, Bremner and Anderson, the Chairman thanked them for their attendance and it was:-

1. RESOLVED that :-

- i) it be recommended to the NECA Overview and Scrutiny Committee that it considers the transport issues raised by members relating to the Health Alliance as part of its transport review;
- ii) any future consultations undertaken by South Tyneside and City Hospitals Sunderland NHS Foundation Trusts, in respect of the health alliance, ensure the involvement of local residents and communities and demonstrates how this involvement has influenced, or otherwise, the outcomes of the consultation process and
- iii) regular updates are provided to the relevant scrutiny committee on the progress and developments in relation to the Health Alliance.

The Chairman then closed the meeting having thanked Members and Officers for their attendance and contributions to the meeting and in particular those attending on behalf of South Tyneside Council's Scrutiny function.

(Signed) N. WRIGHT,
Chairman.

Item 2ii

**At a meeting of the SCRUTINY COMMITTEE held in the CIVIC CENTRE
SUNDERLAND on THURSDAY, 14th APRIL, 2016 at 5.30 p.m.**

Present:-

Councillor N. Wright in the Chair

Councillors Davison, Fletcher, Howe, Scanlan, David Snowdon and Dianne Snowdon.

Also in attendance:-

Councillor Farthing (observing)

Ms Debbie Burnicle, Deputy Officer, Sunderland Clinical Commissioning Group (CCG)

Mr Les Clark, Chief Operating Officer, Place, Sunderland City Council

Mr Nigel Cummings, Scrutiny Officer, Sunderland City Council

Mr Jim Diamond, Scrutiny Officer, Sunderland City Council

Mr Iain Fairlamb, Head of Planning and Regeneration, Sunderland City Council

Ms Ros Goode, NHS England

Mr David Noon, Principal Governance Services Officer, Sunderland City Council

Dr Jeff Stephenson, Sunderland CCG

Apologies for Absence

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

Minutes of the last Meeting of the Committee held on 10th March, 2016

1. RESOLVED that the minutes of the last ordinary meeting of the Scrutiny Committee held on 10th March, 2016 (copy circulated) be confirmed and signed as a correct record

Declarations of Interest (including Whipping Declarations)

Item 4 Sunderland APMS Procurement

Councillors David and Dianne Snowdon declared an interest in the matter as patients of the Barmston Medical Centre.

Councillor Farthing declared an interest as a patient registered with Encompass Healthcare.

Reference from Cabinet – 23rd March 2016, Sunderland Local Plan Core Strategy: Consultation on Growth Options

The Head of Law and Governance submitted a report (copy circulated) appending a report considered by Cabinet on 23 March 2016 which had sought approval of the Core Strategy Growth Options document and permission to undertake formal public consultation on the Growth Options. The report had been referred to the Planning and Highways and Scrutiny Committees to allow members views to contribute to the consultation process.

(For copy report – see original minutes).

Iain Fairlamb, Head of Planning and Regeneration presented the report and together with Les Clark, Chief Operating Officer, Place, addressed questions and comments from members thereon.

Members expressed the following views on the report:-

- i) Disappointment at the pressure to release green belt land for development and a wish that wherever possible the potential to release development land without eroding green space was maximised
- ii) Given the current pace of growth (the IAMP, New Wear Crossing, Keel Square/Vaux site, new hotels and the development of the port) the Core Strategy would need to be flexible and provide an element of future proofing
- iii) Concern at the current outward migration from the city and a desire to see it reversed
- iv) Pressure to remove existing rights of way and footpaths should be resisted
- v) Where possible the re use of existing brown field sites should be maximised.
- vi) The consultation on the growth option should be designed to so it was as easy as possible for the maximum number of residents and interested parties to access and that enough information was provided in order that people could make their own value judgements on the proposals. The wider the participation the better the outcomes would be.

The Chairman having thanked Mr Fairlamb and Mr Clarke for their attendance, it was:-

2. RESOLVED that:-

- i) Members comments be considered as part of the consultation process;
- ii) The importance of the Core Strategy Growth Options document and the formal public consultation be recognised and that further updates be submitted to the appropriated Scrutiny in due course.

Sunderland APMS Procurement Sunderland Care and Support Ltd – Update

The Chief Operating Officer submitted a report (copy circulated) to update the Committee on Sunderland CCG's decision to re-procure three Alternative Provider for Medical Services contracts in Sunderland which were due to terminate in the contract year 2016.

(For copy report – see original minutes).

Ms Debbie Burnicle presented the report and informed Members that the CCG was of the view that the proposal to re-procure the APMS contracts did not constitute a significant variation of NHS services as GP services would continue to be delivered in the three sites: The Galleries, Westerhope Road and Pennywell Shopping Precinct. However, in the spirit of the legislation the CCG wanted to engage with the affected patient population and stakeholders about the procurement.

Therefore during September and October 2015, the SCCG carried out a communications and listening exercise with patients and stakeholders. A range of methods were used to capture views and experiences as well as suggestions, questions, comments and concerns.

Patients registered with Encompass Healthcare, Pennywell Medical Centre and Barmston Medical practices to give them information and answer any questions, to reassure them that commissioned services would continue to be provided and noted that the CCG would take account of any feedback in the procurement process. All registered patients received a letter explaining the procurement process together with a patient information sheet, survey and invitation to attend drop-in sessions and /or comment on line or in writing. Briefings were also made to a range of stakeholders and information sessions held for Councillors from Washington and the West localities as well as attending before the Scrutiny Committee.

Following the engagement the CCG wrote formally to patients to let them know all the questions asked and comments made, along with answers to any questions raised. The outcomes of the engagement were also shared with the Primary Care Commissioning Committee (the decision making body). The Committee agreed to continue to progress the procurement as per the original timeframe.

Shortly after the engagement exercise concluded however, the CCG became aware that the current providers had not signed the contract variation to extend the contracts by 6 months and wanted to meet the CCG to discuss options. Meetings were held with both providers, and whilst the CCG were willing to listen and consider their concerns, the focus was on the need to have services in place between April and September 2016 for patients. Providers' views would be captured as part of the formal procurement process, ensuring a fair process for any potential provider. The Primary Care Committee were of the view therefore that the tender exercise needed to continue, therefore an emergency procurement had to be put in place for 6 months.

The Chairman thanked Ms Burnicle for her report and invited questions and comments from members.

Councillor Scanlan asked that if any provider failed to deliver could the CCG intervene. Ms Burnicle advised that it could. There were penalty clauses in the contract and performance was monitored. Dr Stephenson added that there were procedures written into all the contracts to remedy breaches with the ultimate sanction that the contract would be withdrawn.

In response to an enquiry from Councillor Dianne Snowdon, Ms Burnicle confirmed that the emergency contract was paid at a higher rate however the new contract would bring it back into line.

The Chairman referred to paragraph 5.4 of the report and asked what had been the nature of the issues raised by patients in their letters to Healthwatch. Ms Burnicle replied that the majority had sought reassurance that their practice was continuing and that services would not be changing. Positive comments had also been received in respect of two members of staff from Encompass and there had also been details of previous concerns raised in respect of another provider.

There being no further questions or comments the Chairman thanked Ms Burnicle, Dr Stephenson and Ms Goode for their attendance and it was:-

3. RESOLVED that the report be received and noted and that further update reports be submitted to the appropriate Scrutiny Committee in due course.

Scrutiny Policy Reviews 2015/16

The Head of Scrutiny and Area Arrangements submitted a report (copy circulated) which provided the Committee with the draft recommendations from the following Scrutiny Policy Reviews undertaken by the Lead Scrutiny Members and their supporting panels / Shadow Committee as detailed in appendices A to D of the Report.

Shadow Scrutiny Committee	Policy Review
Health and Wellbeing	Moving On: The Transition from Child to Adult Social Care Services (Report A)
Health and Wellbeing	Review of Core Sexual Health Services in Sunderland (Report B)
Economic Prosperity	The Approach to Environmental Enforcement (Report C)
Economy and Prosperity	The Use of Customer Feedback (Report D)

(For copy report – see original minutes).

The Scrutiny Lead Members then briefly introduced the reports of the Panels within their purview and consideration was given thereto.

The Chairman in conjunction with the Lead Scrutiny members made various suggested amendments to strengthen certain recommendations. Nigel Cummings, Scrutiny Officer advised that he taken note of the comments and would amend the recommendations accordingly. He would then circulate the revised drafts to the Chairman and relevant Lead Scrutiny Member for approval prior to submission to Cabinet.

The Chairman having thanked the members of the Scrutiny Panels / Shadow Committees and all the Officers who had supported the Scrutiny function and its meetings throughout 2015/16 it was:-

4. RESOLVED that the Scrutiny Policy Reviews as detailed in appendices A to D of the report, as amended be endorsed and that the Review Reports be referred as follows:-

- (i) 4 Policy Review Reports to Cabinet at its meeting in June 2016 and;
- (ii) 4 Policy Review Reports to Cabinet at its meeting in July 2016.

Annual report 2015/2016

The Chief Executive submitted a report (copy circulated) providing the Scrutiny Committee with the opportunity to consider the draft Scrutiny Annual Report for the Municipal Year 2015/16.

(For copy report – see original minutes).

Nigel Cummings, Scrutiny Officer, advised that at this stage, as the report was still in draft form, if members had any further comments for inclusion there would be time to include them if they contacted him as soon as possible.

The Chairman having advised that she would like to see a reference on page 4 in respect of the Ofsted inspection of Children's Services, it was:-

5. RESOLVED that the report be endorsed for submission to the first meeting of the Council in the new Municipal Year and for subsequent circulation to key stakeholders.

Notice of Key Decisions

The Head of Scrutiny and Area Arrangements submitted a report (copy circulated) providing Members with an opportunity to consider those items on the Executive's Notice of Key Decisions for the 28 day period from 22nd March together with the Notice for the period from 11th April 2016 issued following the publication of the agenda (copy tabled).

(For copy report – see original minutes).

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

In respect of item 160317/67 'Proposals to Establish a Company to Deliver Children's Services on behalf of the City Council', Mr Cummings advised that this would be referred to the Scrutiny Committee for consideration.

The Chairman advised that Scrutiny in its various guises from working groups to the parent Committee itself had repeatedly asked to meet with social workers and have

the ability to follow example cases from start to finish. Members had also asked to be able to meet with some of the looked after children outside of the formal committee setting and had asked that investigations be undertaken to find a mechanism that would allow them to do so. She asked that this was arranged as soon as possible.

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

Annual Work Programme 2015/16

The Head of Scrutiny and Area Arrangement submitted a report (copy circulated) attaching for Members' information, the work programme for the Committee's work being undertaken during the 2015/16 council year.

(For copy report – see original minutes).

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

The Chairman then closed the meeting having thanked Members and Officers for their attendance and contributions to the meeting and for all the support that they had provided throughout the Municipal Year.

(Signed) N. WRIGHT,
Chairman.

Item 2iii

At an extraordinary meeting of the SCRUTINY COORDING COMMITTEE held in the CIVIC CENTRE SUNDERLAND on TUESDAY 24TH MAY, 2016 at 4.30 p.m.

Present:-

Councillor N. Wright in the Chair

Councillors D. Dixon, English, Foster, G. Galbraith, Heron, F. Miller, Smith, David Snowdon, Dianne Snowdon and Waters.

Invited Members of the Children, Education and Skills Scrutiny Committee:-

Councillors Beck, Hunt and O'Neil together with Ms R. Elliott and Mr S. Williamson.

Also in attendance:-

Councillor Williams (observing)

Ms Fiona Brown, Director of People Services, Sunderland City Council

Ms Karen Brown, Scrutiny and Members' Services Co-ordinator, Sunderland City Council

Mr John Copps, Project Lead, Office of the Commissioner of Children's Services

Mr Nigel Cummings, Scrutiny Officer, Sunderland City Council

Mr Jim Diamond, Scrutiny Officer, Sunderland City Council

Ms Rhiannon Hood, Assistant Head of Law and Governance, Sunderland City Council

Ms Sandra Mitchell, Head of Community and Family Wellbeing, Sunderland City Council

Mr David Noon, Principal Governance Services Officer, Sunderland City Council

Apologies for Absence

Apologies for absence were submitted to the meeting on behalf of Councillors Francis, Turton and Tye and on behalf of Mrs Blakey.

Declarations of Interest (including Whipping Declarations)

There were no declarations of interest made.

Children's Services Company - Proposals

The Director of Children's Services submitted a report (copy circulated) to inform members of the arrangements to establish a new Children's Services Company to deliver the Children Services function.

(For copy report - see original minutes)

Members were informed that on 20 April 2016, the Cabinet agreed a report setting out proposals to establish a new company to deliver the Children's Services function on behalf of the Council. The report noted that the setting up of the Company would enable the Council to improve services for children and families and respond to the DfE Directive in relation to Children's Social Care. The new Company was designed to deliver a holistic service as opposed to an isolated safeguarding function.

At this juncture the Chairman of the Committee, Councillor Norma Wright, welcomed Fiona Brown, Sandra Mitchell and John Copps who had been invited to attend the meeting to provide a presentation to Members of both the Scrutiny Coordinating Committee and the Children, Education and Skills Scrutiny Committee on the proposals to establish the new Children's Services Company.

The three Officers delivered a detailed powerpoint presentation on the proposals based around the following themes:-

- i) What is the Children's Services Company?
- ii) How will the Company be monitored and held to account?
- iii) The proposed services to be delivered by the Company
- iv) The next steps and formal timetable in establishing the company

Members were informed that the new company would provide high quality children's services in Sunderland. It would measurably improve the lives of children and their families, keep them safe from harm, and ensure they had the opportunity to flourish.

To achieve this vision, the company would work to three key principles:

Public sector ethos
Private sector discipline
A grounding in democratic accountability

The Company would be held to account through its 100% ownership by the Council via the Company Board and the Management Team, through the Council in its role as Commissioner with associated service contracts and quality assurance framework and through monitoring by the LSCB, the Corporate Parenting Board, and the Scrutiny Coordinating Committee.

With regard to the services to be transferred to the Company some were required to transfer under direction from the Secretary of State (i.e. Children's social care functions) and for others there would be a choice. Additional services recommended for transfer to the Company included the various Early Help Services and specialist education services. Services which required further discussion included school place planning /admissions, school capital planning and education welfare.

With regard to the next steps the following timetable had been established:-

- i) The on-going opportunity for members to ask more questions and provide further input before 1 June, 2016. Feedback from the consultation events would form part of the next iteration of the development of the Company. In particular, although there may not be uniform view on all aspects, members views would be taken into account and recommendations made to Cabinet

- ii) Ongoing work on the Children's Services Transition project, overseen by the Commissioner
- iii) Cabinet to consider proposals on scope of services, governance and set-up costs, captured in a Memorandum of Understanding with the Department for Education – 22 June, 2016
- iv) Ongoing consultation with staff, Trades Unions and service users
- v) Negotiation with the Department for Education around its financial contribution to set up costs – July/August 2016
- vi) Signing of a grant agreement with the Department for Education – September 2016
- vii) New company begins operating in shadow form – 1 September, 2016
- viii) New company goes live 1 April, 2017

The Chairman thanked Ms Brown and her team for their presentation and invited questions from members.

