Agenda



AGENDA for a meeting of the CABINET in COMMITTEE ROOM B, County Hall, Hertford on MONDAY, 10 JULY 2017 AT 2.00PM

MEMBERS OF THE CABINET (Executive responsibilities are as indicated). (Quorum = 3)

D A Ashley Environment, Planning & Transport Education, Libraries & Localism

R I N Gordon Leader of the Council T C Heritage Children's Services

T W Hone Community Safety & Waste Management R M Roberts Public Health, Prevention & Performance

R Sangster Highways

J D Williams Resources, Property & the Economy

C B Wyatt-Lowe Adult Care & Health

AGENDA

Meetings of the Cabinet are open to the public (this includes the press) and attendance is welcomed. However, there may be occasions when the public are excluded from the meeting for particular items of business. Any such items are taken at the end of the public part of the meeting and are listed under "Part II ('closed') agenda".

The Committee Room is fitted with an audio system to assist those with hearing impairment. Anyone who wishes to use this should contact main (front) reception.

Members are reminded that all equalities implications and equalities impact assessments undertaken in relation to any matter on this agenda must be rigorously considered prior to any decision being reached on that matter.

Members are reminded that:

- (1) if they consider that they have a Disclosable Pecuniary Interest in any matter to be considered at the meeting they must declare that interest and must not participate in or vote on that matter unless a dispensation has been granted by the Standards Committee;
- (2) if they consider that they have a Declarable Interest (as defined in paragraph 5.3 of the Code of Conduct for Members) in any matter to be considered at the meeting they must declare the existence and nature of that interest but they can speak and vote on the matter

PART I (PUBLIC) AGENDA

1. MINUTES

To confirm the Minutes of the Cabinet meeting held on 26 June 2017 (attached).

2. QUESTIONS FROM MEMBERS OF THE COUNCIL TO EXECUTIVE MEMBERS

To deal with any questions directed to the Leader of the Council and Executive Members. All such questions shall have been notified to the Chief Legal Officer at least 5 clear days before the meeting.

Questions will be answered at the meeting in the order in which notice was received. At the end of each reply the questioner may ask one supplementary question to the person to whom the original question was put, who may reply orally or may undertake to reply in writing within 7 days.

The period allocated to questions shall not exceed 15 minutes. Any remaining after that period has elapsed shall be answered in writing within 7 days.

[No questions had been received at the time of agenda despatch.]

3. PUBLIC PETITIONS

The opportunity for any member of the public, being resident in Hertfordshire, to present a petition relating only to a matter on the Cabinet Agenda which has <u>not</u> been considered by a Cabinet Panel <u>and</u> which contains 250 or more signatories who are either resident in or who work in Hertfordshire.

If you have any queries about the petitions procedure for this meeting please contact Deborah Jeffery, Assistant Democratic Services Manager, by telephone on (01992) 555563 or by email to deborah.jeffery@hertfordshire.gov.uk.

4. JOINED UP CARE: ALIGNING ADULT SOCIAL CARE WITH HEALTH

Report of the Director of Adult Care Services

5. DRAFT SUPPORTED ACCOMMODATION STRATEGY

Report of the Director of Adult Care Services

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6. WEST HERTFORDSHIRE HOSPITALS TRUST – STRATEGIC OUTLINE CASE

Report of the Director of Adult Care Services

7. LEARNING DISABILITY TRANSFORMATION

Report of the Director of Adult Care Services

8. REGULATION OF INVESTIGATORY POWERS (RIPA) ANNUAL REPORT

Report of the Chief Legal Officer

9. TRANSPORT ASSET MANAGEMENT PLAN, ASSET PERFORMANCE REPORT 2016

Report of the Chief Executive & Director of Environment

10. FAMILY CENTRE SERVICES COMMISSIONING: STATUTORY CONSULTATION PROCESS

<u>Joint Report of the Director of Children's Services and the Director of Public Health</u>

11. ADDITIONAL SCHOOL PLACES

Report of the Director of Children's Services

Local Members: Jeff Jones; Tim Hutchings; Colin Woodward

12. ACQUISITION OF LAND IN BUNTINGFORD FOR A 2 FORMS OF ENTRY (FTE) FIRST SCHOOL SITE

<u>Joint Report of the Director of Children's Services & the Director of Resources</u>

Local Member: Jeff Jones

13. BUSINESS CASE FOR CREATION OF A LOCAL AUTHORTY OWNED COMPANY TO DEVELOP LAND AND BUILDING ASSETS

Report of the Director of Resources

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PART II ('CLOSED') AGENDA EXCLUSION OF PRESS AND PUBLIC

Part II business has been notified and the procedures set out in the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 have been complied with. The Chairman will move:-

"That under Section 100(A)(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in paragraph 3 of Part 1 of Schedule 12A to the said Act and the public interest in maintaining the exemption outweighs the public interest in disclosing the information."

If you require further information about this agenda please contact Deborah Jeffery, Democratic and Statutory Services on telephone no. (01992) 555563 or email deborah.jeffery@hertfordshire.gov.uk

Agenda documents are also available on the internet at https://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeetings.aspx

1. ACQUISITION OF LAND IN BUNTINGFORD FOR A 2 FORMS OF ENTRY (FTE) FIRST SCHOOL SITE

Joint Report of the Director of Children's Services & the Director of Resources

Local Members: Jeff Jones

2. BUSINESS CASE FOR CREATION OF A LOCAL AUTHORTY OWNED COMPANY TO DEVELOP LAND AND BUILDING ASSETS

Report of the Director of Resources

KATHRYN PETTITT CHIEF LEGAL OFFICER

Minutes



To: All Members of the Cabinet, From: Legal, Democratic & Statutory Services

Chief Executive, Chief Officers Ask for: Deborah Jeffery

Ext: 25563

CABINET 26 JUNE 2017

ATTENDANCE

MEMBERS OF THE CABINET

T L F Douris, R I N Gordon (Chairman), T C Heritage, T W Hone, R M Roberts, R Sangster, J D Williams, C B Wyatt-Lowe

Deputy Executive Members attending on behalf of an Executive Member

A Stevenson

Other Members in Attendance

N Bell, J Billing, S B A F H Giles-Medhurst, F R G Hill, R A C Thake

Upon consideration of the agenda for the Cabinet meeting on 26 June 2017 as circulated, copy annexed, conclusions were reached and are recorded below:

Note: No conflicts of interest were declared by any member of the Cabinet in relation to the matters on which decisions were reached at this meeting.

PART I ('OPEN') BUSINESS

1. MINUTES

- 1.1 The Minutes of the Cabinet meeting held on 23 May 2017 were confirmed as a correct record and signed by the Chairman.
- 2. QUESTIONS FROM MEMBERS OF THE COUNCIL TO EXECUTIVE MEMBERS

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2.1 **N Bell** asked **T Heritage**, Executive Member for Childrens Services:

"Following the short sighted decision of the CCG (Clinical Commissioning Group) to cease commissioning the service at 'Nascot Lawn' children's respite care from the end of October this year, what measures are you as the administration with the responsibility for the welfare of our most vulnerable children from across the county going to take to prevent the closure of Nascot Lawn in Watford which would have such a devastating impact on the lives of so many severely disabled children and their families?"

T C Heritage replied:

"Nascot Lawn is an Overnight Short Breaks Service for children with complex health needs and disabilities. It is funded largely by Herts Valleys CCG with a small contribution from East & North Herts CCG and is run by Hertfordshire Community Trust. It has provided overnight Short Breaks for a number of years. All referrals to Nascot Lawn are made by Health Practitioners. As members are aware, the CCGs have a responsibility to commission and provide Health Services within the County Council's area.

HCC has been working with Herts Valleys CCG and East & North Herts CCG over the last year to review the use of the four overnight short break units as part of an overall review of Short Breaks Services. We were working towards developing joint health and social care provision so that children from across the county will be able to receive a more local integrated service.

Towards the end of April, we were notified by Herts Valley CCG that due to their financial position, they were going to cease funding Nascot Lawn at the end of October. This news came as a surprise to the Local Authority since the position was not evident during the previous meetings around the Short Breaks Services.

Since receipt of the official notification of withdrawal of funding, HCC has had several meetings with commissioners from both CCGs regarding the impact of this decision and how it would be communicated to parents. The decision was made public on Friday 16 June when parents received letters from their CCG. Staff at Nascot Lawn had been made aware of the decision on Tuesday 13 June. These communications confirmed that Herts Valley CCG are no longer in a position to fund Nascot Lawn due to financial pressures and that the Local Authority has a statutory duty to provide Short Breaks Services. The Council fully appreciates the significance of this decision and the impact on families and is working closely with partners, staff and parents to ensure that families are reassured.

The Council's Children's Services 0-25 Together Team is personally contacting

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every family whose child is receiving a service from Nascot Lawn to arrange a joint assessment with Herts Valley Clinical Commissioning Group and East and North Herts Clinical Commissioning Group to ensure both health and care needs are considered fully.

The decision to cease commissioning services at Nascot Lawn by Herts Valley CCG, has been added to the agenda for the Health Scrutiny meeting taking place on July 19 2017.