Councillor G. Galbraith stated that she understood that the Company was still in the very early stages of development but asked if there were any time limits built in as to when service improvements could be expected? Ms Brown replied that that was something that would be left to members of the Council to build in. Data sets were being compiled on a monthly basis to monitor the improvement journey and Ms Brown offered to share these with Members.

Councillor English asked how confident could officers and members be that the data produced was transparent. Ms Brown advised that a lot of learning had been taken from the Ofsted inspection. The question that continually needed to be answered was 'is the data telling you how it really is?' The data needed to be triangulated across a number of areas, for example, front line staff, case file audits, the voice of the child and operational visits by the Corporate Parenting Board. Mr Copps added that external expertise who knew what 'good' looked like would also be bought in to monitor the data. Councillor English then referred to the need to build relationships with partners and asked how confident could the Council be that Partners would be willing to share information. Ms Brown advised that the Council were looking to sign off on various agreements. These were not sorted yet but they were a long way down that particular journey.

The Chairman referred to statements about openness and transparency but advised that it was the role of the Committee to investigate and look behind what was being presented to it. In this regard the Committee had been asking for some time to meet with front line staff and to hear the voice of the child outside the formal Committee environment. Ms Brown replied that front line staff would welcome the opportunity to meet with Members.

Councillor David Snowdon asked when was it expected that Children's Services would be formally released from DfE Intervention? Ms Brown replied that based on

the experience of other Local Authorities who had undertaken a similar process, the timescale was likely to be between two to three years.

The Chairman asked how ready were the services that would transfer to the Company and what would be the process? Mr Copps advised that Project Team were currently running through the design of the new service with the four new Children's Services Directors and the new Company Chief Executive. Ms Brown advised that during the next two weeks details of the Key Performance Indicators and service contracts would be firmed up. She was interested in what could be learned from projects such as the Council's joint leisure venture and 'Achieving for Children' the Children's Services company set up voluntarily by Kingston and Richmond. An expert practitioner would be appointed to work 20 days per year to assist in developing contracts and also to undertake a monitoring role. The softer side of the transfer was also being developed with continual staff briefings and dialogue with children and families as it was vitally important that such engagement would help take people forward with the Company.

The Chairman referred to the IT problems which had undermined the efficiency of the Service and asked if they had been successfully addressed. Ms Brown explained the history of the IT issues which had dogged the service to such an extent that the current system was not fit for purpose. Happily the Council was now in a position to award a contract to a new provider which would have the ability to provide a much more intuitive system. It was not a quick fix however as it would take approximately 9 to 12 months to cleanse and transfer the data and ensure staff were fully trained.

Councillor Hunt welcomed the development of the information sharing protocols with partners together with the ability of the Company not only to buy in services but to sell services of its own. In this regard there would be a continual need to monitor who was in the best position to deliver a particular service.

Councillor David Snowdon referred to the initially high costs of addressing the immediate requirements of the Ofsted report before even thinking about the cost of establishing the Company and running it. Given the current severe and likely future financial pressures facing Local Government he expressed concerns regarding the financial viability of the Company going forward. Councillor English concurred with these views especially given the increasing numbers of children coming into care.

Councillor D. Dixon stated that removing a service from its traditional position and re-establishing it in a different model would not automatically ensure things would change for the better. He welcomed that the opportunity was there to drive change but asked who would review the company to ensure that it was ready to assume control of the services to transfer. Ms Brown replied that Cabinet and members would have the ability to view the development of the Company in the run up to 1st April, 2017 and during the period of shadow operation from 1st September 2016. The DfE and Ofsted would be monitoring progress and undertaking regular visits prior to the company going live.

Councillor Dixon stated that he believed that this Committee should play a role in any decision regarding the readiness of the Company to receive the services to be transferred. Ms Brown advised that the proposals would be brought back before Scrutiny for a sense check at various stages before the company went live.

Mr Williamson raised the analogy of cream doughnuts as opposed to bread and jam. He believed the proposals outlined represented a 'bread and jam' service. There was nothing innovative about them and they merely appeared to be propping up a failing service. He felt that Sunderland should seize the moment and do something different. If the proposals ultimately aimed purely to support services that had already been shown to have failed, then Sunderland was wasting its time. He hoped to hear in the future that hard but necessary decisions had been taken.

The Chairman referred to the recommendation that various educational services should also transfer to the Company and asked how much liaison was being undertaken with schools on the proposals. Ms Mitchell advised that Simon Marshall the Council's new Director of Education was in the processes of visiting all schools in addition to attending meetings of cluster groups and Head Teachers.

The Chairman stated that it would be useful for Scrutiny to receive an update from Mr Marshall in the near future.

There being no further comments or questions for Ms Brown, Ms Mitchell or Mr Copps, the Chairman thanked them for their attendance and it was:-

1. RESOLVED that :-

- i) The Scrutiny Coordinating Committee noted the presentation and information provided and asked that consideration be given to the comments arising thereon;
- ii) The Children, Education and Skills Scrutiny Committee be acknowledged as the appropriate Committee in relation to future reporting by the Children's Services Company with general updates being submitted to the Scrutiny Coordinating Committee as and when required.

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

(Signed) N. WRIGHT,
Chairman.

SCRUTINY CO-ORDINATING COMMITTEE

REFERENCE FROM CABINET – 22 JUNE 2016

**REVENUE BUDGET OUTTURN 2015/2016 AND FIRST REVENUE REVIEW
2016/2017**

REPORT OF THE HEAD OF LAW AND GOVERNANCE

1. Purpose of this Report

- 1.1 To set out for advice and consideration of the Committee an aspect of the report on the Revenue Budget Outturn 2015/2016 and First Revenue Review 2016/2017 namely requesting the Council to approve the transfer of funds.

2. Background and Current Position

- 2.1 The Cabinet, at its meeting on 22 June 2016, gave consideration to a report of the Director of Corporate Services. The report gave details of the Revenue Budget Outturn 2015/2016 and First Revenue Review 2016/2017.
- 2.2 Copies of the 22 June 2016 Cabinet agenda were circulated to all Members of the Council.
- 2.3 In relation to 2015/2016, Cabinet:-
- approved the contingency and reserve transfers proposed at Appendix A, budget transfers and virement at Appendix B;
 - approved the final account decisions as set out in the report.
- 2.4 In relation to 2016/2017, Cabinet approved the contingency transfers at Appendix E and budget transfers detailed in the report.
- 2.5 In accordance with the Council's Budget and Policy Framework certain transfers are referred to Scrutiny Co-ordinating Committee for advice and consideration, prior to seeking Council approval.
- 2.6 The attached Appendix A sets out the relevant extract from the Cabinet report, which refers to a proposal that £0.220m underspend is transferred to the Strategic Investment Reserve to support transitional arrangements arising from implementation of the savings programmes for 2016/2017 and future years.

3. Conclusion

- 3.1 The matter at 2.5 is referred to this Committee for advice and consideration. The comments from the Committee will be reported to Cabinet on 20 July 2016 and Council on 21 September 2016.

4. Recommendation

- 4.1 The Committee is invited to give advice and consideration on the issue of transfer as set out in the attached extract.

5. Background Papers

- 5.1 Cabinet Agenda, 22 June 2016.
- 5.2 A copy of the Agenda is available for inspection from the Head of Law and Governance or can be viewed on-line at:-

[Cabinet Agenda, 22 June 2016](#)

Contact Officer	Barry Scarr 0191 561 1805 Barry.scarr@sunderland.gov.uk	Elaine Waugh 0191 561 1053 Elaine.waugh@sunderland.gov.uk
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Revenue Budget Outturn 2015/2016 and First Revenue Review 2016/2017

Cabinet Meeting 22 June 2016

Extract of Report

Virements over £55,000 for the Final Quarter 2015/2016

It is proposed that the underspend of £0.220m be transferred to the Strategic Investment Reserve to support transitional arrangements arising from implementation of the savings programmes for 2016/2017 and future years.

	Transfer From £'m	Transfer To £'m
General Balances	0.220	
Transfer to:		
Strategic Investment Reserve		0.220
TOTAL	0.220	0.220

SCRUTINY COMMITTEE

REFERENCE FROM CABINET – 22 JUNE 2016

**CAPITAL PROGRAMME OUTTURN 2015/2016 AND FIRST CAPITAL REVIEW
2016/2017 (INCLUDING TREASURY MANAGEMENT)**

Report of the Head of Law and Governance

1. Purpose of the Report

- 1.1 To advise the Committee of the approval by Cabinet of variations to the capital programme with an estimated cost variance of £250,000 or more, which will also be reported to Council for information.

2. Background and Current Position

- 2.1 The Cabinet, at its meeting held on 22 June 2016, gave consideration to a report of the Director of Corporate Services. The report sets out:-

- the Capital Programme Outturn for 2015/2016;
- the outcome of the First Capital Review for 2016/2017 taking account of the Capital Programme Outturn;
- changes made to the Capital Programme 2016/2017 since its approval;
- an update on the outturn position for 2015/2016 and progress in implementing the Treasury Management Borrowing and Investment Strategy for 2016/2017.

- 2.2 In relation to the Capital Programme outturn for 2015/2016 Cabinet was asked to:

- approve the inclusion of additional schemes or variations to existing schemes for 2015/2016 detailed at Appendix A (of the report), as a variation to the Capital Programme which will be reported to Scrutiny and Council for information where necessary, and
- note the overall Capital outturn position for 2015/2016.

In relation to the Capital Programme first review for 2016/2017 Cabinet was asked to:

- approve the inclusion of additional schemes or variations to existing schemes for 2016/2017 detailed at Appendix B (of the report), as a variation to the Capital Programme which would be reported to Scrutiny and Council for information where necessary, and
- approve a contract variation in excess of £500,000 for the New Wear Crossing project.

In relation to the Treasury Management Strategy, Cabinet was asked to note the positive progress in implementing the 2016/2017 Treasury Management Strategy and Prudential Indicators.

- 2.3 Copies of the 22 June 2016, Cabinet Agenda have been made available to all Members of the Council.

- 2.4 In accordance with the Council's Financial Procedure Rules, Cabinet may authorise variations to the Capital Programme provided such variations are within available resources and consistent with Council policy.

The attached Appendix A sets out the relevant extracts from the Cabinet Report which outlines the variations to the capital programme with an estimated cost variance of £250,000 or more in 2016/2017.

4. Recommendation

- 4.1 The Scrutiny Committee is invited to note the proposed variation to the Capital Programme for 2016/2017 with an estimated cost variance of £250,000 or more.

5. Background Papers

- 5.1 Cabinet Agenda, 22 June 2016.
- 5.2 A copy of the Agenda is available for inspection from the Head of Law and Governance or can be viewed on-line at:-

[Cabinet Agenda, 22 June 2016](#)

**Contact
Officer:**

Barry Scarr
0191 561 1805
barry.scarr@sunderland.gov.uk

Elaine Waugh
0191 561 1053
elaine.waugh@sunderland.gov.uk

**Capital Programme Outturn 2015/2016 and First Capital Review 2016/2017
(including Treasury Management)**

Cabinet Meeting 22 June 2016

Extract of Report

Variations to the Capital Programmes in excess of £250,000 - Fully Funded

Variations to the 2016/2017 Capital Programme in excess of £250,000 - Fully Funded	£000
Health, Housing and Adults Services	
Disabled Facilities Grants - following confirmation of the 2016/2017 Better Care Fund grant allocation of £2.857m in February 2016, provided for Disabled Facilities Capital Grants, as well as £0.300m contribution from Health partners, £3.157m is therefore to be provided for provision of Disabled Facilities grants in 2016/2017.	3,157
Public Health, Wellness & Culture	
<p>Hylton Castle Redevelopment – following approval by Cabinet 13 January 2016 (£1.402m in 2016/2017 and £1.402m in 2017/2018, funded by £1.987m HLF grant and £0.817m prudential borrowing previously held in Capital Contingencies).</p> <p>The redevelopment of the castle will establish a community based heritage led visitor facility for the community, city and region. It will also ensure the future conservation of the castle by establishing a sustainable use for the building that will preserve and enhance its heritage significance. The capital works include: essential repairs and conservation to external historic fabric, external landscaping, major structural works to the foundations and structural frame such as flooring, roof, windows, internal walls & doors, stairs/lift, floor & ceiling finishes, mechanical and electrical services as well as fixtures and fittings.</p>	1,402

SCRUTINY COORDINATING COMMITTEE**SUNDERLAND APMS PROCUREMENT****REPORT OF CHIEF OFFICER SUNDERLAND CCG****1. Purpose**

The purpose of this report is to update the committee on the outcome of the procurement exercise undertaken by NHS Sunderland Clinical Commissioning Group (SCCG) for the patients registered at Encompass, Pennywell and Barmston GP Practices in Sunderland. The Committee last received an update report to the April 2016 meeting.

2. Background

2.1 The majority of primary medical service contracts held by GP practices in England and Wales are open-ended. There are however some newer contracts that are time-limited.

2.2 Encompass Healthcare, Pennywell Medical Centre and Barmston Medical Practice are GP practices which deliver essential, additional and enhanced services to a combined registered list of 13,407 patients (as at 01 April 2016) under an Alternative Provider Medical Services (APMS) contract. After a number of contract extensions the practice contracts were due to terminate on 31 March 2016. The Encompass Practice was originally contractually provided by Dr Liston and the 2 other practices were provided by IntraHealth Ltd.

2.3 A report was presented to the Primary Care Commissioning Committee of SCCG on 16 July 2015 to consider the options to secure continuity of primary medical services for patients of the three practices. The Committee decided to re-procure **one** APMS contract with three sites.

3. Outcome of Tender Process

3.1 The original tender exercise for the one contract was advertised from 4 January 2016 -12 February 2016. One bid was received which was out-with the tender value and therefore could not be assessed. The CCG subsequently reviewed the procurement strategy and members of SCCG's Committee met with NHS England colleagues to review informal and later formal feedback from those providers that had expressed an interest in tendering.

3.2 Following this meeting key changes were made to the procurement documentation and a revised tender notice was issued on 10 March 2016, and the closing date for submitting a tender was 13 April 2016, with the contract award date being 7 June 2016. The key changes were noted in the April report to the Scrutiny Committee.

3.3 Two bids were received in the second tender exercise; one was deemed to be non-compliant at the financial evaluation stage and therefore did not proceed to

the quality evaluation stage of the procurement exercise. The other bid was evaluated and scored over the required threshold for quality and financial elements. The criteria was weighted 95% on Quality and 5% on finance. (See attached App A re procurement questions). Note 'red flag' questions are where the provider must score more than 50% to be successful. The contract was therefore awarded to Sunderland GP Alliance Limited who will commence the contract on 1 October 2016.

- 3.4 A letter has been distributed to patients to inform them of the outcome of the tender exercise and key stakeholders will also receive communication (Appendix B – example letter to patients). The mobilisation phase of the tender exercise has now commenced; the incumbent and the new provider of services have met and meetings with the staff at each of the three practices are underway and a comprehensive mobilisation plan is in the process of being implemented.

4. Recommendations

- 4.1 The Scrutiny Committee is asked to note the update on the outcome of the procurement exercise undertaken by SCCG for the delivery of the Alternative Provider Medical Services contract in Sunderland, which will commence on 01 October 2016.

Glossary of Terms

CCG – Clinical Commissioning Group

APMS – Alternative Provider Medical Services (APMS)

Contact Officers

Debbie Burnicle
Deputy Chief Officer
NHS Sunderland CCG

APPENDIX A: Procurement Questions

Procurement Question Weightings

	Section	Question Ref.	Red Flag Question	Micro Weighting %	Macro Weighting %
Quality	Section 1 Clinical & Service Delivery	CSD01 - Accessibility	Red Flag	10	55
		CSD02 - Equity of Service & Equality		5	
		CSD03 - Patient Involvement & Engagement		4	
		CSD04 - Partnership Working		4	
		CSD05 – Clinical Governance	Red Flag	15	
		CSD06 - Health Promotion & Disease Prevention		4	
		CSD07 - Medicines Management		4	
		CSD08 - Referrals		4	
		CSD09 – Business Continuity		5	
	Section 2 Performance Management	PF01 - Performance		4	10
		PF02 - Continuous Improvement		3	
		PF03 - Monitoring		3	
	Section 3 Workforce	WF01 - Recruitment & Retention		4	12
		WF02 - Organisational Structure	Red Flag	4	
		WF03 - Workforce Supervision & Training		4	
	Section 4 IM&T	IMT01 - IT Systems		2	4
		IMT02 - Information Governance		2	
	Section 5 Mobilisation	MB01 - Mobilisation	Red Flag	10	10
Sub-total for Quality					91
Presentation		WF04 – Workforce		4	4
Finance					5

	Total	100
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Section: Clinical & Service Delivery

CSD01: Accessibility

RED FLAG QUESTION 50% MINIMUM SCORE REQUIRED ON THIS QUESTION

Bidders must describe how they will deliver the service to ensure it is accessible to patients at each site.

Response should include but not be limited to:

- Description of booking appointment system, including; face to face, telephone, e-mail, fax and options for on-line booking facilities
- Consultation methods offered to patients including telephone
- The number of GP and nurse appointments, per 1,000 registered patients per week offered including consultation times and what will be delivered from each site
- Compliance with service access requirements
- Processes for advising patients on services available to them; including Out of Hours and emergency provision

Word Count: 2000 words

Evaluators: See Panel list

CSD02: Equity of Service & Equality

Bidders must describe how they will deliver the service which will address the needs of the local population taking into consideration the local varying demographics to ensure provision of a locally sensitive service.

Response should make reference to the following key areas:

- A consideration of the Equity of Access requirements as outlined in Part 1 Schedule 2 of the Contract
- Compliance with the Public Sector Equality Duty Act 2010, describing your experience of working with a population of patients with diverse needs including sensitivities to age, gender, ethnicity, religion, sexuality and disability
- Elimination of unlawful discrimination, harassment, victimisation and other conduct prohibited by the Act;
- Advancing equality of opportunity between people who share a protected characteristic* and those who do not; and
- Fostering good relations between people who share a protected characteristic* and those who do not.
- Removing or minimising disadvantages suffered by people due to their protected characteristics*;
- Steps that should be taken to meet the needs of people with certain protected characteristics where these are different from the needs of other people;

- Encouraging people with certain protected characteristics* to participate in public life or in other activities where their participation is disproportionately low.

The following links provide additional information on the Public Sector Equality Duty Act 2010:

<http://www.equalityhumanrights.com/advice-and-guidance/public-sector-equality-duty/introduction-to-the-equality-duty/>

http://www.equalityhumanrights.com/uploaded_files/EqualityAct/PSED/essential_guide_update.doc

Word Count: 2000 words
Evaluators: See Panel list

CSD03: Patient Involvement & Engagement

Bidders must describe the process of how they will engage and involve patients and carers in the development and delivery of this service.

Response should include but not be limited to:

- Identify key patient groups;
- Engagement with the local community to identify needs (including hard to reach groups);
- Undertaking continuous service user engagement;
- Implementing service development resulting from engagement and consultation exercises;
- Sharing information and decisions;
- Ensuring practice strategies dovetail with NHS England's strategy for patient engagement.

Word Count: 1000 words
Evaluators: See Panel list

CSD04: Partnership Working

Bidders must describe how they will ensure effective and relevant partnership working with all stakeholders:

Response should include the following groups:

- Patients/service users;
- NHS Sunderland CCG;
- NHS England Cumbria and the North East;
- LMC;
- CQC;

- Local Practices;
- Third Sector Organisations;
- Other primary care providers;
- Local hospitals and community service providers.
- Locality Integrated Multi-Disciplinary Team supporting the transformation of Out of Hospital Care and the city wide Recovery at Home Service.
- Local GP Federation

Word Count: 1000 words
Evaluators: See Panel list

CSD05: Clinical Governance

RED FLAG QUESTION 50% MINIMUM SCORE REQUIRED ON THIS QUESTION

Bidders must describe how Clinical Governance is core to the service.

Response should include but not be limited to an explanation and evidence of:

- Management of clinical risk including treating patients at home and medical emergencies;
- Patient safety and staff safety (e.g. incident reporting, significant event reporting etc.);
- Reporting of adverse incidents;
- Management of patient complaints;
- System that facilitates learning from experience and action planning, including improvement of quality of care to patients;
- Safeguarding Adults/Children procedure;
- Implementation of evidence based guidelines;
- Implementation of patient safety alerts.

Word count: 2000 words
Evaluators: See Panel list

CSD06: Health Promotion & Disease Prevention

Bidders must describe their strategy to deliver a service that focuses on health promotion and disease prevention.

Response should include but not be limited to an explanation of:

- Identification of key public health challenges within the locality
- Identification of at-risk patients for long term conditions

Word count: 1000 words

Evaluators: See Panel list

CSD07: Medicines Management

Bidders must describe the systems and processes that they will have in place to ensure safe and effective prescribing and medicines management.

Response should include but not be limited to an explanation of:

- Monitoring of prescribing, including; accuracy, output and prescriber development needs
- Review of repeat prescriptions
- How the bidder will ensure systems and processes are compliant with legislation and national and local guidelines and best practice including reporting mechanisms for medication errors, safe and secure handling of medicines, controlled drugs legislative requirements

Word count: 1000 words

Evaluators: See Panel list

CSD08: Referrals

Bidders must describe the systems and processes they will have in place to:

- Monitor referrals in respect of clinical appropriateness
- Identify and manage referrer training and development needs
- Monitor and manage attendances at local emergency and urgent care services
- Work in partnership with relevant stakeholders to reduce unnecessary admissions for patients with long-term conditions

Word count: 1000 words

Evaluators: See Panel list

CSD09: Business Continuity

Bidders must describe their approach to disaster recovery and business continuity as a provider and part of the whole pathway. Bidders may evidence some of this with business continuity plans. Policies should **not** be submitted as supporting documents for this question.

Response should include as a minimum but not be limited to:

- Fire or theft;
- Severe weather;
- Staff shortage (including each staff group);
- Peaks in demand of service;
- Surge preparedness (peaks in service); and
- Major Incidents.
- Power failure

Word Count: 1000 words

Evaluators: See Panel list

Section: Performance Management

PF01: Performance

Bidders must describe their approach to monitoring performance.

Response should include but not be limited to:

- Key performance indicators;
- Quality & Outcomes Framework;
- Indicators as stated in the Primary Care Web Tool;
- Directed Enhanced Services;
- Approach taken to determine and understand issues and indicated performance failure.

Word Count: 1000 words

Evaluators: See Panel list

PF02: Continuous Improvement

Bidders must describe the mechanisms that they will use to ensure continuous service improvement

Response should include but not be limited to:

- Clinical audit plans;
- Plans to improve Quality & Outcomes Framework achievement;
- How they will evidence compliance with evidence-based guidelines (i.e. NICE);
- How they will improve access to services; and

- How they will improve performance in indicators as stated in Primary Care Web Tool.

Word Count: 1000 words
Evaluators: See Panel list

PF03: Monitoring

Bidders must outline how they will prepare for quarterly and annual monitoring requirements.

Response should include but not be limited to:

- The mechanisms by which they will internally analyse performance to outline areas for improvement in order to meet the deadlines for submission of data to Commissioners;
- How they will gather information i.e. incidents, complaints and concerns, for discussion at contract meetings; and
- How they will feed back to Commissioners on lessons learned from incidents, complaints and concerns through the use of thematic analysis.

Word Count: 1000 words
Evaluators: See Panel list

Section: Workforce

WF01: Recruitment & Retention

Bidders must outline their approach to recruitment and retention and sustainability of the workforce requirements for this service.

Response should include as a minimum but not be limited to:

- Recruitment strategy;
- Job descriptions including role, function, experience and qualification level required for each role;
- Induction process;
- Locums and agency staffing utilisation plans;
- Development of leadership capability/attributes;
- Monitoring of professional credibility of individuals and the service;
- Compliance with current legislation.

Word Count: 2000 words
Evaluators: See Panel list

WF02: Organisational Structure

RED FLAG QUESTION 50% MINIMUM SCORE REQUIRED ON THIS QUESTION

Bidders must outline their proposed full organisational structure for delivery of this service.

Response should include as a minimum but not be limited to:

- Organisation chart with clear lines of accountability and leadership;
- A schedule that details staffing levels at each site and ways in which clinics will operate at each site;
- Skill set profile including evidence that clinical roles meet GMC and NMC requirements;
- Planned working patterns to show staff complement during contract hours;
- Staff ratio to manage demand;
- Use of agency staff if applicable;
- Consideration of skills and competencies of the entire workforce;
- Clear rationale for the selected skill mix to be used for the service;
- Evidence of linking service delivery with the service requirements and staffing allocation.

Responses in this section will be cross referenced with the staffing model submitted in the FMT to ensure consistency.

Word Count: 2000 words plus attachments

Evaluators: See Panel list

WF03: Workforce Supervision & Training

Bidders must outline their approach to clinical and non-clinical supervision and training for delivery of this service.

Response should include but not be limited to:

- Demonstration of clear appropriate professional leadership;
- Continuous development/training and support requirements;
- Supervision training;
- Staff appraisal;
- Supervision of locum/agency staffing.

Word Count: 1000 words
Evaluators: See Panel list

WF04: Presentation section - Workforce

Bidders are to give a 15 minute presentation that will clearly identify how they propose to operate the delivery of services from a staff workforce perspective, including **but not limited to:**

- Can you describe how you are going to deliver the working pattern to ensure the needs of the service are met from 1 October 2016;
- Can you describe how the practice will manage patient demand, given the ratio of staff to patients from 1 October 2016;
- Can you describe the skill mix you are proposing to have in place and how you will deliver the proposed skill mix profile from 1 October 2016;
- Identify potential strengths and weaknesses of workforce to deliver service and proposed solution if required

Further information will be provided to bidders who have been successful at stage 3 in respect to dates, times, venue and attendance requirements

Section IM&T [questions need to be reviewed in line with service requirements]

IMT01 – IT Systems

Bidders must identify the IT systems the provider will use to deliver and manage the service as part of their proposal (clinical and administrative). In addition bidders must describe how these systems will support management of Primary Care as detailed in the Service Specification.

Your response should include but not be limited to the details of:

- IT systems;
- Directory of Service and Capacity Management Services Integration;
- Receiving and processing referrals;
- Use of the NHS Number as the key identifier for patients;
- Appointment bookings/scheduling etc.;
- Clinical coding;
- System integration with SCR and PDS;
- Mobile GP access to clinical records for home visits;
- Onward referrals;
- Communication with GPs on the close of an episode; and
- Activity information

- System back-up and security
- Disaster recovery and business continuity plans
- Expected system availability
- Service level agreements to meet availability
- Desktop and laptop data loss prevention

IMT02: Information Governance

With reference to the tender documentation please describe your approach to Information Governance, confidentiality and data protection assurance.

Response should include (but not be limited to) the details of:

- IG Toolkit score or level expected to achieve with plans and timescales to achieve:
 - Policies and procedures;
 - Strategic development;
 - Operational management;
 - Standards and good practice;
 - Statutory obligations;
 - Confidentiality and Data Protection Assurance;
 - Information Security;
 - Information Risk Management;
 - Records Management; and
 - Information Incident Management.

MBO1 - Mobilisation

RED FLAG QUESTION 50% MINIMUM SCORE REQUIRED ON THIS QUESTION

Bidders are to provide a suitable and appropriate mobilisation/implementation plan. The plan must detail the key tasks and milestones on a week by week basis (for pre-mobilisation) the bidder will complete during and post mobilisation period to deliver the services in accordance with the contract.

The plan must set out tasks, deadlines and implementation responsibilities and be segmented into the work-streams, including:

- Planning /implementation and Governance arrangements across pathway;
- Workforce (including TUPE);
- Finance;
- IM&T;
- Facilities management arrangement for premises;
- Equipment;
- Communications and relationships; including how they will work with the current provider to ensure a smooth transition of services
- Stakeholder engagement;

- Patient and Public engagement;
- Risk management and contingencies;
- Process and service readiness tests;
- Outputs/outcomes monitoring.

Word Count: 1000 words, plus allowed attachments
Evaluators: See Panel list

16 June 2016

Name
Address

Pemberton House

Colima Avenue
Sunderland
SR5 3XB

Tel: (0191) 5128484
www.sunderlandccg.nhs.uk

Dear Patient

IntraHealth at Barmston Medical Centre, Westerhope Road, Washington, NE38 8JF

We are writing to you as you are a registered patient with the GP Practice provided by IntraHealth Limited at Barmston Medical Centre, to update you on important information in relation to your practice.

The formal process to secure a long term provider of primary medical services to the Encompass, Barmston and Pennywell practices has now concluded. I am pleased to inform you that the new provider of the services is Sunderland GP Alliance Limited. The contract was awarded as a 9 year contract with the option to extend for a further 2 years.

Sunderland GP Alliance Limited is a Sunderland-based group of 46 GP practices who have come together to work in collaboration with their member practices and deliver healthcare to the people of Sunderland.

There will be **no gap in provision of services** from your current GP practice provider to the new one and you will **not need to take any action** as you will continue to be registered at the practice.

From 01 October 2016, you will be able to access services at the following sites;

The Galleries Health Centre, Washington, NE38 7NQ
Barmston Medical Centre, Westerhope Road, Washington, NE38 8JF
Pennywell Medical Centre, Portsmouth Road, Pennywell, Sunderland, SR4 9AS.

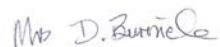
Whilst we appreciate there may be staff changes, we will work closely with Sunderland GP Alliance Limited and your current practice provider (IntraHealth Limited) to ensure as smooth a transition as possible both for staff as well as patients.

NHS Sunderland Clinical Commissioning Group would like to thank you for your patience and understanding throughout the uncertainties of the past year and hope you will welcome the new provider of your GP practice from 01 October 2016.