For clarification, the County Council has a statutory duty under the Children Act 1989 and the Breaks for Carers of Disabled Children Regulations 2011, to provide a range of Short Breaks Services including daytime and overnight care as well as education or leisure activities and services to assist carers in the evenings, at weekends and during school holidays for all eligible SEND children up to the age of 18. Short Breaks Services include the 40 hours Local Offer for all disabled children which includes play schemes, afterschool clubs and other activities. Short Breaks Services may also include direct payments to families to employ personal assistants to spend time with their children doing activities of their choice. The eligibility for support from the 0-25 Together Service team can be found on the Local Offer at the HCC website" https://www.hertfordshire.gov.uk/microsites/local-offer/media-library/documents/policies-and-procedures/0-25-together-service.pdf.

N Bell asked a supplementary question:

"Obviously, this seems largely the same briefing that Jenny Coles sent to me on Tuesday and then full Council but I appreciate that and obviously, I do note that you say that the Council fully appreciates the significance of this decision and the impact on families and obviously we hope you do because clearly this is/would be a devastating decision certainly for those 42 families who have used Nascot Lawn and they do feel that Nascot Lawn is unique. I know there are three other respite care sites but what Nascot Lawn provides is unique and so I will just ask again: Do you not think it best for the sake of those children and their families that you and obviously the Leader of the Council here along with Children's Services officers get the CCG or talk to the CCG to try and hold off on their decision for October 31 and look to somehow reconfigure the finances? That surely should be the responsibility now. We don't want to see County blame CCG or vice versa. We've seen CCG saying 'County stopped talking to them'. It's beyond that now and also have you asked all the county's MPs to get involved because now surely they should be raising this at a higher Government level?"

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T C Heritage replied:

"The officers are, obviously the senior officers are, always having a conversation with CCG about this particular matter and at the moment, as I've indicated, we are assessing with the CCG the needs of the families so we're basically having a look again and I would hope, as we were in the past discussing the whole Short Break configuration, that we would be able to sit down with CCG again, following the assessments to see a way forward. I can't give you anything more specific at this time because we do need to look at each family individually. I personally yet haven't contacted all MPs. I think at the moment it is a local matter whilst we have the assessment. When those assessments finish, we will be able to take a point of view at that time."

3. PUBLIC PETITIONS

3.1 There were no public petitions.

4. ASSISTIVE TECHNOLOGY STRATEGY

[Forward Plan Ref: A005/17]

Decision

4.1 Cabinet agreed the Assistive Technology Strategy for Adult Care Services, as attached at Appendix A to the report.

Reasons for the decision

- 4.2 The coming into force of the Care Act 2014 and the affordability issues relating to the provision of Adult Social Care require solutions which are more personalised, more efficient, more affordable and more responsive to people's needs, aspirations and circumstances. Across the health, social care and housing system in Hertfordshire the Council's strategy is to find the best and most effective ways to support people to live independently and prevent the need for more intensive and long-term support. The Council see a clear role for assistive technology in preventing admission to and facilitating discharge from hospital. The Council want people to be well connected to their communities and an opportunity for technology to help establish networks that reduce isolation and loneliness has arisen.
- 4.3 In approving the Strategy, Cabinet considered the Action Plan associated with the Strategy; that there are no direct financial implications arising from the strategy; the results of the equalities impact assessment undertaken; and the recommendations from the Adult Care & Health Cabinet Panel.

Any alternative options considered and rejected

4.4 None.

5. REVISED 2017/18 HEALTH & COMMUNITY SERVICES BUDGET FOLLOWING ADDITIONAL SOCIAL CARE FUNDING

[Forward Plan ref: A013/17]

Decision

5.1 Cabinet agreed the revised Adult Care Services budget proposals for 2017/18, as detailed within the report.

Reasons for the decision

- 5.2 Following the Integrated Plan setting for the period 2017/18 to 2019/20 at its meeting on 21 February 2017, a number of changes occurred resulting in a revised budget for Adult Care Services. These changes were set out in the report before members. The changes were significant and so it was determined that a revised budget should be brought to the June Cabinet meeting.
- In reaching its decision, Cabinet took into consideration the detailed proposals; the overall position of the ACS budget; the financial implications; the equality impact assessment undertaken; and the recommendations from the Adult Care & Health Cabinet Panel.

Any alternative options considered and rejected

5.7 None.

6. HERTFORDSHIRE COUNTY COUNCIL FINANCE REPORT Q4, 2016/17

Decision

- 6.1 Cabinet approved the following:
 - a) That £3.219m outlined in Appendix B, section A be transferred to specific reserves as carry forward of 2016/17 revenue underspends to 2017/18;
 - b) That new reserves be created from carry forward of underspends as outlined in Appendix B, section A, of £0.290m for a Corporate Managed Property Maintenance fund for future major works; and of £0.190m share of Business Rate Pooling gains, for an Economic Growth Fund.

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- That a new reserve of £2.896m be created for the East Coast and Humberside Control Room Consortium, as outlined in Appendix B, section B;
- d) That £1.445m ringfenced funding for future years be transferred to existing reserves for Children's Services, as outlined in Appendix B, section B:
- e) That £2.962m of the revenue underspend be transferred to the Invest to Transform Fund;
- f) That £16.093m capital budget set out in Appendix B, section C be reprogrammed from 2016/17 to future years; and
- g) That an additional £12.1m capital spend above the budget as at Q2 be funded from borrowing.

Reasons for the decision

6.2 As set out above. The majority of these carry forwards relate to grant or partner funding given for specific purposes, many of which were received too late to spend in year.

Any alternative options considered and rejected

None.

7. FUTURE OF CHESHUNT SCHOOL

[Forward Plan ref: A023/17]

7.1 Discussion took place on this item in Part I.

The Executive Member for Education, Libraries and Localism informed Cabinet that the transfer as referred to in paragraphs 2.5 and 5.1 of the Report will not take place on 1 September 2017 but will be launched on that date.

8. PART II ('CLOSED') AGENDA EXCLUSION OF PRESS AND PUBLIC

- 8.1 Cabinet then decided to move into Part II ('closed' session') and passed the decision at 8.2.
- 8.2 That under Section 100(A)(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item/s of business on the grounds that it/they involve/s the likely disclosure of exempt information as defined in paragraphs 3 of Part 1 of Schedule 12A to the said Act and the public interest in maintaining the exemption outweighs the public interest in

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disclosing the information.

8.3 Following discussion on the Part II Report on the item referred to at 7 and Recommendations, Cabinet moved back into Part I (open session) and considered the Part I Recommendations and made the decision at 9 below.

FUTURE OF CHESHUNT SCHOOL 9.

[Forward Plan ref: A023/17]

Decision:

9.1 Cabinet agreed that the County Council conclude an agreement with the Goffs 'Generations' Multi-Academy Trust around the sponsorship of Cheshunt School, with the final details of the financial contributions required to be agreed by the Director of Resources, in consultation with the Director of Children's Services and the Executive Members for Resources, Property and the Economy and Education, Libraries and Localism, within the parameters set out in the Part II report.

Reasons for the decision

- 9.2 On 13 March 2017. Cabinet received a report on the future of Cheshunt School, recommending that Cheshunt should be sponsored by Goffs Generations. This proposal was supported, as opposed to the closure of the school, on the basis that; the cost of the two options was broadly similar; the closure of the school would result in a deficit of places locally; and sponsorship presented an excellent opportunity to rebrand the school under the strong Goffs 'brand'.
- 9.3 While undergoing their due diligence process, Goff's Generations contacted the County Council to request an increase in the previously proposed level of financial support for the sponsorship process. Significant work has been undertaken by officers to assess and challenge Goffs' underlying assumptions and it has been concluded that an increase in the level of revenue support is reasonable, along with some increase to the pre-conversion costs previously reported. It also remains comparable with the estimated cost of closure of the school. It is the view of officers that this arrangement with Goffs MAT continues to present the best long term value for money solution and will lead to the best educational outcome for current and future pupils in the Cheshunt area.
- 9.4 In reaching its decision, Cabinet considered the above together with the timetable; the financial implications, the equalities impact assessment and the recommendations from the Enterprise, Libraries & Localism Cabinet Panel.

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PART II ('CLOSED') AGENDA

1.	FUTURE OF	CHESHUNT	SCHOOL
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[Forward Plan ref: A023/17]

Decision

1.1 The decision reached on this item of business is recorded at item 9 above.

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CHAIRMAN'S INITIALS

HERTFORDSHIRE COUNTY COUNCIL

CABINET MONDAY 10 JULY 2017 AT 2.00PM

Agenda Item No.

4

JOINED UP CARE: ALIGNING ADULT SOCIAL CARE WITH HEALTH

Report of the Director of Adult Care Services

Author(s): Edward Knowles & Jamie Sutterby (Assistant Directors,

Health Integration – West & East) (Tel: 01992 588950)

Executive Member:- Colette Wyatt-Lowe, Adult Care & Health

1. Purpose of report

1.1 To seek Cabinet approval on the Council's medium term priorities for joined up care for adults with the NHS, in order to guide partnerships with local health organisations and inform the next Hertfordshire Better Care Fund (BCF), which will cover the period 2017-19

2. Summary

- 2.1 Given both the changing local and national context, it is an appropriate time to review the priorities and benefits for joint working between the Council's and NHS services.
- 2.2 The top-level vision for integration, as outlined in the 2016-17 <u>Better Care Fund Plan</u>, remains relevant:
 - "A system that delivers the right care and support at the right time and in the right place for individuals, their families and their carers"
- 2.3 Appendix 1 sets out a recommended set of priorities against a set of 'Integration Standards' developed by health and social care regulators. For each of these standards, the progress and achievements to date have been outlined, as well as the ambitions and targets for 2020. This provides a clear sense as to the practical changes expected across the system in the next three years.
- 2.4 The Council is working to build a culture of prevention. This culture underpins the work being undertaken to integrate health and social care. The intention is to improve the health of the population within available resources and work with the wider system, including partners in the NHS, to help Hertfordshire residents avoid preventable health and social problems. Prevention has also been prioritised as a key theme in the Hertfordshire and West Essex Sustainability and Transformation Plan.