Healthwatch Sunderland is the statutory independent consumer champion for users of health and social care services. It listens to, advises and speaks up on behalf of consumers. If you have any concerns or would like to discuss anything in respect of GP services with

Healthwatch, please call 0191 5147145 or access the Healthwatch website <http://www.healthwatchsunderland.com>.

Yours sincerely

A handwritten signature in dark ink, appearing to read 'Mrs D. Burnicle'.

Debbie Burnicle
Deputy Chief Officer
Sunderland Clinical Commissioning Group

Item 7

SCRUTINY COORDINATING COMMITTEE

25 JUNE 2016

COMPLAINTS AND FEEDBACK

REPORT OF THE HEAD OF LAW AND GOVERNANCE

1. PURPOSE OF THE REPORT

- 1.1 To provide the Committee with information regarding complaints and feedback received by the council.
- 1.2 Rhiannon Hood, Assistant Head of Law and Governance, will be in attendance at the meeting to provide Members with information and progress.

2. BACKGROUND

- 2.1 The council is committed to listening to those who use its services, and learning from complaints and feedback in order to improve those services.
- 2.3 This report presents an overview across the full range of complaints and feedback received by the council for the council year 2015 - 16.
- 2.2 In view of the importance to the council of ensuring an appropriate response is provided to all aspects of customer dissatisfaction it is timely for the Committee to receive an overview of complaints received across all council services.

3. CURRENT POSITION

- 3.1 The Annual Complaints and Feedback Report for 2014-15 was presented in January 2016, when Members asked to be provided with regular reports so they can monitor themes and trends in complaints and feedback in a timely manner. It was agreed that arrangements for annual reporting be altered to facilitate this and that in future the Annual Report will be presented to the June meeting of the Scrutiny Coordinating Committee. Following presentation of the Annual Report, further quarterly reports will be brought to Scrutiny Coordinating Committee to ensure Members are provided with the most current monitoring information available.
- 3.2 This is the first Annual Report to be presented to a June meeting of the Scrutiny Coordinating Committee.

4 RECOMMENDATION

- 4.1 The Scrutiny Committee is recommended to consider and comment on the information provided regarding complaints and feedback received.

Contact Officer: Rhiannon Hood, Assistant Head of Law and Governance
0191 561 1005
Rhiannon.hood@sunderland.gov.uk

COMMERCIAL DEVELOPMENT DIRECTORATE

LAW & GOVERNANCE

Annual Report

Complaints & Feedback Team

For the period 2015 - 2016

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Introduction

The complaint function for the council is provided by a single team based within Commercial Development Directorate. The Complaint & Feedback Team, made up of six staff, sits within the Law & Governance function of the council.

This report is the fourth joint report of the Team and covers all complaints and representations made to the council under the three processes: Health and Social Care Complaints Procedure, the Children's Services Complaints Procedure and the Corporate Complaints Procedure. It covers the period April 2015 – March 2016.

We publish this report to keep people informed about the procedures and the sort of complaints and compliments we receive. We also publish the report to inform people about how the process works and to report on how we use the information we get from complaints and other comments to make improvements to services.

Our aim is to resolve complaints as quickly as possible, and to people's satisfaction wherever this is possible. However, council staff are increasingly involved in difficult areas of work and at times people do not welcome our involvement in their lives. There are also situations in which we cannot provide people with the resolution they want. Sometimes the council may simply get things wrong. In light of this it is therefore inevitable that we receive complaints. Like all other organisations, we would always want to get things 'right first time'. When this does not happen we want to feel that we have an accessible, open and fair way of dealing with peoples' concerns.

One important aspect of complaints is making sure that any lessons learned are transferred into service planning and from there into service improvements. Increasingly, we are able to identify where improvements have occurred entirely or partly as a result of complaints. The report also outlines how we use our complaints to identify and implement service improvements across a range of our activities.

We also provide information on the compliments that have been received by the council. Complimentary comments are not only good for staff morale and motivation, they also tell us a lot about what people like best about the service they get and what works well for them. We can use this information to build more of those features into our services and so improve the levels of satisfaction of our customers.

We are always pleased to hear comments about any aspect of our work, including the format and presentation of this report. We hope it is interesting and informative and thank you for taking the time to read it.

PART ONE

THE COMPLAINTS AND FEEDBACK TEAM

Management and Operation of the System

The Complaints & Feedback Team is responsible for the co-ordination and management of the three main complaints processes within the council:

- Adult's Health & Social Care Statutory Process
- Children's Statutory Process
- Corporate Process

The team maintains the council's log, recording all investigations. It monitors quality and speed of performance in responding to complaints, and makes sure that, lessons learned from feedback and complaints investigations are systematically captured and analysed with the findings reported to Directorates and senior management.

The Assistant Head, Law & Governance Manager has overall responsibility for the progressing of any complaint and can intervene at any stage including determining in exceptional cases that the complaint be referred immediately to her for investigation.

Local Authorities are required to designate an officer to assist in the co-ordination of all aspects of statutory social care complaints. The Complaints Manager – Adult Services and the Complaints Manager – Children's Services undertake these roles in Sunderland. These managers have responsibility for the implementation and operation of the statutory complaints procedure on a day to day basis.

Whilst officers within the team have traditionally dealt with complaints within a single area of expertise, the combined arrangements give us the ability to expand officers' knowledge base and deal with complaints for all service areas. Not only does this enhance officers' capability, the single team also allows us to provide a better service ensuring someone is always available to speak to complainants in person or on the telephone.

Working with Partners

- **Northern Regional Complaint Managers Group**

Sunderland Council is an active member of the Northern Regional Complaints Officers Group. The aim of the regional group, which meets quarterly, is to provide a forum, where peer professionals can discuss and learn about regional and national issues in respect of statutory adult and children's complaints.

- **Joint Health and Social Care Networking Group**

Links have also been made between Adult Services and Health colleagues to ensure that joint working can be readily progressed. A joint protocol has been drawn up to formalise this arrangement. This protocol covers the handling of complaints that impact on more than one Health and Social Care organisation in the South of Tyne area. The group meets on an ad hoc basis to help support the protocol, develop working relations and to share good practice in respect of complaints made about adult health and social care.

- **Safeguarding Boards**

The Adult Services and Childrens Services Complaint Managers also work in close liaison with the Sunderland Safeguarding Adults and Childrens Boards which involves multi-agency partnership working with colleagues in Police, Probation, Health, Education, and voluntary bodies.

Publicity

The Health and Social Care Complaints Procedure is publicised in all adult services information for service users. Our leaflet "*Something to say about Adult Social Care*" asks our customers to give their views; let us know when they are pleased with what we have done and also who to contact if they are unhappy and want to make a complaint.

In respect of the statutory Children's Complaints Procedure, leaflets are made available to all carers, providers and service users. All Looked After Children and children classed as being in need are informed of their right to make a complaint and are given a copy of the recently updated age specific young person's complaints leaflet at the onset of service provision.

The Corporate Complaints Procedure is publicised on the council's website with appropriate links, including contact information such as web forms and telephone numbers for complaints and compliments.

Accessibility

We promote accessibility to our complaint procedures by ensuring that complaints can be received in a number of ways, including:-

- By approaching staff responsible for the provision of a service
- By contacting the Complaint and Feedback Team by telephone, letter or email
- By completing a web form on the Sunderland.gov.uk web site
- Via Councillors/MPs
- Via Customer Services Advocates working in the Customer Services Network
- Children and young people in need or those who are being Looked After can complete a young person's complaint form
- Through Independent Reviewing Officers as part of the statutory review process
- Through an independent advocacy service
- An accessible pictorial complaint form is available for those with a learning disability.

Advocacy and Special Needs

Adults

Whilst advocacy support is not a statutory requirement of the Adults Health and Social Care Procedure, we do support vulnerable complainants to have advocacy support if they wish. Voiceability, are the lead provider of the Total Voice Sunderland Service, and is contracted by the council to provide independent, individual advocacy support and representation to service users from all client groups including those subject to detention under the Mental Health Act

The take up of official advocacy help is low for adult services complaints, with no complaints recorded this year as having used this service. 1% of complaints were made to the council via a solicitor. However it is significant that 83% of complaints were made by someone other than the service user, usually by a family member or close friend.

Children's

Children and young people, who are looked after, or classed as children in need, have a statutory right to advocacy. We inform children and young people of their right to independent advocacy support to help them make a complaint or representation. Advocacy for children and young people has been commissioned as part of a consortium arrangement with Gateshead, Newcastle, South Tyneside, Hartlepool, Stockton on Tees, Middlesbrough, Darlington, North Tyneside, Redcar & Cleveland Councils from North Yorks Advocacy Service (NYAS).

Requests for Advocacy Support	2015-16	2014-15	2013-14	2012-13
	3	6	17	6

It should be noted that not all advocacy referrals result in formal complaints being submitted as the advocacy service will often aim for informal resolution with the relevant service area in the first instance.

Learning from Complaints

Across all three procedures the team is well aware that resolving a complaint is not the end of the process. It is vital that as a council we learn from complaints and ensure that any mistakes do not recur.

We use information from complaints in a number of ways;

- It helps us provide feedback about the services we commission
- It can influence services and help shape how they are formed in the future
- Intelligence acquired by the council in its work with service providers is collated to identify themes and trends.
- The Complaint & Feedback Team uses this information to promote improvements relating to key issues identified

Processes are in place to ensure that lessons learned from all complaints are used to identify gaps in services, highlight poor practice/procedure or recurrent problems and identify staff training requirements.

Contacts:

For all queries relating to the Adult's Health and Social Care Complaint Procedure

Marie Johnston, Complaints Manager – Adult Services

Complaints & Feedback Team, Civic Centre, Burdon Road, Sunderland, SR2 7DN

Tel: 0191 561 1078

Marie.johnston@sunderland.gov.uk

For all queries relating to the Children's Statutory Complaints Procedure

Karen Taylor, Complaints Manager – Children's Services

Complaints & Feedback Team, Civic Centre, Burdon Road, Sunderland, SR2 7DN

Tel: 0191 561 1941

Karen.taylor@sunderland.gov.uk

For all queries relating to operation of the team, the Corporate Complaints Procedure, any issue in respect of complaints made to the Ombudsman

Rhiannon Hood, Assistant Head: Law & Governance

Civic Centre, Burdon Road, Sunderland, SR2 7DN

Tel: 0191 561 1005

Rhiannon.hood@sunderland.gov.uk

PART TWO

THE HEALTH AND SOCIAL CARE COMPLAINT PROCEDURE

Legislation & Regulations

The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 provides for a single complaints process for all health and local authority **adult social care services** in England.

How the Procedure works

One Stage - Local Resolution by the council

Local resolution is about the council trying to resolve complaints quickly and as close to the source as possible. We acknowledge complaints within three working days and make arrangements for an appropriate manager to consider the issues and provide a response to the complainant.

Local Government Ombudsman

Most complaints can be dealt with and resolved satisfactorily at local resolution. However, if this is not the case, any unresolved concerns can be referred to the Local Government Ombudsman.

Complaints about a Commissioned Service

The council recognises its responsibility as a commissioner of services to the public and we want to hear people's comments and feedback about the service they receive, whether it is positive or negative. The regulations effectively allow for the council to investigate complaints about the services it has commissioned.

Safeguarding Adults Concerns

When dealing with complaints, situations often arise that may indicate issues of potential harm or neglect. These issues are shared with colleagues from the Safeguarding Adults Team. Once the elements relating to safeguarding are concluded, any outstanding issues of complaint can then be addressed through the complaints process.

General Issues – Adult Services

During this period 13,403 requests for support from new customers were actioned. This number does not include those already in receipt of a service and so does not truly reflect the number of contacts undertaken on a daily basis with service users.

Given the high number of contacts, adult services received a total of 87 statutory complaints. The figure is down on last year which is a continuing trend.

Below is a table showing complaint numbers since 2010.

Year	Number of Statutory Adult complaints
2015-16	87
2014-15	115
2013-14	133
2012-13	176
2011-12	171
2010-11	125

It is important to note that the complaints process is not simply about numbers received. It is about effectively resolving concerns, learning lessons from those concerns and taking action to ensure the same complaints do not re-occur. The numbers do not reflect the high level of complexity presented with complaints having multiple elements or health involvement which require a greater level of liaison on behalf of the complainant

The continuing drop in figures could be attributed to the fact that staff do continue to successfully resolve complaints on an informal basis. Nevertheless, we must ensure that complaints are properly recorded so that themes and trends can be identified.

Timescales/Performance Measures

We aim to acknowledge complaints within three working days of receipt. However, there will be some times where this is not possible and for the period 2015-16 we achieved a rate of 85% which is a drop from previous years. The regulations do not have prescriptive timescales; however we have set our own internal performance measures for adult statutory complaints. We aim to resolve complaints quickly and as close to the source of the complaint as possible. This is supported by regulations which highlight that complaints can be considered to be immediately resolved if they are done so within two working days.

For the period 2015-16 we recorded 13% of complaints as immediately resolved, which is the same as last year.

51% of all complaints received were responded to within 15 working days, significantly short of our own internal performance target of 80%. This is a disappointing drop from last year's 60% which had followed on from a period of steady improvement with 54% in 2013-14 and 49% in 2012-13.

Sometimes it is not possible to offer a response to a complaint within 15 working days for a number of reasons. In these cases we aim to offer a response within 30 working days or in exceptional cases within 90 working days. In all cases the investigation into the complaint will be proportionate to the circumstances of the case, taking into account the risk, seriousness, complexity or sensitivity of events and cost efficiency.

Formal Investigations

Whilst under the new procedure there are no defined stages, there are still those complaints that are more serious or complex, which warrant more formal investigation. Five formal investigations were undertaken in 2015-16 which equates to 6% of all complaints received during this period. This compares to eight formal investigations undertaken the previous year.

Wherever possible the council operates an internal investigation procedure in respect of adult social care complaints. However, during this period this in-house protocol has become increasingly unsustainable. This has been due in part to workload capacity issues of the managers tasked to carry out investigations and also the increasingly serious and complex nature of complaints received. This had led us during this period to appoint independent investigators from outside the Local Authority.

Three investigations were undertaken by independent Investigating Officers and the costs for these amounted to £8884.08.

PART THREE

CHILDREN'S SERVICES STATUTORY COMPLAINTS PROCEDURE

Legislation & Regulations

Statutory regulations were introduced by the Department for Education in 2006 entitled '*Getting the Best from Complaints – Social Care Complaints and Representations Procedure for Children and Young People*' to deal with complaints and representations made to Children's Services by children and young people. These regulations replaced the 1991 Representations Procedure (Children) in order to reflect the changes made by the Adoption and Children Act 2002 and the Health and Social Care Act 2003.

The regulations and guidance cover complaints and representations made by children and young people. They also apply to parents, foster carers and other adults making a complaint. These regulations aim to ensure that, regardless of the complexity of their complaint, vulnerable children and young people get the help they need at the right time and that lessons learned from such complaints lead to an improvement in service delivery. These complaints are usually referred to as 'statutory complaints'.

Separate procedures exist in relation to most school or academy complaints. Parents/carers must pursue these through the school or academy's published complaints procedure.