3. Recommendation/s

- 3.1 The Adult Care & Health Cabinet Panel will consider a report on this item of business at its meeting on 3 July 2017. The Panel will be invited to recommend to Cabinet that Cabinet approves the Council's medium term priorities for joined up care with the NHS as outlined in Appendix 1, attached to the report.
- 3.2 The recommendation/s of the Cabinet Panel will be reported orally at the Cabinet meeting and circulated to Members in the Order of Business.

4. Background

- 4.1 Closer joint working with health services has been a strategic priority for the Council for a number of years, predating recent national policy initiatives including the Better Care Fund and Sustainability and Transformation Plans. Over this time, the Council has fostered good relationships with health partners, and it has developed a national reputation as a leader on health and social care integration. This includes winning a Local Government Chronicle award for HomeFirst services, being recognised as a 'vanguard' area for work to support care homes, and winning the 2017 Health Service Journal award, which recognises excellence in care, for Workforce Efficiency for the Vanguard's Complex Care Premium scheme. It also includes the utilisation of 'pooled budgets' to jointly plan and commission services such as arrangements for the joint commissioning of mental health services.
- 4.2 The Health and Social Care environment has evolved since better integration was made a key theme of the Health & Social Care Act 2012 and the Better Care Fund (BCF) was first launched in 2013. The BCF, a single pooled budget of largely existing funding, has driven closer joint working between the Council and the NHS. In 2016-17, as in the previous year, the Council and the NHS pooled a wider range of service budgets than nationally required to maximise opportunities for joint working, commissioning and financial planning. This resulted in a BCF of £304m, one of the largest in the country, jointly pooled between the Council, Herts Valleys CCG (HVCCG), East & North Herts CCG (ENHCCG) and Cambridgeshire & Peterborough CCG (CPCCG).
- 4.3 The Hertfordshire and West Essex Sustainability and Transformation Plan outlines the high-level ambitions for the local area. Integration and specifically closer and more collaborative working across health and social care is recognised within the plan as a key means of achieving improved outcomes and doing so within a more constrained financial environment.
- 4.4 The vision for joined up care supports the Council's ambition to support and maximise independence for older people and adults in Hertfordshire, as well as empowering individuals and working together with partners. Improved joint working between health and social care is also consistently fed back as a

priority from service users and carers at engagement events and feedback on services. For service users and staff, integration should offer:

- A greater ability to target collective resources and understand the needs
 of service users so that appropriate support is provided to the right people
 and to the best effect. This is enabled through better sharing information
 to improve operational and strategic decision making.
- Alignment of similar or complementary services. This reduces gaps in provision for the service user, minimises duplication and should allow an improved experience for staff and service users. This is enabled by bringing local teams and services together to enable better joint working.
- A clearer and more efficient allocation of financial resources, enhancing the ability to reduce expenditure and enhancing the value for money of spend. This is enabled through the further development of joint or integrated commissioning arrangements.
- The opportunity to lead on and enhance the system leadership role, ensuring that the views of service users, carers and residents and communities more widely shape the development of health and social care services in Hertfordshire.
- 4.5 As a mark of historically strong and mature relationships, since 2015, the Clinical Commissioning Groups and the County Council have reached an agreement to transfer funds additional to the BCF from NHS budgets to maintain investment in social care services in the face of reductions in Council budgets. This is in recognition of the level of interdependence between the adequate provision of social support to frail or vulnerable adults, and the pressures on health services. In March, the CCGs made a decision to end this financial support from April 2018 and make a reduced sum available from April 2017. It is important to note that, despite the reduced contributions to social care in 2017-18, any level of support of social care by local health commissioners beyond the Better Care Fund is very uncommon.

Table 1 - Additional CCG Contributions for the protection of social care

	2015-16	2016-17	2017-18
	(£'000)	(£'000)	(£'000)
ENHCCG	5,000	8,500	4,500
HVCCG	5,000	8,500	4,500

- 4.6 The Council is required to submit a joint Better Care Fund Plan with the CCGs on approval of the Health & Wellbeing Board covering a two-year period from April 2017. This must include:
 - Setting out Hertfordshire's vision for further integration of health and social care by 2020, which will use a similar version of the document at Appendix 1.

- Demonstrating compliance with four National Conditions (see Appendix 2).
- An outline of how the BCF will meet its performance metrics, including admissions to hospitals, care homes and delayed transfers of care from hospital.
- Clear accountability and governance arrangements between Local Authority and NHS partners.
- Involvement with partners including housing authorities representatives in developing the Plan reflecting growing recognition of the contribution of housing to integration
- Detail regarding how the County Council will improve support for carers
- Details as to how the BCF will be aligned with Sustainability and Transformation Plans (STPs), which are also encouraging greater coordination of local services to meet future financial pressures in the NHS.
- 4.7 The 2017-19 <u>Better Care Fund Policy Framework</u> was released on 31 March. Although an update on the Plan was taken to the Health and Wellbeing Board (HWB) on 14 June, final drafting is awaiting the release of additional delayed guidance although no dates have yet been confirmed.

5. Equality Impact Assessment

- 5.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the Equality implications of the decision that they are making.
- 5.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.
- 5.3 The Equality Act 2010 requires the County Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 5.4 An EQIA is attached to the report at Appendix 3.

6. Financial Implications

6.1 None

Background Documents

Appendix 1- Joined Up Care Priorities Appendix 2- BCF National Conditions Appendix 3- Equalities Impact Assessment

when I need them"

Joined Up Care 2020 – vision and priorities

A system that delivers the right care and support at the right time and in the right place for individuals, their families and their carers

Developing a culture of prevention - to improve the health of the population and help our residents to avoid preventable health and social problems

	Vision for Service User	Current Position and Achievements	2020 Targets
Electronic record and data sharing	"I and all professionals involved in my care can access my digital shared care plan – this means I only need to tell my story once"	Limited sharing of information between integrated health & social care teams to improve coordinator in community and hospital settings Prioritisation & resource of a business case on development of a shared care record between health & care organisations.	A digital shared care record accessible by health and social care profession Adapting the health and social care data systems for integrated care Increasing data sharing between health & social care, including hospitals & Networking the care home market to enable the use of enhanced technology.
Early dentification	"I receive the right care, in the right place to prevent escalation in my care needs" "I, my family or carer know where to go for support to manage my care needs"	Limited use of risk stratification to identify people with high-risk of admission to hospital within 6-12 months Services in place across Herts to jointly plan and co- ordinate care for people with multiple or complex needs Limited adoption of integrated points of access and 'named professionals' representing health and social	Wider use of risk stratification to target specific groups A preventative approach to care co-ordination and not just crisis interventions Streamlined points of access to care services Smooth transitions between adult and children's services
Value for money	"I receive the best possible level of care from the NHS and local authority" "The quality of my care does not change if I move between different services"	Most community services funded through pooled budgets Joint commissioning of mental health and learning disabilities services, and some intermediate care beds Improved use of the Disabled Facilities Grant through plans for a shared Home Improvement Agency	Using joint commissioning for shared contracts, market stimulation and b A joint approach to Continuing Healthcare services Commissioning decisions supported by more powerful tools for joint analy health and social care needs / demands of local populations An operational Home Improvement Agency
Assessment and care planning	"The NHS and social care work together to assess my care needs and agree a single care plan to cover all of the different aspects of my care"	Joint care planning used by integrated community services e.g. HomeFirst and Multi-Specialty Teams. Trials of 'My Plan' – a national shared care plan template. Limited piloting of joint assessment forms and triage for integrated services	A shared infrastructure and culture of outcomes-based planning Integrated personal commissioning of direct payments and individual budgets Trusted assessment between health and social care professionals for a ra of services
Integrated community care	"My GP, social worker or carer work with me to decide what level of care I need, and make sure I receive it" "I only need to approach one point of contact to get my care needs met"	Integrated community service models developed around the needs of those with complex care needs Improved coordination between health and social care services and the voluntary and community sector Support to care homes improved through the	More colocation, single lines of reporting, and shared leadership Greater joint working with primary care Greater understanding and use of the voluntary sector and community as Rolling out enhanced care in care homes developed by the Vanguard
Timely and safe discharges	"If I go into hospital, health and social care professionals work together to make sure I'm not there for any longer than I need to be, even if waiting for an assessment"	Ongoing integration of discharge teams in acute hospitals Specialist Care at Home service commissioned Limited use of discharge to assess models to short-term care home placements; trialling of enabling models of bed based care	Further adoption of integrated tools & working structures e.g. live urgen care dashboards to track the movement of patients between services Shared enablement approach across health and social care partners minimising dependency across the area
Integrated urgent care	"If I have to make use of any part of the urgent and emergency care system, there are both health and social care professionals on hand	Joint rapid response services provided to prevent admissions to hospital Successful piloting of early intervention vehicle Link social care Agencian Ackologe 1274	Use of multi-disciplinary teams in all areas Rapid response functions joined up with integrated community teams Wider roll-out of early intervention vehicle and other integrated models Improved co-ordination of out of hours services including NHS 111.

Health and social care workers in hospitals able to

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Improved co-ordination of out of hours services including NHS 111.

Appendix 2 - BCF National Conditions

Condition 1: Plans to be jointly agreed, signed off by the HWB

Condition 2: NHS contribution to adult social care is maintained in line with inflation

Condition 3: Agreement to invest in NHS commissioned out-of-hospital services, which may include 7 day services and adult social care – this includes agreeing how Hertfordshire will use its share of the £1,018bn in 2017-18 and £1,037bn in 2018-19 previously used for the payment for performance fund in 2015-16, with appropriate risk shares

Condition 4: Managing transfers of care – this includes implementation of the below 'High Impact Change Model'

The Company of the Co	
DOE 14 / 1	

BCF Metrics

- 1. A reduction in non-elective admissions
- 2. A reduction in delayed transfers of care
- 3. A reduction in permanent admissions to residential or nursing homes
- 4. An increase in the effectiveness of reablement (an increase in the number of 65+ discharged from hospital into an reablement or rehabilitation service)
- 5. An increase in satisfaction rates for the ACS enablement survey not to be monitored centrally and unlikely to continue in 2017-19
- 6. An increase in dementia diagnosis rate (locally agreed metric) not monitored centrally in 2017-19

Appendix 3 Equality Impact Assessment (EqIA)

STEP 1: Responsibility and involvement

Title of proposal/	Joined Up Care:	Head of Service or	Iain MacBeath
project/strategy/	Aligning Adult	Business Manager	(Director of Adult
procurement/policy	Social Care with	_	Care Services)
	Health		
Names of those	Keir Mann,	Lead officer	Jamie Sutterby &
involved in	Hayley King	contact details:	Edward Knowles
completing the EqIA:	(Programme		(Assistant Directors,
	Managers,		Health Integration
	Integrated Care)		East & West)
Date completed:	14 June 2017	Review date:	Dec 2017

STEP 2: Objectives of proposal and scope of assessment – what do you want to achieve?

,	lertfordshire County Council's is agreeing their medium term
-intended outcomes particles of the purpose and need	riorities for joined up care for adults with the NHS, to guide artnerships with local health organisations and inform the next lertfordshire Better Care Fund (BCF) which will cover the period 017-19.
	he top-level vision for integration, as outlined in the current and lanned 2017-19 Better Care Fund (BCF) Plan is:
a	A system that delivers the right care and support at the right time nd in the right place for individuals, their families and their arers"
B g	the joined up care priorities will be reflected in the 2017-19 letter Care Fund Plan and once submission dates in the delayed uidance have been confirmed will be approved by the Health & Vellbeing Board
ex pr bi aa pr in pr oi	statutory social care services are accessible to all dependent on xisting local and national eligibility criteria. The Joined Up Care roposals incorporate joint working for these services with health, ut also priorities that will improve empowerment, independence nd personal choice, and prevention. For example, integrated ersonal commissioning, home adaptation services and evolvement of the community and voluntary sector. The roposals seek to promote greater health, care and wellbeing utcomes for older people across Hertfordshire alongside reating greater service efficiency for organisations.
Who will be affected: the public, partners, staff, service users, local Member etc	hese priorities cover adult care services for the whole county in artnership with NHS organisations, including the Clinical commissioning Groups (CCGs), providers and other partners. This means those likely to be affected are:
E	xternal • the Public

Appendix 3 Equality Impact Assessment (EqIA)

- Service users
- Carers
- Partners agencies

Internal

- Hertfordshire County Council staff
- County Councillors

STEP 3: Available data and monitoring information

Relevant equality information

For example: Community profiles / service user demographics, data and monitoring information (local and national), similar or previous EqIAs, complaints, audits or inspections, local knowledge and consultations.

Joined up care priorities, including those reflected in the 2017-19 Better Care Fund Plan, have been informed by data and feedback from a wide range of local and countywide plans and strategies which include:

- NHS STP (Sustainability and Transformation Plan): A Healthier Future Improving health and care for Herts and West Essex 2016-2021 http://www.healthierfuture.org.uk/
- Health & Wellbeing Board Strategy, 2016-19
 https://www.hertfordshire.gov.uk/about-the-council/how-the-council-works/partnerships/health-and-wellbeing-board.aspx
- Adult Care Services Three Year Plan https://www.hertfordshire.gov.uk/about- the-council/freedom-of-information-and- council-data/open-data-statistics-about- hertfordshire/what-we-spend-and-how- we-spend-it/integrated-plan/integrated- plan.aspx (PART B ADULT CARE SERVICES)
- HCC Corporate Plan 2013-17
 https://www.hertfordshire/what-our-priorities-are-and-how-were-doing/what-our-priorities-are-and-how-were-doing.aspx
- Various service user and staff engagement events for individual projects and services

In addition, the <u>Hertfordshire JSNA</u> and census data (see <u>Herts Insight</u>) has also

What the data tell us about equalities

Existing plans and strategies, alongside Hertfordshire's Joint Strategic Needs Asssessment (JSNA) points to:

- Demographic growth, particularly around older people (e.g. an 82% increase in over 85s between 2014-39) with this putting increasing pressure on the provision of existing health and community services to this group
- Over 1m individuals (1,116,062, Census 2011) live with a long-term health problem or disability
- A projected 'tipping point' this year where the number of older people needing care will outstrip the number of unpaid carers
- A difference in health outcomes dependent on a wide range of factors and which can vary across protected groups, e.g. different life expectancies across localities and between men and women, higher smoking rates among certain ethnic groups and higher levels of obesity among those with a disability.
- A higher than national average of excess winter deaths (640 in 85+ in 2014-15), higher in some localities than others although the exact reasons for this remain unknown.

Priorities propose incorporating existing and planned integrated working across health and social care. These programmes, projects and joint working arrangements are expected to consider, monitor and mitigate equality issues within their own planning.

Appendix 3 Equality Impact Assessment (EqIA)

been used to inform the latest BCF Plan on county issues and considerations, including health inequalities (see Section 2 of the Plan when published).

STEP 4: Impact Assessment – Service Users, communities and partners (where relevant)

Protected	Potential for differential impact	What reasonable mitigations
characteristic	(positive or negative)	can you propose?
Age	Plans are expected to have a positive impact on this group. This is because joined up care proposals seek an improvement in system-wide coordination of services from health and social care integration. This means better quality and more efficient care for long-term conditions, and older people more likely to experience 'multi-morbidities'. More joined-up, person-centred care in the community also aims at maximising independence for individuals in their own homes and preventing ill-health, also of particular benefit to older people – this is particularly important in the face of a rising aging population.	 Consultation and engagement with service users / patients in the design of specific service changes. Ongoing analysis of the local health inequalities experienced by older people to inform the improvement of services Evaluation of impact of specific service changes on different age groups
Disability Including Learning Disability	Plans are expected to have a positive impact on this group for the reasons states above ('age'). The aspiration for this area of work is to help create better quality services centred around the individual that maintain independence.	 Working with Adult Disability Service (ADS) teams to ensure the opportunities and benefits of joint working are extended beyond older people's services where appropriate. Ensuring the scope of new integrated services includes people with disabilities where evidence suggests that outcomes could be improved. Further ongoing analysis of the issues caused by fragmentation of services, which are currently affecting those with disabilities including learning disabilities.
Race	The plans are not currently considered to have a negative impact, and are likely to have a positive impact as a result of general improvement in efficiency and quality of services. The aspiration for this area of work is to help create better	 Continued promotion of a community first approach, use of community and voluntary assets, as part of joined up care Improved identification and targeting of 'at risk' segments of the population to include

Appendix 3				
Equality Impact Assessment (EqIA)				
Protected	Potential for differential impact	What reasonable mitigations		
characteristic	(positive or negative) quality services centred around the	can you propose? consideration of differential		
	individual that maintain independence. National and some local data shows some differences in health and wellbeing outcomes between different ethnicities, although the evidence base is still being developed. The local census predicts growing diversity as the population increases so it will be important to continue monitoring and considering this area.	outcomes for ethnic groups. Continued development of local data sources – for example, the JSNA and Hertfordshire Fingertips - to monitor potential impact of race on health and wellbeing important when developing and reviewing services.		
Gender reassignment	The plans are not currently considered to have a negative impact, and are likely to have a positive impact as a result of general improvement in efficiency and quality of services that are centred around the individual to maintain independence	Monitoring of impact of specific service changes on different groups by projects and services		
Pregnancy and maternity	The plans are not currently considered to have a negative impact, and are likely to have a positive impact as a result of general improvement in efficiency and quality of services that are centred around the individual to maintain independence.	Monitoring of impact of specific service changes on different groups by projects and services		
Religion or belief	The plans are not currently considered to have a negative impact, and are likely to have a positive impact as a result of general improvement in efficiency and quality of services that are centred around the individual to maintain independence	Monitoring of impact of specific service changes on different groups by projects and services		
Sex	The plans are not currently considered to have a negative impact, and are likely to have a positive impact as a result of general improvement in efficiency and quality of services that are centred around the individual to maintain independence. An improved equity of service could also help to reduce existing health inequalities. For example, there is a difference in life expectancy of 7.1 years for men between the most	Ongoing analysis of the local health inequalities experienced between the sexes to inform the improvement of services		
	deprived areas of Hertfordshire than the least deprived, while for women Agenda Pack 23 of 2	274		