How the Procedure works

In accordance with DfE statutory requirements, Children's Services has adopted a three stage statutory complaints procedure that seeks to resolve dissatisfaction in respect of social care complaints. Any other non social care but Children's Services related complaint is dealt with in accordance with the two stage Corporate Complaints procedure.

Stage One

The emphasis of the first stage of the statutory procedure is on local problem solving. Most complaints should be resolved at this stage and are usually addressed by operational managers who hold direct responsibility for the service about which the complaint has been made.

At this stage complaints are acknowledged within three working days and resolved and responded to within 10 working days. Where necessary, and with the agreement of the complainant, this period can be extended by a further 10 working days. If the local authority fails to achieve this timescale the complainant has the right to request immediate progression to stage two of the complaints procedure.

Stage Two

If a complainant remains dissatisfied with the response made at stage one, or if there has been a delay, they can request progression to stage two of the complaints procedure. A stage two complaint investigation can be undertaken by a service manager who has had no prior involvement with the case or the complaint or by an external investigating officer. Following previous resource issues with the use of service managers as in house investigators, stage two investigators are now commissioned externally.

There is a requirement to provide an Independent Person to oversee all stage two complaint investigations. Again these are commissioned externally.

Stage two complaint investigations must be completed within 25 working days of an Investigating Officer agreeing the elements of complaint to be investigated with the complainant, although an extension of up to 65 working days can be requested if necessary. The Head of Safeguarding adjudicates and responds to the outcome and recommendations of the investigation, which may include the offer of redress or compensation, in conjunction with the Complaints Manager.

Stage Three

The final stage of the complaints procedure is an Independent Review Panel. This is an opportunity for the complainant to have any areas of the complaint that remain unresolved heard before an Independent Panel, which comprises an independent chair and two independent persons with knowledge of social care policies and procedure. Also present will be the Stage two Investigating Officer and Independent Person, the Head of Safeguarding, the Complaints Manager along with the complainant(s) and chosen representatives. A panel must take place within 30 working days of receiving the request from the complainant.

After hearing the complaint and representations from panel attendees, the Panel will make their recommendations and, together with the Complaints Manager, will produce a panel report with their recommendations which again may include redress or compensation. The panel findings are then responded to by the Director of Children's Services, in consultation with the Head of Safeguarding and the Complaints Manager.

If a complainant still remains dissatisfied following a Stage Three Review Panel hearing they can request a further investigation by the Local Government Ombudsman.

Complaint outcomes

Stage One

In 2015-16 there were 176 stage one complaints. This is a drop of 22% from the previous year and reflects the work being undertaken to improve the quality of responses to complaints made to Children's Services. We hope to see this continuing pattern of improvement continue over the coming year and will report on this in next year's report. The Complaints Manager will continue to work with the service to ensure that the work done to date in improving responses is embedded and built on, to ensure continuation of this trend in improvement.

The table below shows how this compares to previous years:

Year	Number of Stage One Complaints	Number resolved at Stage One		Number made by children or young people	
2015-16	176	153	87%	3	2%
2014-15	225	202	90%	9	4%
2013-14	170	163	96%	14	8%
2012-13	117	112	96%	7	6%
2011-12	133	119	89%	19	14%
2010-11	127	118	93%	12	9%
2009-10	122	101	83%	22	18%

Of these 176 complaints 87% were resolved at stage one. This is a drop on previous years but we hope to improve on this in the coming year as part of the on-going work to improve the quality of stage one responses.

Only 59 (34%) of these 176 complaints were responded to within the statutory timescale of 10 working days.

Stage Two

In 2015-16 there were 23 requests for a Stage Two complaint investigation which is the same as last year. Whilst there has been no increase in the numbers at Stage Two it should be noted that this remains a significantly high level.

Whilst we have witnessed a reduction in the overall rate of complaints made to Children's Services it is concerning that the number of complaints progressing to Stage Two has remained high and is the same as the previous year. This is not entirely surprising following the publication of the negative Ofsted Report; the significant changes that have needed to be undertaken within Children's Services in order to improve services; and that the quality of the stage one responses have not always been adequate. In the coming year we hope to see the improvements that have been put in place within Children's Services having an impact on the numbers of complaints progressing to further stages.

	Number of Stage 2 Investigations	% increase/decrease
2015-16	23	0%
2014-15	23	229%
2013-14	7	40%
2012-13	5	-70%
2011-12	14	40%
2010-11	10	

The cost of commissioning independent Investigating Officers and Independent Persons for Stage Two complaints in 2015-16 has risen to £75,073.43. This figure does not include a number of Stage Two complaints that were still ongoing at the end of March 2016. These costs will be included in figures for 2016/17 and as a consequence next year's figures are anticipated to remain high.

This compares to previous years as follows as set out in the table below.

Year	Cost of commissioning independent Investigating Officers and Independent Persons
2015-16	£75,073.43
2014-15	£53,195.36
2013-14	£17,480.26
2012-13	£35,705.91
2011-12	£5,740.89
2010-11	£41,912.41

The Complaints Manager-Children's Services has been working with the Council's Commissioning Service to look at how best the procurement of IO and IPs can be provided in future, and in line with current regulations.

The reason for the decrease in 2011-12 was as a result of an emphasis on the use of internal investigating officers rather than those appointed externally on a spot purchase basis. Unfortunately this was not sustainable due to workload capacity issues of the managers tasked to carry out investigations, concerns regarding the quality of some of the reports produced and concerns voiced by complainants alleging bias.

Stage Three

In 2015-16 there were twelve complaints which progressed to a Stage 3 review Panel an unprecedented increase on the previous year of 1110%. These cost a total of £ 20,182.01 to administer (cost of Panel Chair, Panel Members and other attendance fees). This compares to £2,183.35 last year.

The rise in the number of Stage 3 Review Panels is not surprising given the number of complaints that progressed to Stage 2 over the course of the past two years.

Year	Number of Stage 3 Review Panels
2015-16	12
2014-15	1
2013-14	2
2012-13	3
2011-12	3
2010-11	2

Complaints about a Commissioned Service

Stage One complaints concerning independent service providers commissioned by Children's Services are investigated by the relevant independent provider. Stage Two and Stage Three complaints are managed by the Children's Services Complaints Manager. The Complaints Manager informs the relevant Head of Service if any complaint about a commissioned service is received and consideration is given to sharing information with other appropriate bodies, such as Ofsted for concerns relating to registration issues and so on.

The Complaints Manager will consider if information received through a complaint should more appropriately be investigated by the Sunderland Safeguarding Children Board; or if a complaint should actually be part of a service area appeals process.

PART FOUR

CORPORATE SERVICES COMPLAINT PROCEDURE

We try to make sure that all of the complaints we get are looked into under recognised and published procedures. The Corporate Complaints Procedure covers all other eligible complaints made to the council that fall outside the statutory Adults or Children's social care procedures.

Experience indicates that we should adopt a flexible approach based on the scale and complexity of the complaint, and aim to settle all areas of dissatisfaction quickly, comprehensively and smoothly. This is also the approach the Ombudsman wishes local authorities to take.

In 2014 the council changed the way it received corporate complaints, with all new issues been channeled through the Customer Services Network. Refresher training was issued to advocates in how to identify a complaint. Consequently complaint numbers increased dramatically with matters previously simply addressed as a request for service now being correctly identified and dealt with as a complaint. This improved way of handling complaints provides the information the council needs to identify the underlying issues where there are areas of customer dissatisfaction and helps the council address the cause rather than the effect.

How the Corporate Procedure works

Stage One

These are dealt with by the Directorate. Most issues are straightforward and resolved promptly but where the complexity of the matter dictates an investigation is required, our aim is to address the complaint comprehensively at this stage through investigation by a trained complaints investigator within the service, whose role is to investigate and prepare a response.

Any investigation should be completed within 15 working days. If further time is required to prepare a satisfactory reply, the customer will be kept informed. All responses will advise the complainant that if he or she remains dissatisfied, they can refer their complaint back to the Complaints and Feedback Team for review.

In exceptional circumstances the Complaints and Feedback Team Manager may decide to remove the complaint investigation from the directorate and arrange for it to be undertaken by a member of the Complaints and Feedback team. Generally however if the complaint relates to more than one service area a suitable lead complaints investigator will be appointed to allow for a coordinated and comprehensive response. Lead responsibility will be allocated by the Complaints and Feedback Team.

During the year 2015-16 there were 5817 stage one complaints an increase of 30% on the previous year's figure of 4463. However this is the first **full** year's statistics. 2014/15 included over three months of recording using the previous system so the figures are largely comparable.

Year	Stage 1 Corporate Complaints
2015-16	5817
2014-15	4463
2013-14	809
2012-13	854

Stage Two - Review

Where customers remain dissatisfied with the response to their stage one complaint they can request a **review** be undertaken by the Complaint and Feedback Team. On referral the Complaints Team Manager will consider what further action is to be taken. In most cases a review of the complaint is required and the Complaints Team will carry this out.

The aim is to finalise the review within 15 working days. If further time is required, the customer is kept informed. Complainants are advised in the final response that should they remain dissatisfied, they can ask the Ombudsman to look into their complaint

During 2015-16 there were 64 complaints received for review but only 21 were eligible compared to last year's total 32. Of these 5 were upheld, 4 were partially upheld, 11 were not upheld and 1 was withdrawn.

Themes & Trends

Again, as in previous years, the services reaching all residents receive the highest volume of complaints (for example refuse and streetscene). However these complaints are normally resolved immediately and rarely escalate to the review stage or to the Ombudsman. In this period, one complaint, in respect of the conditions of a local park, did escalate to the review stage. Nonetheless only one element of this complaint was upheld.

Complaints involving Planning are generally complex and technical, and are not normally suited to an informal resolution and often escalate to the Ombudsman. An external investigator, with a planning background, is frequently used to assist with these types of complaints.

Multi Service complaints (covering two or more service areas) are continuously monitored to ensure all elements of the complaint are addressed.

PART FIVE

COMPLAINTS MADE TO THE OMBUDSMAN

Introduction

The Local Government Ombudsman has a statutory responsibility for investigating complaints of maladministration about local councils. The Ombudsman will usually only consider a complaint after it has been through the council's complaints procedure and the customer remains unhappy.

Dissatisfied complainants can ask the Ombudsman to investigate further, and the Ombudsman's procedures will apply. While an Ombudsman can investigate complaints about how the council has done something, they cannot normally question what a council has done simply because someone does not agree with it.

The Picture in 2015-16

The Ombudsman writes to council's annually to feed back on their performance in dealing with complaints that the Ombudsman has received about them. The aim of the letter is to provide the council with information to help it improve complaint handling, and to inform the improvement of local services for the public.

While the annual letter is generally received in June, at the time of this report the Ombudsman's letter has not been received by the council. The Complaints Manager will ensure that information in respect of the Ombudsman's letter is provided to the next available scrutiny meeting following receipt of it.

PART SIX - COMPLIMENTS

Compliments tell us what people like best about the services they receive. They also allow us to use this information to build those features into our services where possible and this helps us to continually improve levels of customer satisfaction. Receiving compliments is also good for staff morale and motivation. Compliments are now logged centrally through the Complaints and Feedback Team.

Statutory Adult Services

30 compliments were made about statutory Adult Services in 2015-16 which is a drop from last year's figure of 51.

A big thank you for everything you have done for my mam we could not have wished for better.

Older Persons Team

May I say that it doesn't matter what department I deal with at Sunderland city Council I always get great support and assistance.

Adult Services

Both workers were very helpful to me and my mother. One worker even rang me on her day off. Both workers were organised and calm ensuring the right services were in place for her.

Occupational Therapy Service

Statutory Children's Services

23 compliments were made about statutory Children's Services in 2015-16. This compares to 37 compliments made in 2014-15.

A compliment from a local school thanking staff for all of the great work they had done on a case.

Looked After Service

The home was class and the best place he has ever lived.

Children's Home

You have always gone above your role and are committed and dedicated to your profession.

Child Protection Team

Corporate Complaints

574 compliments were made about the non-statutory services during 2015-16 compared to 368 the previous year.

'.....was extremely helpful in his willingness.....pro-activeness (and that of you Planning Department as a whole) is a positive and refreshing approach to the planning process.....'

Development Control

I would like to thank you, your team and everyone involved in the process. We are grateful – and of course, delighted with our new space!

Property Services

'Customer would like to thank blue refuse crew - she is an elderly lady and was confused with the days for her collection with the Christmas holidays. Customer brought it back in as she thought this had been missed and the refuse crew have kindly come onto the property and emptied it then put it back. Customer is very grateful for this and would like to say thanks'

Refuse

PART SEVEN - STATISTICAL INFORMATION

Table 1 – All complaints received by monthly breakdown

Month	Statutory Adult	Statutory Children (all stages)	Corporate (all stages)
Apr	8	10	758
May	9	12	478
Jun	6	20	585
Jul	7	20	477
Aug	10	16	490
Sep	8	13	604
Oct	9	10	520
Nov	6	18	446
Dec	5	20	416
Jan	7	13	386
Feb	4	12	379
Mar	9	12	351
Total	88	176	5890

Table 2 – How we received complaints

	Statutory Adult	Statutory Children (St 1 only)	Corporate (all stages)	Total
Email	23	37	119	3%
Face to Face	3	3	6	
Letter / Complaints Form	19	15	12	
Telephone	28	119	-	2%
Accessible Form	1	-	-	
Customer Service Network	9	1	5115	83%
Online Form	5	1	637	10%
Fax		-	1	
	88	176	5890	

Table 3 – Outcome of statutory complaints

	Statutory Adult	Statutory Children (St 2's only – of 110 elements of complaint)
Upheld	20	27
Partially Upheld	15	24
Not Upheld	19	23
Not Eligible	8	1
Other	15	1
Unsubstantiated	-	1
Withdrawn	4	22
On-going	7	11
	88	110

Compensation Payments and Write Offs made during the period 2015-16

Date of Payment	Service Area	Costs/Value Of Works	Reason for payment/Works
Total Adult Services		£ nil	
Total Children's Services		£22,550.00	
01.04.15	Looked After Children	£3,500	Failure to pursue an updated assessment of the birth mother's parenting capacity to consider the potential for rehabilitation of the young person back to their care.
13.05.15	Multi-agency Safeguarding Hub	£500	Delays in the assessment process and not keeping the complainant informed.
29.09.15	Multi-agency Safeguarding Hub	£500	Failings in the way restrictions in contact were imposed
07.10.15	Multi-agency Safeguarding Hub	£3,000	Failure to carry out assessments and upset and distress caused.
14.01.16	Child Protection Team - Washington	£10,200	Procedures were not fully followed with regard to the child protection process. The compensation also recognised the delay experienced which may have also contributed to additional court costs.
14.01.16	Looked After Children	£5,000	Failures in the way a child protection matter was handled, which caused unnecessary distress, uncertainty and upset.
31.03.16	Multi-agency Safeguarding Hub	£350	Delays on the part of the Local Authority resulted in the complainant losing out on contact with their grandchildren, in the way they had done previously.
Total Corporate Complaints		£104,612.09	
Apr 2015	Council Tax	£57.15	50% refund following repayment of full amount into a joint account
Apr 2015	Planning	£200	Delay in notifying customer of decision that enforcement action would not be taken against their neighbour
June 2015	Leisure	£50	Customer misinformed re special offer – general poor communications and lapses in standards
June 2015	Planning	£500	Failure to deal properly with an application for prior approval for complainant's extension
Nov 2015	Planning	£1,250	The impact on the neighbours of the council failing to deal properly with the above application
Nov 2015	Planning	£150	Delay in enforcing a planning condition at a neighbouring development
Staggered Payments throughout 2015/16	Planning	£102,404.94	Incorrect pre-application advice given about the acceptability of a wraparound extension. The complainants did not build exactly what was proposed, nonetheless a subsequent guidance document issued by the Government showed that the council's interpretation of what was permitted development was flawed and part of the completed extension had to be removed and made good.