Appendix 3				
Equality Impact Assessment (EqIA)				
Protected	Potential for differential impact	What reasonable mitigations		
characteristic	(positive or negative)	can you propose?		
	this is 5.9 years			
Sexual orientation	The plans are not currently considered to have a negative impact, and are likely to have a positive impact as a result of general improvement in efficiency and quality of services that are centred around the individual to maintain independence	Monitoring of impact of specific service changes on different groups by projects and services		
Marriage & civil partnership	The plans are not currently considered to have a negative impact, and are likely to have a positive impact as a result of general improvement in efficiency and quality of services that are centred around the individual to maintain independence	Monitoring of impact of specific service changes on different groups by projects and services		
Carers (by association with any of the above)	The plans are not currently considered to have a negative impact, and are likely to have appositive impact given the recognised role carers have in joint working and services under the BCF and joined up care priorities. Carers are recognised in the health and care system as providing vital support, particularly as the number of those with long-term conditions are rising. Currently, 1.9% of unpaid carers provide 50 or more hours per week in unpaid care.	 Monitoring of impact of specific service changes on different groups by projects and services The Joined Up Care priorities are are expected to comply with existing strategies and considerations, including the Carers' Strategy 		
Carers and CARE ACT 2014	From April 2015, carers will be entitled to an assessment of their own needs in the same way as those they care for. If the focus of your EqIA relates to care and support, consider carers' new rights and see the Care Act pages on Compass for more guidance			

Opportunity to advance equality of opportunity and/or foster good relations

Joined Up Care provides opportunities to advance equality of opportunity and foster good relations due to its positive implications for the wider health and social care system, and its close working with existing strategies to improve care, advice and support including NHS plans, the Sustainability and Transformation Plan and the Health & Wellbeing Board Strategy.

A number of programmes or projects will be considering the equity of service provision by area / locality. Future activity will need to be mindful of any potential inequality or inequity (of service access or funding) is addressed and any person in need of with health and social care support are not adversely affected by an inequality of provision.

Appendix 3 Equality Impact Assessment (EqIA) STEP 4a: Impact Assessment – Staff (where relevant)

Protected	Potential for differential impact	What reasonable mitigation
characteristic	(positive or negative)	can you propose?
Age	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working. Specific projects or service changes may require a change of location or more often co-location either to an existing site or to another however these changes will be completed in engagement with the staff involved.	Monitoring of impact of specific service changes on different groups by projects and services
Disability Including Learning Disability	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working.	Monitoring of impact of specific service changes on different groups by projects and services
Race	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working.	Monitoring of impact of specific service changes on different groups by projects and services
Gender reassignment	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working.	Monitoring of impact of specific service changes on different groups by projects and services
Pregnancy and maternity	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working. Specific projects or service changes may require a change of location or more often co-location either to an existing site or to another however these changes will be completed in engagement with the staff involved.	Monitoring of impact of specific service changes on different groups by projects and services
Religion or belief	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working.	Monitoring of impact of specific service changes on different groups by projects and services
Sex	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working.	Monitoring of impact of specific service changes on different groups by projects and services
Sexual orientation	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working.	Monitoring of impact of specific service changes on different groups by projects and services
Marriage & civil partnership	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within Agenda Pack 25 of	Monitoring of impact of specific service changes on different groups by projects and services 274

Appendix 3		
Equality Impact Assessment (Eq	IA)	

Protected characteristic	Potential for differential impact (positive or negative)	What reasonable mitigation can you propose?	
	which people work through joint working.		
Carers (by association with any of the above)	This plan has no identified negative impacts for staff in terms of delivery, and offers potential positives through the aspiration to create better places within which people work through joint working. Specific projects or service changes may require a change of location or more often co-location either to an existing site or to another however these changes will be completed in engagement with the staff involved.	Monitoring of impact of specific service changes on different groups by projects and services	

Opportunity to advance equality of opportunity and/or foster good relations

Joined Up Care provides opportunities to advance equality of opportunity and foster good relations due to its positive implications for the wider health and social care system, and its close working with existing strategies to improve care, advice and support including NHS plans, the Sustainability and Transformation Plan and the Health & Wellbeing Board Strategy.

STEP 5: Gaps identified

Gaps identified

Do you need to collect more data/information or carry out consultation? (A 'How to engage' consultation guide is on Compass). How will you make sure your consultation is accessible to those affected?

The above will be monitored on an ongoing basis, and necessary action taken where identified.

It is expected that existing and planned programmes, projects and joint working arrangements across the county consider equality issues and put in place steps for mitigation if necessary.

STEP 6: Other impacts

Consider if your proposal has the potential (positive and negative) to impact on areas such as health and wellbeing, crime and disorder and community relations. There is more information in the guidance.

STEP 7: Conclusion of your analysis

Sele	ect one conclusion of your analysis	Give details
	No equality impacts identified No change required to proposal.	No negative impacts have been identified, although this will continue to be monitored to ensure this remains the case, and that opportunities to improve equality are developed and implemented
	 Minimal equality impacts identified Adverse impacts have been identified, but have been objectively justified (provided you do not unlawfully discriminate) 	ck 26 of 274

	Appendix 3 Equality Impact Assessment (EqIA)			
Sele	ct c	one conclusion of your analysis	Give details	
	_	Ensure decision makers consider the cumulative effect of how a number of decisions impact on equality.		
Potential equality impacts identified		tential equality impacts identified		
	-	Take 'mitigating action' to remove barriers or better advance equality.		
	-	Complete the action plan in the next section.		
Major equality impacts identified		ajor equality impacts identified		
	_	Stop and remove the policy		
	_	The adverse effects are not justified, cannot be mitigated or show unlawful discrimination.		
	-	Ensure decision makers understand the equality impact.		

STEP 8: Action plan

Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date
Monitor and review	There is opportunity for services included within the joined up care priorities to monitor impact on a continued basis and report back as necessary.	Jamie Sutterby and Edward Knowles At least a Quarterly Review and as defined by specific each programme or project
Further research	There are some national and local knowledge gaps on health outcomes in relation to protected characteristics (e.g. race) – developments by local HCC and NHS teams (for example, the Community Intelligence Unit) can be monitored and built into future iterations of the priorities.	Integrated Care Programme Team - Bi-annual review of the Joined Up Care Plan

This EqIA has been reviewed and signed off by:			
Head of Service or Business Manager: Edward Knowles and Jamie Sutterby			
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Appendix 3 Equality Impact Assessment (EqIA) (Assistant Directors, Health Integration – East & West) Date: 14 June 2017

HERTFORDSHIRE COUNTY COUNCIL

CABINET MONDAY 10 JULY 2017 AT 2.00PM

DRAFT SUPPORTED ACCOMMODATION STRATEGY

Agenda Item No.

5

Report of the Director of Adult Care Services

Author: - Kulbir Lalli, Head of Integrated Accommodation

Commissioning (01438 843217)

Executive Member: - Colette Wyatt Lowe, Adult Care Services

1. Purpose of report

1.1 To seek Cabinet's approval of draft 10 year Supported Accommodation Strategy ("the Strategy"), which sets out the vision for accommodation across a range of care needs and age groups in Hertfordshire.

2. Summary

- 2.1 The Strategy brings together social care, health and district and borough councils, as well as key providers that have a collective interest in how supported accommodation must develop in Hertfordshire to meet the future housing needs across a range of care groups.
- 2.2 There have been a number of initiatives to review service delivery across Flexicare, Supported Living services and residential care for older people and people with learning disabilities in recent years, that have focussed on the care and support offer for these groups of people. Parallel to these reviews there have been individual accommodation based projects, for example for the Transforming Care cohort of people. This Strategy aims to develop more integrated accommodation solutions across the whole spectrum of supported accommodation.
- 2.3 The provider market in Hertfordshire is made up of a broad mix of commercial, statutory and voluntary sector organisations, with a number of different arrangements in place for both care and accommodation. Providers often invest capital at a local level independently of the County Council, through investment in the private housing market. In addition to private investment, a number of housing

associations, for example Aldwyck, lease properties from the County Council. In addition, there is a rolling capital programme to upgrade existing buildings that the County Council utilises. This approach has not transformed the market in the desired way. The Strategy presents a more proactive approach and sets out the route to market for providers to attract additional investment into Hertfordshire and to give an impetus to accommodation and care providers to change in line with the needs of local people.

- 2.4 The Strategy will be used by care and housing providers to identify opportunities to enter into or develop existing or new services in Hertfordshire, with a clear understanding of what is required in a local area. It will be used by local district and borough councils to support their local housing plans and to work with the County Council on accommodation projects that serve mutual benefits. The health system will use the Strategy to ensure there is a pipeline of accommodation that supports people who need more specialist accommodation and support, for example Transforming Care and to support the County Council to develop a wider market for dementia care in care home settings. One of the key ambitions of the Strategy is to prevent Hertfordshire residents being placed in specialist accommodation outside of Hertfordshire due to the lack of appropriate accommodation within the county.
- 2.5 The following partners have contributed to the development of this strategy:
 - i) Hertfordshire Adults Supported Accommodation Strategic Board
 - ii) Adult Care Services Co-Production Board
 - iii) Joint Commissioning Partnership Boards with Hertfordshire's CCGs
 - iv) Local District Accommodation Boards
 - v) Hertfordshire County Council Property Services
 - vi) Hertfordshire Care Providers Association
 - vii) Public Health Hertfordshire
 - viii) Care providers (with and without accommodation)

3. Recommendation/s

- 3.1 The Adult Care & Health Cabinet Panel will consider a report on this item of business at its meeting on 3 July 2017. The Panel will be invited to recommend to Cabinet that Cabinet agrees the Draft Hertfordshire Supported Accommodation Strategy, attached at Appendix B.
- 3.2 The recommendation/s of the Cabinet Panel will be reported orally at the Cabinet meeting and circulated to Members in the Order of Business.

4. Background

- 4.1. 'Supported accommodation' means any scheme where accommodation is combined with a support and/or social care service, provided with the purpose of enabling a person to live as independently as possible. This could range from nursing and residential care homes through to supported living schemes, Flexicare Housing or short-term accommodation to help people back to independence.
- 4.2. During the development of this Strategy, consultees identified the following Think Local, Act Personal outcomes as being important in relation to supported accommodation:
 - Information and advice: "having the information I need when I need it"
 - ii) Active and supportive communities: "keeping my friends, family and place"
 - iii) Flexible integrated care and support: "my support, my own way"
 - iv) Workforce: "People who support me"
 - v) Risk enablement: "Feeling in control and safe"
 - vi) Personal budgets and self-funding: "My money for my care".
- 4.3. It is well evidenced that access to the right accommodation has a direct impact on health and wellbeing¹.
- 4.4. It is well evidenced that a lack of access to the right accommodation causes avoidable costs to public bodies such as the National Health Service (NHS)² and County/District or Borough Councils. These costs often relate to:
 - i) Delayed hospital discharge and avoidable hospital admission
 - ii) Avoidable and permanent admission to care homes
 - iii) Loss of tenancies and build-up of housing related debt
 - iv) Homelessness and rough sleeping
 - v) Lack of employment or social opportunities
 - vi) Accommodating people in expensive out of county provision
- 4.5. There are two main types of supported accommodation within Hertfordshire:
 - i) Accommodation based services; where people live in a specifically designated property in order to receive support
 - ii) Non-accommodation based services; where the support available is not dependent on where the person lives.

 $^{^1\} https://www.thinklocalactpersonal.org.uk/_assets/MakingItReal/MIRHousing.pdf$

² https://www.bre.co.uk/filelibrary/pdf/87741-Cost-of-Poor-Housing-Briefing-Paper-v3.pdf

- 4.6 This Strategy proposes a fundamental change to our current service models. People say they want to see more accommodation that supports them to live independently, but connected to their local communities.
- 4.7. A Hertfordshire wide Adults Supported Accommodation Strategic Board has been established under the oversight of the Hertfordshire Health and Wellbeing Board. This Board is jointly chaired by the Director of Adult Care Services and the Chair of the District Council Heads of Housing group and leads work between Adult Care Services and district/borough Council housing leads around adults supported accommodation. Local Adults Supported Accommodation Boards are being established in each district/Borough Council area to support local implementation.

4.8. Older People

It is intended to change the proportion of the current long-term models of care being delivered to help more people stay in their own home - and to develop new short-term models of care to manage Hertfordshire's future demand for supported accommodation.

4.9. Younger adults with Disabilities or Mental Health Issues

It is intended to change the proportion of the current long-term models of care being delivered, to help more people stay in their own home or tenancy - and to develop new models of care to manage Hertfordshire's future demand for supported accommodation.

4.10 Implementation plans for the Strategy are being developed and will be overseen by the Local District Accommodation Boards, who will make recommendations to the Hertfordshire Adults Supported Accommodation Strategic Board. Key commissioning decisions will be made through the appropriate governance structures across the participating authorities, and will be overseen by the Health and Wellbeing Board. The implementation plan template is appended to the Strategy and can be found on page 16.

5. Equality Implications

- 5.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.
- 5.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.

- 5.3 The Equality Act 2010 requires the Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 5.4 An EqIA for the Supported Accommodation Strategy was completed on the 16 June 2017 and is attached at Appendix A.

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Background documents

Appendix A- Equality Impact Assessment
Appendix B- Draft Supported Accommodation Strategy

Appendix A Equality Impact Assessment (EqIA)

STEP 1: Responsibility and involvement

	Ten Year Supported Accommodation Strategy 2017 – 2027	Head of Service or Business Manager	Kulbir Lalli, Head of Integrated Accommodation Commissioning
Names of those involved in completing the EqIA:	Kristian Tizzard	Lead officer contact details:	Kristian Tizzard, Deputy Head of Service 01438 845023 Kristian.tizzard@he rtfordshire.gov.uk
Date completed:	14 June 2017	Review date:	14 June 2018

STEP 2: Objectives of proposal and scope of assessment – what do you want to achieve?

The Supported Accommodation Strategy ("the Strategy") is Proposal objectives: intended to support the commissioning of supported accommodation for adults with care and support needs in -what you want to pursuance of Hertfordshire's duties under the Care Act achieve 2014 including the duties to: -intended outcomes -purpose and need Promote wellbeing including around people's accommodation. Consider supported accommodation access as part of an assessment process to prevent, reduce or delay in adult social care need. The Strategy is needed to ensure: Effective long term planning and investment in the right models of supported accommodation; • Effective joint planning with District and Borough Councils and the NHS. The strategy will be supported by a delivery plan for each Hertfordshire District/Borough council, to be agreed locally by the relevant district/Borough supported accommodation strategy Board.

Appendix A Equality Impact Assessment (EqIA)

STEP 3: Available data and monitoring information

Relevant equality information

For example: Community profiles / service user demographics, data and monitoring information (local and national), similar or previous EqIAs, complaints, audits or inspections, local knowledge and consultations.

What the data tells us about equalities

The Strategy is concerned with the commissioning of supported accommodation for older people and disabled younger adults including those with learning disabilities, mental health issues, physical disabilities, autism and Asperger's.

The Hertfordshire's Joint Strategic Needs and Herts LIS Assessment Summary 2014 showed detailed demography on relevant to the strategy:

http://jsna.hertslis.org/ http://www.hertslis.org/

In summary:

Learning disability

In 2015 were 21,109 people over 18 with a learning disability within Hertfordshire and 4447 people with a Severe to Moderate Learning disability. This is 1.8% of the total population of Hertfordshire. The number of people over 18 with a learning disability is predicted to increase 9% by 2025. The largest projected growth areas over the next 10 years are the ages 75-84 and 85+ with projected increases of 32% and 47% respectively.

6958 people are predicted to be on the Autistic Spectrum.

Physical disability

It is estimated that the current number of adults within Hertfordshire aged 18-64 with a moderate or serious physical disability is 71,010. This equates to 6% of the population of the County and also

It is expected that Hertfordshire will experience sustained increases in the needs of its population linked to increasing prevalence of disability/long term care conditions and age related conditions including physical frailty and dementia.

As the current population of disabled younger adults' ages, there will be an increased prevalence of dementia and other conditions that will drive need for support. This will impact particularly on adults with learning disabilities who are currently supported services that have not developed to address need linked aging.

Within the general population (including within BAME population). Increasing age and frailty will require increased accessibility of enabling services that prevent or delay escalation of need.



Appendix A Equality Impact Assessment (EqIA)

includes adults that are predicted to have a moderate or serious sensory need. **Mental Health** Within Hertfordshire there are an estimated 172,558 adults aged 18-64 experiencing some form of mental ill health in Hertfordshire. In 2016 428 people accessed mental health accommodation placements through Hertfordshire Partnership NHS Foundation Trust (HPFT). Older people It is estimated that there are currently 195,000 (15% of population) people over the age of 65 in Hertfordshire. It is projected that the elderly population in Hertfordshire will increase by 23% over the next 10 years to 240,000. The rate of increase in people over 85 is particularly pronounced as projections estimate an increase of 45% by 2025 (29,000 to 42,000).