Statistics – Adults Statutory Health & Social Care Procedure

	Informal Resolution	Formal Investigation
Apr	6	2
May	8	1
Jun	6	
Jul	7	
Aug	10	
Sep	8	
Oct	8	1
Nov	6	
Dec	4	1
Jan	7	
Feb	4	
Mar	9	
	83	5

Adults Table 2. Distribution of complaints by Service Area		
Benefits & Assessments	2	2%
Commissioned Services	8	9%
Customer Property & Affairs Team	2	2%
Hospital SW Team	3	4%
Learning Disabilities Teams	8	9%
Mental Health Teams	5	6%
Occupational Therapy Service	7	8%
Older Person & Physical Disability Teams	45	51%
Safeguarding Adults/DoLs	7	8%
Strategic Commissioning	1	1%
Total	88	100%

Number of complaints responded to within 15 working days [target 80%]	2015-16	2014-15	2013-14	2012-13	2011-12
	51%	60%	54%	49%	74%

Adults Table 3. Distribution by nature of complaint		
Actions/Attitude of staff	31	36%
Assessment Issues	9	10%
Care Practice Issues	2	2%
Communication/not kept informed	5	6%
Delay	12	14%
Equipment Issues	4	4%
Finance	5	6%
Lack of choice	6	7%
Quality Issues	13	14%
Taking wrong action	1	1%
Total	88	100%

Statistics – Children’s Services Statutory Complaints Procedure

Children’s Table 1. How statutory children’s complaints were handled			
	Stage 1	Stage 2	Stage 3
Apr	4	6	-
May	11	1	3
Jun	17	3	-
Jul	18	2	2
Aug	15	1	-
Sep	12	1	-
Oct	7	3	-
Nov	13	5	1
Dec	20	-	-
Jan	12	1	2
Feb	12	-	3
Mar	12	-	1
	153	23	12

Statistics - Corporate Services Complaint Procedure

	Stage 1	% Responded to within timescale	Stage 2 Review Received
Apr	755	46	3
May	467	94	8
Jun	580	94	4
Jul	469	94	6
Aug	485	96	5
Sep	600	94	3
Oct	515	93	5
Nov	441	94	5
Dec	407	90	8
Jan	379	87	7
Feb	373	86	5
Mar	346	59	5
	5817	85.33%	64

Corporate Table 2. Distribution of corporate complaints by Directorate		
Directorate	Stage 1	Stage 2 Review Completed
Commercial and Corporate Services	5181	7
Office of the Chief Executive	414	9
People Services Directorate	171	4
Multi Directorate	32	
Not allocated	92	
Total	5890	20

Appendix 1 Statutory Adult Complaints 2015-16

Details of complaints formally investigated

A complaint in relation to the care provided to a relative in a care establishment. The themes of complaint also included areas of social work intervention and practice, poor communication and a slow response to a request for action.

Outcome – Upheld x 1; Partly Upheld x 1; Not Upheld x 13; No Finding x 6

A complaint in relation to the care provided to a relative whilst in residential care commissioned by the council. The complainant also felt that her relative should not have to pay a contribution towards her care.

Outcome – Partly Upheld x 2; Not Upheld x 2; Unsubstantiated x 2

A complaint about the way in which a safeguarding concern had been handled and an overall poor level of communication.

Outcome – Upheld x 1; Partly Upheld x 2; Not Upheld x 4

A complaint about a lack of consultation and that the council had not been proactive in seeking to take reasonable steps to identify the complainant as next of kin.

Outcome – Not Upheld x 3; Unsubstantiated x 2

A complaint from carers that the council was not providing them with the correct level of support in respect of Direct Payments. They also complained about delay and that the issues had not been dealt with in a timely manner.

Outcome – Upheld x 1; Partly Upheld x 3; Not Upheld x 1

Appendix 2 – SUNDERLAND CARE AND SUPPORT

Introduction

Sunderland Care and Support is a Local Authority Trading Company, formed in December 2013, wholly owned by Sunderland City Council. The company has a board of directors appointed by the Council (as the shareholder of the holding company).

This report covers the period April 2015 – March 2016.

Sunderland Care and Support offers care and support 24/7 to more than 6,000 vulnerable customers across a wide range of services including:-

- Supported Living schemes for people with a Learning disability, Mental Health need, Autism or challenging behaviour.
- Day Services and short break care services.
- Intermediate Care and Reablement services.
- Sunderland Telecare.
- Community Equipment Service and Home Improvement Agency.

Sunderland Care and Support's aim is:

'To be a trusted provider of outstanding social and health care services which help to transform people's lives'

This vision is reflected in the organisations values as follows:-

Primary Value

'The needs of the customer come first'

Aims and Objectives

- **Respect-** We will respect equality, diversity, and the beliefs and dignity of everyone in our diverse community, including our customers, their families and colleagues
- **Compassion-** We will provide the best care, treating customers and family members with sensitivity and empathy.
- **Service and Integrity-** We will adhere to the highest standards of professionalism and personal responsibility, worthy of the trust our customers place in us.
- **Safe, Caring and Personal-** We will provide high quality services that support, protect, care and enable all our customers and treat them as individuals, respecting their physical, emotional and spiritual needs.
- **Teamwork-** We will deliver the best outcomes and highest quality service through the dedicated effort of every team member. Valuing the contributions of all, blending the skills of individual employees in partnership and collaboration.
- **Enjoyable and Rewarding** - We will create a skilled and passionate workforce and place an emphasis on employee satisfaction by developing a culture which offers opportunity for personal and professional growth.

Statutory Complaints

Sunderland Care and Support received a total of **25** statutory complaints for the period April 2015 to March 2016.

Timescales/Performance Measures

The regulations do not have prescriptive timescales; however, we have set our own internal performance measures for adult statutory complaints. We aim to resolve complaints quickly and as close to the source of the complaint as possible. This is supported by regulations which highlight that complaints can be considered to be immediately resolved if they are done so within two working days.

24% of complaints as instantly resolved.

64% of all complaints received were responded to within 15 working days.

Formal Investigations

There was **one** formal investigation undertaken in the period April 2015 to March 2016.

Corporate Complaints

Stage One

During the period April 2015 – March 2016 there were 5817 new stage one complaints.

These complaints were, in the main, made in respect of the Community Equipment Service (CES). The issues were considered sufficiently straightforward enough for resolution to be attempted without a formal investigation being required. The complaints included issues to do with the collection and delivery of equipment.

Stage Two - Review

During the period April 2015 – March 2016 there were 21 complaints which were escalated to the review stage.

Compliments

30 compliments were made about Sunderland Care and Support during the period April 2015 - March 2016. We have included a small selection of the good things people have said about the service below:

Thank you for all the help and support in reaching my goals - I have now secured employment

Outreach Team

Thank you to the lady who helped out along with the paramedics in respect of my father's care - your help was invaluable

Telecare

The lady who attended from Care and Support went above and beyond my expectations in showing support and dignity to the customer

Care and Support

Compensation Payments made during the period 2015-16

No compensation payments were made during the period April 2015 – March 2016.

STATISTICAL INFORMATION – Sunderland Care and Support

Distribution of Statutory Complaints by Service Area		
Reablement Service	2	8%
Day Centres	1	4%
CES	1	4%
Residential Establishments	6	24%
Farmborough Court	6	24%
Home Improvement Agency	1	4%
Telecare	8	32%
Shared Lived	-	-
Total	25	100%

Nature of Statutory Complaints		
Actions of other resident	3	12%
Actions/Attitude of staff	11	44%
Care Practice Issues	1	4%
Delay	4	16%
Finance	-	-
Not kept informed/Communication Issues	-	-
Quality Issues	6	24%
Total	25	100%

Number of complaints responded to within 15 working days [target 80%]	2015-16	2014-15	2013-14
	65%	70%	92%

Outcome of complaints		
Upheld	4	16%
Partially Upheld	11	44%
Not Upheld	2	8%
Other	1	4%
Unsubstantiated	-	-
Withdrawn	-	-
On-going	7	28%
	25	100

Appendix 3 Children's Services Statutory Complaints 2015-16

Stage 2 Complaints and Outcomes of Elements

1	Actions of workers when a child became looked after, inappropriate information and issues around contact arrangements. Outcome: 2 x Partly upheld; 1 x Not upheld
2	Inadequate support during the time their grandson was placed with them. Issues of bias and a lack of contact/information following their grandson moving to live with another relative. Outcome: 4 x Partly upheld; 3 x Not upheld
3	Failure of staff to adhere to procedures/process; issues of bias; poor quality of reports; not kept informed; lack of management oversight Outcome – 2 x Upheld; 2 Partly upheld
4	An incorrect category of abuse had been used when a young person was made subject to a Child Protection Plan. A failure to provide additional support services. There had also been a failure to share information with complainant and appropriate agencies were not invited to the case conference to share information. Outcome: 2 x Upheld ; 2 x Not upheld
5	Not keeping a complainant who had parental responsibility informed about his children. A request for a different worker to be allocated did not happen; and there was some fault in the process of the complaint investigation. Outcome: 4 x Upheld
6	Failed to provide/delayed in completing a core assessment; Delayed in assessing for a new wheelchair one; Failed to support young person's transition into adulthood; Failure to change to the new ECHP or provide a personal budget; Failed to provide a carer's assessment as requested. Outcome – withdrawn
7	That reports submitted to the Foster Placement Panel were inappropriate as the author had been the subject of a previous complaint which had been upheld; Issue in respect of hoe Family Placement Panel came to its decision; Lack of appropriate support; Access to independent supporting agencies had been denied; That staff had conspired to remove you as foster carers. Outcome: 1 x Upheld; 1 x Partly upheld; 3 x Not upheld
8	Lack of information about their children in a foster placement; Issues in respect of contact with the children; Actions and attitude of worker Outcome: withdrawn
9	Lack of action taken by Children's Services; concerns about the quality of the core assessment document; lack of contact from the worker completing the core assessment; the attitude of workers towards him in a meeting where he felt they were dismissive of his views. Outcome: 3 x Upheld; 1 x Partly upheld
10	Attitude of worker which they felt lacked sensitivity and professionalism; Request for clarity as to whether HCPC had been contacted regarding concerns with the workers practice; Issues in respect of data protection. Outcome: 1 x Upheld; 1 x No finding; 1 x Outside of scope
11	Failure to reimburse expenses associated with the rehabilitation process; Not kept informed of planning intentions; Failure to ensure that statutory policy and procedures were implemented; Not listening to concerns regarding the rehabilitation plan; The worker's attitude. Outcome: 3 x Upheld; 1 x Partly upheld
12	Policies and procedures were not followed; Failure to investigate; Lack of effective communication and information sharing; Lack of timely response to correspondence; Actions and attitude of workers; Breach of confidentiality. Outcome: 3 x Partly upheld; 3 x Not upheld

13	The involvement of Children's Services led to contact ceasing; Complainant felt he had been portrayed in negative way; Failure to consider documentation and issues of bias. Outcome: 2 x Partly upheld; 2 x Not upheld
14	The failure of staff to adhere to the Procedures and Processes; Failure to complete a robust parenting/risk assessment in respect; Not keeping the family fully informed of the progress; Lack of management oversight. Outcome: 3 x Upheld; 1 x Partly upheld
15	The actions and attitude of the worker; Support services were not offered; Conflicting information and inaccuracies in reports; Appointments cancelled with no explanation or that worker's did not turn up when planned Outcome: 3 x Upheld; 1 x Partly upheld; 1 x Not upheld; 1 x Not substantiated
16	Issues in respect of contact; Breach of confidentiality; Lack of support; Withholding information; Failure to provide a response to an enquiry made by an MP Outcome: investigation on-going
17	Lack of financial support in the care of grandson, with a Residence Order Allowance; Children's Services have made repeated errors with the calculation and payment of your Residence Order Allowance. Outcome: 2 x Not upheld
18	Failure to respond in a timely manner to safeguarding concerns; Lack of effective communication; Delay in making passport applications for the children; Delay in undertaking an assessment; Failure to provide reports in a timely manner to the Looked After Child Review Outcome: 1 x Upheld; 6 x Partly upheld; 2 x Not upheld
19	Failure to follow procedures appropriately or involve complainant in decision-making and assessment processes; Delays in undertaking the Core Assessment; Contact should not have been terminated; counselling support had been delayed. Outcome: investigation on-going
20	Repeated changes in worker; Failure to meet agreed timescales in respect of assessments; Reports contain inaccuracies and bias and have used historical information without consent; Attitude of workers. Outcome: 2 x Upheld; 2 x Not upheld
21	Lack of explanation in respect of risks posed; Actions of the worker; Lack of assessment; Non return of telephone calls; Failure to offer both on-going support and advice; A copy of the CIN plan has not been provided; Personal circumstances have not been taken into consideration. Outcome – withdrawn
22	The actions and attitude of the worker Outcome – withdrawn
23	That staff have not acted in an impartial and biased manner; that workers have failed to understand the risks to the child; that workers have not followed policy and procedures; not being included in the planning process; not kept informed; attitude of workers. Outcome: 2 x Partly upheld; 2 x Not upheld

Stage 3's (Review Panel Hearings) 2015-16

1	<i>Inaccuracies in reports that did not reflect events; a lack of explanation as to specific risks; Delays in assessment work.</i> Outcome: 2 x Upheld; 1 x Not upheld
2	<i>Actions, Attitude and conduct of workers involved with the family; Delays, lack of support and issues about the accuracy of documentation.</i> Outcome: 3 x Upheld; 5 x Partly upheld; 1 x Not upheld; 2 x Unsubstantiated
3	<i>Failure to include absent parent. Failure to signpost relevant services or provide advice on parental alienation</i> Outcome: 4 x Upheld; 1 x Not upheld
4	<i>Delay in acting on a referral/Assessment; Inaccurate information in reports; processes not explained; inappropriate sharing of information</i> Outcome: 1 x Upheld; 1 x Partly upheld; 3 x Not upheld; 4 x Unsubstantiated
5	<i>The social worker's attitude and actions; not kept informed; non return of contact; issues of delay and lack of action</i> Outcome: 2 x Upheld; 4 x Partly upheld; 1 x Not upheld; 1 x Unsubstantiated; 2 x Could not be investigated
6	<i>Failure of staff to adhere to procedures/process; issues of bias; poor quality of reports; not kept informed; lack of management oversight</i> Outcome: 4 x Upheld
7	<i>Actions taken by workers with regards to contact; use of inaccurate information; failure to undertake a parenting/ risk assessment.</i> Outcome: 1 x Partly upheld; 1 x Not upheld
8	<i>Lack of support from officers. Attitude and behaviour of workers. False allegations made against the family</i> Outcome: 1 x upheld; 1 x Not upheld
9	<i>Incorrect information was used to deny access to grandchild; failure to act appropriately or undertake a timely risk assessment</i> Outcome: 1 x Upheld; 2 x Not upheld
10	<i>Issues in respect of a Foster Placement Panel's decision; Lack of appropriate support from the council or supporting agencies</i> Outcome: 1 x Upheld; 1 x Partly upheld; 2 x Not upheld
11	<i>Failure to complete a robust assessments; Not keeping the family fully informed of progress; Lack of management oversight</i> Outcome: 4 x Upheld
12	<i>Inadequate support. Issues of bias and a lack of contact/information following their grandson moving to live with another relative</i> Outcome: 3 x Partly upheld; 1 x Not upheld

Appendix 4

Completed Ombudsman complaints 2015-2016

	Details of complaint	Decision
1	Council Tax A refund of Council Tax was paid into the complainants former partner's sole bank account and not into their joint account where the Council Tax direct debits were taken from. The complaint was upheld as the credit belonged to both parties.	Upheld
2	Leisure The complainant held a corporate membership for the Wellness Centres for a number of years and was unhappy that the council failed to notify her of a special offer which would reduce her monthly payment. The findings revealed that the council were under no obligation to advise members of special offers however did recognise that the customer service received fell short of the centre's usual standards.	Upheld
3	Grant Work The complainant is a tenant of a social landlord and was unhappy that the council failed to seek permission to access her garden or give prior notification that builders needed access when carrying out adaptations. Investigations revealed that the issues were not for the council to address but more appropriately by Sunderland Care and Support.	Not upheld
4	Council Tax The complainant was aggrieved that the council would not agree for her to pay Council Tax by a preferred method used previously -which had subsequently been withdrawn. Whilst it was recognised, that an admin error had occurred following the deletion of certain payment arrangements; no fault could be found in the council's decision to withdraw certain payment methods as alternative payment arrangements had been offered.	Partially upheld
5	Environmental Health The complainant felt that the council did not investigate or take appropriate action when reporting issues relating to a restaurant near his home. The complainant subsequently rang the complaints team to withdraw his complaint.	Withdrawn
6	Planning The complainant alleged the council had not taken action about a property which he stated was operating as a hostel and outside of its planning consent. The complainant was also unhappy that the council had not taken any action regarding a report of ASB.	Not upheld
7	Planning The council did not follow correct procedures in respect of amendments made to a planning application. The findings revealed that the procedure followed was legitimate and lawful, and both the complainant and others had the chance to make representations.	Not upheld
8	Planning The complaint concerned about how a planning application was assessed, the actions of the case officer and the content of the committee report. The complaint was investigated by an External Investigator who found no maladministration or fault with either the conduct of the case officer or the processes and procedures which the officers used to assess this proposal.	Not upheld
9	Parking Services A blue badge which was issued incorrectly in that the badge indicated the wrong gender. The complainant alleged they were challenged by a Civil Enforcement Officer [CEO] who followed her into a shop and questioned the validity of the badge. The findings revealed the council had made an error when issuing the blue badge, however with regard to the CEO allegedly entering a premises this could not be proven as there was no camera footage/evidence to prove this.	Partially upheld

10	Network Management The complainant stated the council did not properly consider all the relevant information when changing a nearby road junction by installing traffic lights. The complaint was not upheld as it was found that the council had considered all the relevant information when adding a condition to planning permission relating to traffic light installation.	Not upheld
11	Bereavement Services That a disclosure about the complainant had been made by the Bereavement Service to the Coroner regarding inaccurate financial information - which the complainant was not liable for as the debt related to a limited company using the complainant's name in their business title. The complaint was not upheld as findings revealed that council were aware that the complainant did not personally owe money and no financial information had been disclosed.	Not upheld
12	Council Tax A final notice for Council Tax relating to a landlord's rental property was sent to the landlord's home address - this was for an account which was closed dating back to over 15 months. However the Council Tax Bills, in the first instance, were not sent to his home address thus giving no opportunity for him to query them and no prior warning that there was an outstanding amount due on the account. The council accepted that an error was made in sending a final notice, however an apology was given and steps were immediately taken to rectify the error.	Upheld
13	Leisure Services The complaint concerned the terms and conditions relating to the leisure centres. The complainant was unhappy that non-members are disadvantaged in relation to advance bookings.	Not upheld
14	Parking Services The complainant received a PCN for his van which was illegally parked, but was unhappy with the Civil Enforcement Officer's actions. The complaint was upheld as the CEO admitted fault in her actions and an apology was given to the complainant.	Upheld
15	Council Tax The complainant was unhappy about recovery charges for non-payment of Council Tax. A number of issues raised were over 12 months old and the complainant had the opportunity to raise the matters in court at the time.	Not upheld
16	Council Tax The complainant felt that she had been bullied and harassed by the council when trying to pursue Council Tax recovery. The complaint was not upheld as the council was merely following the recovery process as set out in the legislation.	Not upheld
17	Highways This concerned a footpath outside of the complainant's property which he felt was not in a safe and serviceable condition. Whilst it was accepted that the footpath did not look particularly pleasant, following inspection it was considered to be safe and serviceable and the issues reported did not meet intervention levels.	Not upheld
18	Planning The council gave incorrect pre-application to the complainants regarding the acceptability of a wraparound extension they were planning to build. A subsequent guidance document issued by the Government showed that the council's interpretation was flawed in respect of what was/was not permitted development.	Upheld
19	Responsive Local Services This concerned a local park which the complainant felt was neglected by the council and the council were refusing to spend any money on the park. One element of the complaint was upheld. However the general upkeep of the park was found to be adequate considering the fall of public spending and parks nationally have faced large cuts in funding and staffing over the last few years.	Partially upheld

20	<p>Council Tax</p> <p>The complainant was dissatisfied with a letter received from Council Tax regarding his single person's discount (SPD) in particular the tone of the letter and he felt that he has not been dealt with correctly by officers when he queried this. The findings revealed the wording of the SPD letter needed to be reviewed; however it was found that there was no fault in the way that officers had handled the complaint.</p>	Partially upheld
21	<p>Procurement</p> <p>The complainant stated that the council had a vendetta against him, causing his business to suffer, because of allegations he raised in previous complaints against the council. The complaint was not upheld as his previous complaints had been fully, considered and investigated and were now closed.</p>	Not upheld

Item 8

SCRUTINY COORDINATING COMMITTEE

30 June 2016

Annual Scrutiny Debate 2016 - Evaluation of Feedback from Delegates

Report of the Chief Executive

1. Purpose of the Report

- 1.1 The report summarises the feedback of Members, officers and partners who attended the 9th Annual Scrutiny Event held on 14 June 2016 at Bede Tower in Sunderland.

2. Background

- 2.1 The scrutiny conference was attended by 88 delegates and the breakdown of attendance was as follows:

47 Members
20 Officers
13 Partners
2 Co-opted Members
6 Scrutiny and Area Team Staff.

26 delegates returned evaluation forms to provide feedback on their experience at the debate.

3. Findings

3.1 Venue and Facilities

- 3.1.1 The conference was held, for the first time, at Bede Tower. The venue was chosen for its close proximity to the Civic Centre, car parking and providing good value for money.
- 3.1.2 92% of delegates who responded (11 excellent and 13 good out of 26 respondents) felt that the venue was either good or excellent, which is a significant improvement on previous years. The venue was rated as a well presented venue with excellent access, although it was mentioned that there was insufficient parking.

3.2 Presentations and Speakers

- 3.2.1 Welcome and closing remarks were given by Cllr Norma Wright, Chair of the Scrutiny Coordinating Committee. Speeches were also received from Cllr Paul Watson, Leader of the Council, Vince Taylor, Head of Strategy & Performance, Phillip Foster, Chief Operating Officer, Sunderland Care & Support, Gillian Gibson, Director of Public Health, and Simon Marshall, Director of Education.
- 3.2.2 92% of delegates who responded (10 excellent and 14 good out of 26 respondents) regarded the speakers as either excellent or good. Delegates identified the speeches as being very focused, clear and informative, and that everyone spoke exceptionally well. The presentations provided by the Director of Public Health and the Director of Education were highlighted as being particularly enlightening for the scrutiny agenda.

3.3 Question and Answer Panel Debate

- 3.3.1 A new aspect of the debate was the question and answer session held immediately after the presentations. This provided an opportunity for the assembled delegates to question the panel on key themes raised in their presentations and explore the role for scrutiny over the coming year.
- 3.3.2 The Q and A session scored well with 38 % delegates rating the session excellent and 42% rating it as good. Only 2 delegates thought it was satisfactory. There were a number of positive comments around the session including that it was well structured and that the presentations helped to prompt the Q and A session. There were also a number of comments that can be taken forward to improve this aspect of the debate with a number of delegates commenting that there was insufficient time for the session and that questions should be concise and to the point.
- 3.3.3 This is a positive start to a very new aspect of the scrutiny debate and one that can only improve. The constructive comments made will help to develop this feature of the debate in future years.

3.4 Catering and Refreshments

- 3.4.1 The majority of respondents were satisfied with the catering provided, 73% thought it was excellent or good, although one respondent did score the catering as poor. Comments were also favourable citing a good mix of snacks and enough for everyone. There was however a comment that more water could have been available.

3.5 Organisation of the event

- 3.5.1 Most respondents felt that the event had been well organised with 85% (22 out of 24 respondents) rating it either excellent or good. The only comments related to ensuring that information about the event and the programme could be made available much earlier for attendees.

3.6 The Debate – Likes and Dislikes

- 3.6.1 With any new format it is very important to gauge the feeling of the audience and there were some comments that provided a useful insight for future planning of similar events.
- 3.6.2 In terms of what delegates liked about the new style event the following comments were recorded:
- The speakers were succinct and well-structured combining and assimilating information for members.
 - Listening to new Director of Education. Now I will sit back and see how plan works out
 - Hearing about the core strategy (Vince)
 - All of it
 - Length brief
 - New format
 - Useful to have round table discussion
 - The debate / Q&A
 - Vince Taylor's speech
 - Q&A
 - Q&A
 - Speeches
 - Good speeches but this led the event – I am sure there would be more questions – a shame when everyone available.
- 3.6.3 Similarly in terms of what could be improved upon the following comments were identified:
- A lot of information to take in but not sure how else event could have been delivered
 - Understanding how this influences the selection of scrutiny topics
 - Q&A
 - Venue
 - Maybe follow up asking for topics or areas to review / challenge
 - Explain balance between scrutiny and policy review but Cllr Smith's question to panel helped address this.
 - Another 10-15 minutes for questions may have encouraged more questions
 - Longer
 - Q&A session could have been longer

- Discussions in our own groups

3.7 Conclusions

3.7.1 Overall the majority of those who responded regarded the Annual Scrutiny Debate 2016 as excellent (27%) or good (58%).

3.7.2 The following aspects were given as suggested areas of improvement:

- Use this venue again.
- Give partners the opportunity to inform the selection of topics in advance before or after the event but before final selection to ensure best value for all.
- Suggestion box for ideas
- Keep it fresh
- Venue
- More interactive – opportunity for in depth debate
- Look at how we can gather the views of outside bodies and get them more involved in the event
- This year was an improvement on recent years
- I feel this is the best scrutiny debate to date. The new format seemed to work well with topics for discussion not predetermined
- It is good – can't think of anything else that would improve

3.7.3 The Scrutiny Debate is a well-established event in the council diary and has served its purpose over the years, providing a suitable vehicle for deliberating key policy topics. However the introduction of a new scrutiny model provided an opportune moment to refresh the scrutiny event to reflect this change. It is often difficult to replace a tried and trusted formula but the general consensus from those in attendance and the evaluation forms are very encouraging. Although there is always room for improvement and the feedback received will help to develop the event over the coming years.

4. Recommendations

4.1 That Members note the contents of the report and provide any further feedback in relation to the conference.

Contact Officer : Nigel Cummings, Scrutiny Officer
0191 561 1006
Nigel.cummings@sunderland.gov.uk

NOTICE OF KEY DECISIONS

REPORT OF THE CHIEF EXECUTIVE

1. PURPOSE OF THE REPORT

- 1.1 To provide Members with an opportunity to consider the items on the Executive's Notice of Key Decisions for the 28 day period from 21 June 2016.

2. BACKGROUND INFORMATION

- 2.1 Holding the Executive to account is one of the main functions of Scrutiny. One of the ways that this can be achieved is by considering the forthcoming decisions of the Executive (as outlined in the Notice of Key Decisions) and deciding whether Scrutiny can add value in advance of the decision being made. This does not negate Non-Executive Members ability to call-in a decision after it has been made.
- 2.2 To this end, the most recent version of the Executive's Notice of Key Decisions is included on the agenda of this Committee. The Notice of Key Decisions for the 28 day period from 21 June 2016 is attached marked **Appendix 1**.

3. CURRENT POSITION

- 3.1 In considering the Notice of Key Decisions, Members are asked to consider only those issues where the Scrutiny Committee or relevant Scrutiny Panel could make a contribution which would add value prior to the decision being taken.
- 3.2 In the event of Members having any queries that cannot be dealt with directly in the meeting, a response will be sought from the relevant Directorate.

4. RECOMMENDATION

- 4.1 To consider the Executive's Notice of Key Decisions for the 28 day period from 24 June 2016.

5. BACKGROUND PAPERS

- Cabinet Agenda

Contact Officer : Nigel Cummings, Scrutiny Officer
0191 561 1006
Nigel.cummings@sunderland.gov.uk

The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012

Notice is given of the following proposed Key Decisions (whether proposed to be taken in public or in private) and of Executive Decisions (including key decisions) intended to be considered in a private meeting:-

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
160215/51	To seek approval to review school places for pupils with autism.	Cabinet	Y	20 July 2016	N	Not Applicable	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
160516/75	To consider the International Advanced Manufacturing Park – Consultation Draft Publication for the Area Action Plan	Cabinet	Y	20 July 2016	N	Not Applicable	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
160520/78	To seek approval to procure and appoint contractors to deliver the North Bridge Street Northern Gateway scheme.	Cabinet	Y	20 July 2016	N	Not Applicable	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
160524/79	To seek approval to award a new garden waste treatment contract via South of Tyne and Wear Waste Management Partnership commencing August 2016 when existing contract expires.	Cabinet	Y	20 July 2016	N	Not Applicable	Cabinet Report Background Papers- Cabinet Report 14th January 2009 - Waste Management Ancillary Procurement	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
160616/80	To seek approval for the acquisition of land at Cowan Terrace, Sunderland	Cabinet	Y	20 July 2016	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraph 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet reports part 1 & 2	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
160616/81	To seek approval of the Brownfield Sites Register	Cabinet	Y	20 July 2016	N	Not applicable	Cabinet Report Brownfield Sites Register	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
160617/85	To seek approval to the sale of land at former High Usworth Primary School, Washington.	Cabinet	Y	20 July 2016	N	Not Applicable	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
160620/87	To agree to Phase 2 of the review of future library provision	Cabinet	Y	20 July 2016	N	Not Applicable	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
160620/88	To agree in principle to procure vacant Sunderland High School Tunstall site with a view to St Mary's RC Primary School moving to that site from their current school site at Meadowside	Cabinet	Y	20 July 2016	N	Not Applicable	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
160620/89	To seek Cabinet approval to purchase residential and day placements for young people 0-25 in non-maintained and independent special schools.	Cabinet	Y	20 July 2016	N	Not Applicable	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
160104/48	To consider the freehold acquisition of two properties to provide children's services accommodation.	Cabinet	Y	Between 1 July and 30 September 2016	Y	The report is one which relates to an item during the consideration of which by Cabinet the public are likely to be excluded under Paragraph 3 of Schedule 12A of the Local Government Act 1972, as amended, as the report will contain information relating to the financial or business affairs of any particular person (including the authority holding that information). The public interest in maintaining this exemption outweighs the public interest in disclosing the information.	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Item no.	Matter in respect of which a decision is to be made	Decision-maker (if individual, name and title, if body, its name and see below for list of members)	Key Decision Y/N	Anticipated date of decision/ period in which the decision is to be taken	Private meeting Y/N	Reasons for the meeting to be held in private	Documents submitted to the decision-maker in relation to the matter	Address to obtain further information
160505/70	To approve the Minster Quarter Masterplan (MQMP) Supplementary Planning Document (SPD) for the purposes of public consultations and as a material consideration in assessing planning applications, pending its finalisation following public consultation.	Cabinet	Y	21 September 2016	N	Not Applicable	Cabinet Report MQMP SPD Habitat Regulations Assessment	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk
160616/83	To seek approval to disposal of Land at Rainton Bridge South	Cabinet	Y	20 July and 30 September 2016	N	Not Applicable	Cabinet Report	Governance Services Civic Centre PO BOX 100 Sunderland SR2 7DN committees@sunderland.gov.uk

Note; Some of the documents listed may not be available if they are subject to an exemption, prohibition or restriction on disclosure.

Further documents relevant to the matters to be decided can be submitted to the decision-maker. If you wish to request details of those documents (if any) as they become available, or to submit representations about a proposal to hold a meeting in private, you should contact Governance Services at the address below.

Subject to any prohibition or restriction on their disclosure, copies of documents submitted to the decision-maker can also be obtained from the Governance Services team PO Box 100, Civic Centre, Sunderland, or by email to committees@sunderland.gov.uk

Who will decide;

Cabinet; Councillor Paul Watson - Leader; Councillor Henry Trueman – Deputy Leader; Councillor Mel Speding – Cabinet Secretary; Councillor Louise Farthing – Children’s Services; Councillor Graeme Miller – Health, Housing and Adult Services; Councillor John Kelly – Public Health, Wellness and Culture; Councillor Michael Mordey – City Services; Councillor Cecilia Gofton – Responsive Services and Customer Care

This is the membership of Cabinet as at the date of this notice. Any changes made by the Leader will be specified on a supplementary notice.

Elaine Waugh
Head of Law and Governance

21 June 2016

SCRUTINY COORDINATING COMMITTEE

ANNUAL WORK PROGRAMME 2016/17

REPORT OF THE CHIEF EXECUTIVE

1. Purpose of the Report

- 1.1 The purpose of the report is to consider and agree a work programme for the Committee for the municipal year 2016/17.

2. Background

- 2.1 The work programme is designed to set out the key issues to be addressed by the Committee during the year and provide it with a timetable of work. The Committee itself is responsible for setting its own work programme, and also has a coordinating role in relation to the three thematic Committees.
- 2.2 To be most effective, the work programme should provide a basis and framework for the work of the Committee, while retaining sufficient flexibility to respond to any important issues that emerge during the course of the year. The work programme is therefore intended to be a working document that the Committee can develop and refer to throughout the year.
- 2.3 In order to ensure that the Committee is able to undertake all of its business and respond to emerging issues, there will be scope for additional meetings or visits not detailed in the work programme.
- 2.4 The remit of the Scrutiny Coordinating Committee covers the following:-
- To review and scrutinise the functions of the Council relating in particular to the budget, corporate plan, external assessments, performance monitoring, quality standards and value for money, property and facilities management, information technology, organisational development, workforce strategy, governance, customer service and communications. To act as the designated scrutiny committee for statutory purposes for crime and disorder and flood risk.*
- 2.5 The work programme should reflect the remit of the Committee and the need to balance its responsibility for undertaking scrutiny, performance management and policy review (where necessary). In accordance with the recent independent review of the scrutiny function there will be an increasing emphasis on accountability and performance management in the composition of the work programme for the year ahead.
- 2.6 The work programme should also reflect and be aligned to the key priorities of the Council as set out in documents such as the Sunderland Strategy and the Corporate Plan, reflect issues highlighted following external assessments and issues raised during the Annual Scrutiny Debate.

3. Draft Work Programme 2016/17

- 3.1 Members are asked to consider the issues it wishes to consider for the year ahead. A draft Committee Work Programme based on some of the key issues facing the Council and raised during the Scrutiny Debate is attached marked Appendix 1. This will hopefully provide a useful framework for developing the work programme for the year.
- 3.2 During the year the Committee will have the opportunity to review service performance and will be involved in key strategic policy documents. These will be included in the work programme when timescales become available.
- 3.3 The Committee also has a coordinating role to avoid duplication, make best use of resources and to provide a corporate overview of the scrutiny function. As such the Scrutiny Coordinating Committee will also receive, on a monthly basis, the work programmes of the three thematic Scrutiny Committees.

4. Recommendations

- 4.1 That the Scrutiny Coordinating Committee consider and agrees the draft Annual Scrutiny Work Programme for 2016/17 and incorporates emerging issues as and when they arise throughout the forthcoming year;
- 4.2 That the Scrutiny Coordinating Committee considers and notes the work programmes of the three thematic Scrutiny Committees.

5. Background Papers

- 5.1 Scrutiny Agendas and Minutes

Contact Officer: Nigel Cummings
Tel: 0191 561 1006
Nigel.cummings@sunderland.gov.uk

SCRUTINY COORDINATING COMMITTEE – WORK PROGRAMME 2016-17

REASON FOR INCLUSION	30 JUNE 16 D/L 20 JUNE 16	21 JULY 16 D/L 11 JULY 16	15 SEPTEMBER 16 D/L 05 SEPT 16	13 OCTOBER 16 D/L 3 OCT 16	10 NOVEMBER 16 D/L 31 OCT 16	8 DECEMBER 16 D/L 28 NOV 16	12 JANUARY 17 D/L 02 JAN 17	9 FEBRUARY 17 D/L 30 JAN 17	9 MARCH 17 D/L 27 FEB 17	6 APRIL 17 D/L 27 MARCH 17
Policy Framework / Cabinet Referrals and Responses	Revenue Budget Outturn for 2015/2016 and First Revenue Review 2016/2017 (Barry Scarr) Capital Programme Outturn 2015/2016 and First Capital Review 2016/2017 (including Treasury Management) (Barry Scarr)	Corporate Plan (TBC – Jon Beaney) Portfolio Holder Response to Policy Reviews 2014/15			Proposal for Budget Consultation 2016/17 (Barry Scarr) Budget Planning Framework 2016/2017 and Medium Term Financial Strategy 2016/2017 – 2018/2019 (Barry Scarr) Capital Programme Second Review 2015/16 (Barry Scarr) Revenue Budget Second Review 2015/2016 (Barry Scarr)		Annual Audit Letter Revenue Budget 2016/17 Proposals (Barry Scarr) Revenue Budget Third Review 2015/16 (Barry Scarr) Capital Programme - Third Capital Review 2015/2016, Provisional Resources 2016/2017 And Treasury Management Review 2015/2016 (Barry Scarr)	Collection Fund 2015/16 (Barry Scarr) Capital Programme 2016/2017 and Treasury Management Policy and Strategy 2016/2017 (Barry Scarr) Revenue Budget and Proposed Council Tax for 2016/2017 and Medium Term Financial Strategy 2016/2017 to 2018/2019 (Barry Scarr)		
Scrutiny Business	Sunderland APMS Procurement (Sunderland CCG) Evaluation of Scrutiny Debate	Safer Sunderland Partnership Annual Report (Stuart Douglass)	Children's Services Company (Fiona Brown)			Flood Risk Management Plan (Paul Armin)				
Performance / Service Improvement	Complaints & Feedback Report (Marie Johnston)			Complaints & Feedback Report (Marie Johnston)				Complaints & Feedback Report (Marie Johnston)		
Consultation / Information & Awareness Raising	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17	Notice of Key Decisions Scrutiny Work Programmes 2016/17

CHILDREN, EDUCATION AND SKILLS SCRUTINY COMMITTEE – WORK PROGRAMME 2016-17

REASON FOR INCLUSION	28 JUNE 16 D/L 17 JUNE 16	19 JULY 16 D/L 8 JULY 16	8 SEPTEMBER 16 D/L 30 AUG 16	6 OCTOBER 16 D/L 27 SEPT 16	3 NOVEMBER 16 D/L 25 OCT 16	1 DECEMBER 16 D/L 22 NOV 16	5 JANUARY 17 D/L 27 DEC 16	2 FEBRUARY 17 D/L 24 JAN 17	2 MARCH 17 D/L 24 JAN 17	30 MARCH 17 D/L 21 MAR 17
Policy Framework / Cabinet Referrals and Responses			Children and Young People's Partnership Plan (Portfolio Holder)			Youth Justice Plan (Fiona Brown)				Education and Skills Strategy (Simon Marshall)
Scrutiny Business	Remit and Work Programme of Committee (Jim Diamond) Children and Adult Mental Health Service – Progress Report (Janette Sherratt) Participation and Engagement of Young People (Jane Wheeler/Martin Birch)	Improvement and Learning Plan – Monitoring Report (Anne Goldsmith) Social Work – Staff Views - Arrangements (Debra Patterson)	Improvement and Learning Plan – Monitoring Report Social Work – Staff Views (Debra Patterson)	Improvement and Learning Plan – Monitoring Report Corporate Parenting Annual Report (Martin Birch)	Improvement and Learning Plan – Monitoring Report	Improvement and Learning Plan – Monitoring Report Safeguarding Board Annual Report (Independent Chair)	Improvement and Learning Plan – Monitoring Report Social Work – Staff Views (Debra Patterson) Local Authority Designated Officer (LADO) –Annual Report (Sarah Storey)	Improvement and Learning Plan – Monitoring Report Schools Results (Bev Scanlon) Pupil Place Planning (Bev Scanlon)	Improvement and Learning Plan – Monitoring Report Suicide and Self Harm, children & young people – Progress Report (Gillian Gibson/Lorraine Hughes)	Improvement and Learning Plan – Monitoring Report
Performance / Service Improvement		Children's Services Complaints (Marie Johnston)			Children's Services Complaints (Marie Johnston)				Children's Services Complaints (Marie Johnston)	
Consultation / Information & Awareness Raising	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17

ECONOMIC PROSPERITY SCRUTINY COMMITTEE – WORK PROGRAMME 2016-17

REASON FOR INCLUSION	27 JUNE 16 D/L 15 JUNE 16	19 JULY 16 D/L 8 JULY 16	13 SEPTEMBER 16 D/L 1 SEPT 16	11 OCTOBER 16 D/L 29 SEPT 16	8 NOVEMBER 16 D/L 27 OCT 16	6 DECEMBER 16 D/L 25 NOV 16	10 JANUARY 17 D/L 28 DEC 16	7 FEBRUARY 17 D/L 22 JAN 17	7 MARCH 17 D/L 22 FEB 17	4 APRIL 17 D/L 22 MAR 17
Policy Framework / Cabinet Referrals and Responses										
Scrutiny Business	Remit and Work Programme of Committee Key Cities – Feedback on visit(Jill Laverick/JD) Sunderland Software City (Andrea Winders)	Business Centres ((Evolve, Washington, Software Centre) – Progress Report(Andrea Winders) Environmental Enforcement - Feedback(Mark Speed)	Port Progress Report and Visit (Andrea Winders/Mathew Hunt) Advanced Manufacturing Business Park – Progress Report (Alison Fellows)	Prevent – Progress Report(Stuart Douglass) Tall Ships – Progress Report (Ian Flannery) Airshow - Preparations (Andrea Winders)	Development of Skills in the City (Andrea Winders) Contribution of FE sector to Skills Development	Siglion – Progress Report Update (John Seager)	City Of Culture – Progress Report (Rebecca Ball) Key Cities – Progress (Jill Laverick)	Development of Social Enterprise Sector (Andrea Winders) Environmental Enforcement (Mark Speed)	Business Improvement District – Progress Report Tall Ships – Progress Report (Ian Flannery)	Business Centres (Evolve, Washington, Software Centre) - Progress Report (Andrea Winders) Sunderland Strategic Transport Corridor/New Wear Bridge – Progress Report (Alison Fellows)
Performance / Service Improvement										
Consultation / Information & Awareness Raising	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17

HEALTH AND WELLBEING SCRUTINY COMMITTEE – WORK PROGRAMME 2016-17

REASON FOR INCLUSION	29 JUNE 16 D/L:17 June 16	20 JULY 16 D/L:11 July 16	7 SEPTEMBER 16 D/L:30 August 16	5 OCTOBER 16 D/L:26 Sept 16	2 NOVEMBER 16 D/L:24 Oct 16	30 NOVEMBER 16 D/L:21 Nov 16	4 JANUARY 17 D/L:22 Dec 16	1 FEBRUARY 17 D/L:23 Jan 17	27 FEBRUARY 17 D/L:17 Feb 17	29 MARCH 17 D/L:20 March 17
Policy Framework / Cabinet Referrals and Responses										
Scrutiny Business	Extra Care Housing – Progress Report (Graham King)	Care & Support Provider Market Progress Report (Graham King/Ann Dingwall) CCG Operational Plan 16/17 (Sunderland CCG) CQC GP Inspection Update (Sunderland CCG)	Joint Strategic Needs Assessment (TBC) Monitoring of previous scrutiny recommendations	Care and Support Annual Report (Philip Foster)	Care & Support Provider Market Progress Report (Graham King) School Nursing Progress Report (Lorraine Hughes) CQC GP Inspection Report (Sunderland CCG)	CQC GP Inspection Report (Sunderland CCG)		Care & Support Provider Market Progress Report (Graham King)	Joint Strategic Needs Assessment (TBC) Monitoring of previous scrutiny recommendations	CQC GP Inspection Report (Sunderland CCG)
Performance / Service Improvement										
Consultation/ Information & Awareness Raising	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17	Notice of Key Decisions Work Programme 16-17