STEP 4: Impact Assessment – Service Users, communities and partners (where relevant)

Guidance on groups of service users to consider within each protected group can be found here

Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
Age	It is expected that Hertfordshire will experience large, sustained increases in the number of older people with long term care conditions and disability linked to age, including physical frailty and dementia. It will not be possible to for supported accommodation services to meet expected service user need with the current model and market configuration. A failure to prevent or delay escalation of need or to provide sufficient levels of service will directly and disproportionately impact on the human rights of frail older people. We need to ensure that there is appropriate accommodation for young people as they move through transition to adult care. Currently there is limited information about need which impacts on future planning and commissioning.	The Strategy will respond to this by: Prioritising the development of models of care that prevent or delay escalation of needs, including those who are at risk of long term care or hospital admission; Increasing the availability of nursing home care and specialist residential/dementia care for frail older people; Increasing the availability of community supported housing for older adults with disabilities. Management information on individual needs will need to be available to support better commissioning, Targeted engagement with people and their carers who require accommodation will be needed to ensure effective commissioning.
Disability Including Learning Disability	In 2015 were 21,109 people over 18 with a learning disability within Hertfordshire and 4447 people with a Severe to Moderate Learning disability. This is 1.8% of the total population of Hertfordshire. The number of people over 18 with a learning disability is predicted to	The strategy will respond to this by: Prioritising the development of models of care that prevent or delay escalation of needs, including those who are at risk of long term care or hospital admission;



Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
	increase 9% by 2025. The largest projected growth areas over the next 10 years are the ages 75-84 and 85+ with projected increases of 32% and 47% respectively.	Increasing the availability of nursing home care and specialist residential/dementia care for adults with disabilities, including learning disabilities. Increasing the availability of
	6958 people are predicted to be on the Autistic Spectrum.	community supported housing for adults with disabilities.
	Physical disability It is estimated that the current number of adults within Hertfordshire aged 18-64 with a moderate or serious physical disability is 71,010. This equates to 6% of the population of the County and also includes adults that are predicted to have a moderate or serious sensory need.	Addressing integration of health, housing and care services in future models.
	It is expected that Hertfordshire will experience sustained increases in the needs of its population linked to increasing prevalence of disability/long term care conditions and age related conditions including physical frailty and dementia.	
	As the current population of disabled younger adults' ages, there will be an increased prevalence of dementia and other conditions that will drive need for support. This will impact particularly on adults with learning disabilities who are currently supported services that have not developed to address need linked aging.	
	Within the general population (including within BAME population). Increasing age ⊤Agendaැகெக்கேல்	2474



Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
	and frailty will require increased accessibility of enabling services that prevent or delay escalation of need. Evidence suggests that prevalence of long term care conditions is higher in the population of people with physical disabilities than in the non-disabled population, an association that increases with age. In light of expected future demand, a failure to address access to models of supported accommodation that prevent or delay escalation of need will impact negatively and disproportionately on people with physical and learning disabilities.	
Race	Almost 20% of people in Hertfordshire belong to an ethnic group other than White British. 12% of Hertfordshire residents were born outside the UK or Ireland, and 6% do not have English as a first language (Hertfordshire's Equality and Diversity JSNA. 2014). Nearly 10,000 people in Hertfordshire (1%) say that they are not proficient in English (Hertfordshire's Equality and Diversity JSNA. 2014). In Hertfordshire, 6% of people have a main language that is not English, the highest proportion being in Watford (13%) and the lowest in East	The diverse needs of this group will be identified as part of the review and care management process. Care management practice will ensure that race is taken into account as part of the design of individual care packages. Ensuring the availability of nursing home care and specialist residential/dementia care accessible for adults from BAME populations. Ensuring the availability of community supported housing for adults from BAME populations.



Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
	Herts (3%) (Hertfordshire's	
	Equality and Diversity JSNA.	
	2014).	
	A significant number of people report that their main language is from a country in	
	Asia; the highest percentage can be found in Watford (7%), and the lowest in East Herts (>0.8%) (Hertfordshire's Equality and Diversity JSNA. 2014).	
	Around 4% of clients in LD residential homes and supported living are from	
	minority ethnic backgrounds.	
	Research conducted by the Joseph Rowntree Foundation has found that Black and Minority Ethnic (BAME) communities tend to experience higher levels of inequality (Joseph Rowntree Foundation, 2011).	
	ONS data for Hertfordshire has revealed that the proportion of individuals reporting that they are in 'Not Good Health' is significantly higher amongst service users who report that they are 'not proficient in English' compared with those who claim to be 'proficient in English' – the differential is most pronounced in North Herts where the former exceeds the latter by 400% (Hertfordshire's Equality and Diversity JSNA. 2014).	
	In most south Asian languages, such as Tamil, there is no word for dementia (House of Commons All-Party	



Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
	Parliamentary Group on Dementia. 2013).	
	Individuals from BAME groups are more likely to present later to services, often when dementia is more severe (Mukadam et al. 2011).	
	The knowledge about dementia amongst BAME communities appears to be less than in non-BAME communities (Seabrooke & Milne. 2009).	
	Stigma around dementia may be greater in some communities (LaFontaine. 2007)	
Gender reassignment	No data is available.	Individual needs in relation to gender reassignment will be taken into account across all care management practice. Models of supported accommodation will be commissioned to be accessible to around gender reassignment.
Pregnancy and maternity	No data is available.	Individual needs in relation to gender reassignment will be taken into account across all care management practice. Models of supported accommodation will be commissioned to be accessible to around pregnancy and maternity.
Religion or belief	Around 2% of clients follow faiths other than Christianity. The beliefs of 51% are unknown or not recorded.	The diverse needs of this group will be identified as part of the review and care management process. Care management practice will ensure that religion or belief is taken into account as part of the design of individual care packages.



Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
		Ensuring the availability of nursing home care and specialist residential/dementia care accessible around religion or belief. Ensuring the availability of community supported housing for around religion and belief.
Sex	A lack of access to specialist residential/nursing care	Needs related to sex will be identified as part of the review
	services for frail older people/people with dementia is likely to impact disproportionately on women.	and care management process. Care management practice will ensure that sex is taken into account as part of the design of individual care packages.
		Ensuring sufficient availability of nursing home care and specialist residential/dementia care.
		Ensuring the availability of community supported housing.
Sexual orientation	No data is available.	The diverse needs of this group will be identified as part of the review and care management process. Care management practice will ensure that sexual orientation is taken into account as part of the design of individual care packages.
		Ensuring the availability of nursing home care and specialist residential/dementia care accessible around r sexual orientation.
		Ensuring the availability of community supported housing for around sexual orientation.
Marriage & civil partnership	No data is available.	Needs around marriage & civil partnership will be identified as part of the review and care



Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
		management process. Care management practice will ensure that marriage & civil partnership is taken into account as part of the design of individual care packages.
		Ensuring the availability of nursing home care and specialist residential/dementia care accessible around marriage & civil partnership.
		Ensuring the availability of community supported housing for around marriage & civil partnership.
Carers (by association with any of the above)	Around 10% of the Hertfordshire population have informal unpaid caring responsibilities.	The needs of carers will be identified as part of the review and care management process. Care management decisions will ensure that the role of carers is taken into account as part of the design of individual care packages.
		Ensuring the availability of nursing home care and specialist residential/dementia care accessible for adults from BAME populations and ensuring that services respond effectively around carers' issues.
		Ensuring the availability of community supported housing that responds to the role of carers.

Opportunity to advance equality of opportunity and/or foster good relations (Please refer to the <u>quidance</u> for more information on the public sector duties)

The effective implementation of this strategy and further assessment of equality impact at service commissioning level will ensure equal access to services.



Impact Assessment – Staff (where relevant)

Protected	Potential for differential impact	What reasonable mitigation
characteristic	(positive or negative)	can you propose?
Age	*It is not envisaged there will be any	
	impact on staff as part of this	Review of EQIA on a regular
	strategy. This will be kept under	basis.
	review as this EQIA is reviewed	
Disability	As above	As above
Including		
Learning		
Disability		
Race	As above	As above
Gender	As above	As above
reassignment		
Pregnancy	As above	As above
and maternity		
Religion or	As above	As above
belief		
Sex	As above	As above
Sexual	As above	As above
orientation		
Marriage &	As above	As above
civil		
partnership		
Carers (by	As above	As above
association		
with any of		
the above)		

Opportunity to advance equality of opportunity and/or foster good relations

The effective implementation of this strategy and further assessment of equality impact at service commissioning level will ensure equal access to services.

STEP 5: Gaps identified

Gaps identified Do you need to collect more data/information or carry out	The ongoing impact of the proposed changes will need to be kept under review and the impact monitored. As above, more detailed equality impact assessment will be undertaken at service implementation level.
consultation? (A 'How to engage' consultation guide is on Compass). How	Strategy implementation will include coproduction and citizen engagement on an ongoing basis.
will you make sure your consultation is accessible to those	



Appendix A Equality Impact Assessment (EqIA) affected? STEP 6: Other impacts **STEP 7: Conclusion of your analysis** Select one conclusion of your analysis Give details No equality impacts identified No change required to proposal. Minimal equality impacts identified Adverse impacts have been identified, but have been objectively justified (provided you do not unlawfully discriminate). Ensure decision makers consider the cumulative effect of how a number of decisions impact on equality. Potential equality impacts identified The potential for negative impacts have \boxtimes Take 'mitigating action' to remove been identified. barriers or better advance equality. Complete the action plan in the next section. Major equality impacts identified Stop and remove the policy The adverse effects are not justified, cannot be mitigated or show unlawful discrimination. Ensure decision makers understand the equality impact. STEP 8: Action plan Issue or opportunity identified relating to: Officer Mitigation measures Responsible **Action proposed** Further research and target



date

Consultation proposal

Monitor and review

Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date
There is an opportunity to ensure we fully assess and mitigate in detail against aspects of inequality identified across individual service areas for accommodation (from a service access and delivery perspective).	Individual EqiA's will be undertaken against the diverse range of accommodation service models as future accommodation is procured and/or transformation work is undertaken – this will ensure appropriate equalities scrutiny and mitigation is put into place against the full range of accommodation provision.	Kulbir Lalli Ongoing
Procurement opportunities are used to evidence how prospective service providers will evidence the needs of people with diverse and/or complex needs.	To ensure that equalities duties form part of all individual procurement exercises and evidence around how diverse needs will be met form part of the formal evaluation process. Information about protected characteristics is routinely collated and assessed from contract monitoring reports- mitigation controls are put into place where there is evidence of gaps in how needs are met.	Kulbir Lalli Ongoing
Management Information about service user requirements (covering 0-25 services and Adult Care) is used to assist commissioner's future plan for accommodation needs.	Commissioners engage with developments around the 'Future Planning Tool' to help ensure information provided articulates the needs of people in a timely way in order to actively inform future planning.	Kulbir Lalli Ongoing
Service User and stakeholder engagement informs service delivery and design.	Service user and stakeholder engagement is undertaken (as part or pre procurement activity and/or transformation work is undertaken to ensure their feedback influences how we design and deliver services.	Kulbir Lalli Ongoing
Locality approaches are developed to ensure housing options are maximised through partnership working at a district level including alongside district	Service provision developments at a local level explore all opportunities to maximise options all potential options for housing in order to ensure people have access to accommodation types.	Kulbir Lalli Ongoing



Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date
council partnerships	that will best promote wellbeing and independence	

This EqIA has been reviewed and signed off by:

Head of Service or Business Manager: Kulbir Lalli Date: 16 June 2017

Equality Action Group Chair: N/A Date:



Integrated Accommodation Commissioning

Ten Year Supported Accommodation Strategy 2017 – 2027

www.hertfordshire.gov.uk/MPS





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Introduction

- 1.1. This ambitious strategy outlines our intention to develop more supported accommodation for the people of Hertfordshire.
- 1.2. 'Supported accommodation' means any scheme where accommodation is combined with a support and/or social care service, provided with the purpose of enabling a person to live as independently as possible. This could range from nursing and residential care homes through to supported living schemes, Flexicare Housing or short-term accommodation to help people back to independence.
- 1.3. Hertfordshire already has some excellent examples of supported accommodation, but there is currently not enough to allow everyone across the county to have a full range of choice.
- 1.4. The County Council is responsible for commissioning adult social care on behalf of Hertfordshire's residents. The ten Districts and Borough Councils of Hertfordshire are the local Housing Authorities. The authorities must work together to ensure the choice and capacity are available for local residents.
- 1.5. The ten Districts have many diverse characteristics. Different patterns of housing and care will be needed in different areas. We are open to ideas about how best to develop the right services in the different areas of the county, and will talk to a wide range of organisations about this.
- 1.6. Our first priority is to offer people excellent support at home, adapting their houses to enable that to happen if required. If people need a higher level of support, then we want to offer alternatives in each area so that people get the choice to continue to live as independently as possible.
- 1.7. By 2027 we want all people that need supported accommodation to have a choice of high quality housing. Hertfordshire County Council is looking for partners who want to help to deliver this. This strategy sets out the way that the County Council will work with new and existing partners to develop both large scale supported accommodation schemes and local initiatives that will benefit smaller communities.
- 1.8. This strategy compliments and develops upon the strategic intentions set out in Hertfordshire's Market Position Statements which can be found on the HCC website.
- 1.9. The strategy has been developed in consultation with key stakeholders including:
 - i) Hertfordshire County Council Elected Members
 - ii) Hertfordshire Adults Supported Accommodation Strategic Board¹
 - iii) Adult Care Services Co-Production Board
 - iv) Joint Commissioning Partnership Boards with Hertfordshire's CCGs

¹ ADD LINK TO TERMS OF REFERENCE ETC

- v) Hertfordshire County Council Property Services
- vi) Hertfordshire Care Provider's Association
- vii) Public Health Hertfordshire

2. The scope of this strategy

2.1. The table below sets out the scope of this strategy – which is to communicate our intention to commission different types and proportions of supported accommodation, including housing related support in the future. The strategy does not cover care services provided to people which are not linked to their housing agreements.

Nursing care homes	Yes
Residential care homes	Yes
Supported living schemes	Yes
Flexicare Housing schemes	Yes
'Shared Lives' schemes	Yes
Group Living schemes	Yes
Retirement living schemes without care and support	No
Short-term accommodation for specific needs	Yes
Housing Related Support schemes	Yes
Disabled Facilities Grants	Yes
Assistive Technology in people's homes	No
Older people's sheltered housing	No
Care delivered in people's own homes	No

3. The national and local context

- 3.1. The national adult social care strategy 'Making It Real' was launched in May 2012 to set out what personalisation of care services should look like from the perspective of the people who use them..
- 3.2. During the development of that strategy, people said that the following was important in relation to supported accommodation:
 - i) Information and advice: "having the information I need when I need it"
 - ii) Active and supportive communities: "keeping my friends, family and place"
 - iii) Flexible integrated care and support: "my support, my own way"
 - iv) Workforce: "People who support me"
 - v) Risk enablement: "Feeling in control and safe"
 - vi) Personal budgets and self-funding: "My money for my care".

3.3. Hertfordshire County Council has done its own work to find out what Hertfordshire citizens wanted in order to have what they consider a "good life". Nearly 300 people from diverse backgrounds gave these as their priorities:



- 3.4. People said that access to the right accommodation has a direct impact on health and wellbeing.
- 3.5. It is well evidenced that a lack of access to the right accommodation causes avoidable costs to public bodies such as the National Health Service (NHS) and County/District or Borough Councils. These costs often relate to:
 - i) Delayed hospital discharge and avoidable hospital admission
 - ii) Avoidable and permanent admission to care homes
 - iii) Loss of tenancies, build-up of housing related debt
 - iv) Homelessness and rough sleeping
 - v) Lack of employment or social opportunities
- 3.6. We aim to focus on keeping people's wellbeing and choice and control at the centre of everything we do. The Care Act emphasises that housing is key to meeting people's needs and means that local authorities must:
 - i) Promote **wellbeing** including around people's accommodation.
 - ii) Treat housing not just as 'bricks and mortar' but include the **support** that is needed to access housing (such as housing related support)
 - iii) Consider housing access as part of an assessment process to **prevent**, reduce or delay in adult social care need
 - iv) Include **information and advice** around housing options as part of a universal service offer (including self-funders)

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v) Ensure that care and support is delivered in an **integrated** way with cooperation with partner bodies, including health and housing.

4. Best practice

- 4.1. There is no single agreed definition of "supported housing", as it is a general term that covers a variety of provision. This strategy will take "supported accommodation" to mean "any scheme where housing, support and sometimes care services are provided with the purpose of enabling the person receiving the support to live as independently as possible in the community"².
- 4.2. There are two main types of supported accommodation within Hertfordshire:
 - Accommodation based services; where people live in a specifically designated property in order to receive support
 - ii) Non-accommodation based services; where the support available is not dependent on where the person lives.
- 4.3. We have worked with the national Housing Learning and Improvement Network (Housing LIN) who produced a case study report highlighting good practice across the country.³

5. What we buy today and what we spend

5.1. Some supported accommodation is commissioned by Hertfordshire County Council for people, some people fund their own social care and some care is purchased by the NHS and other public sector bodies. The table below is intended to give a picture of the services currently available in Hertfordshire.

Supported Accommodation Type	In this strategy?	Commissioned by HCC	Paid for by the person (People)	HCC Spend (£million)	Pressure on capacity
Nursing care homes	Yes	Yes	Yes	32.5	High
Residential care homes	Yes	Yes	Yes	126.8	High
Supported living schemes	Yes	Yes	No	31	High
Flexicare Housing schemes	Yes	Yes	No	7.3	High
'Shared Lives' schemes	Yes	Yes	No	0.8	Low
Group Living schemes	Yes	Yes	No	17.2	Moderate
Housing Related Support schemes	Yes	Yes	No	6.1	High

 $^{^2\,}http://www.thinklocalactpersonal.org.uk/_assets/MakingItReal/MIRHousing.pdf$



CaseStudyReport_Pr ocurementDeliveryCa

6. Future planning⁴

- 6.1. We know the population is ageing, that disabled people's life expectancy is increasing and that people's expectations of independent living are higher. These demographic pressures in Hertfordshire, like the rest of the country, are set to create challenges for local authorities both financially and with regard to increasing numbers in the care workforce to meet people's needs in the future. Projected demographics will create a surge in demand for support services for older people (specifically within the 85+ age range, which will more than double in the next 10 years).
- 6.2. For people with learning disabilities, mental health issues, physical disabilities and autism, there is a projected increase in numbers of people requiring suitable accommodation across all age groups, with a growing cohort of over 65s for whom accommodation options are limited at present.
- 6.3. By 2025, if we continue to commission services for people as we have in the past in line with demography, we would expect to see the following growth in social care funded services across Hertfordshire:

Care group	Predicted growth to meet demand by 2025
Older people	1,200 additional nursing beds
	1,500 additional residential beds
	1,200 additional Flexicare Housing places
Learning disability	700 additional supported living places
Physical disability	175 additional supported living places

6.4. This strategy proposes a fundamental change to our current service models. People say they want to see more accommodation that supports them to live independently but connected to their local communities. The following table shows the alternative commissioning intention from Hertfordshire County Council to achieve that ambition:

Care group	Predicted net growth to meet demand by 2025
Older people	1,000 additional nursing beds
	600 additional residential beds
	1,500 additional flexi care units
	50 short-stay 'step up/down' beds
	700 more older people supported in their own homes
Learning disability	500 additional supported living places
	20 transitional places for people learning life skills
	200 more people supported in their own homes
Physical disability	75 additional supported living places
	100 more people supported in their own homes
Mental health	17 additional transitional places for people in recovery
	100 more people supported in their own homes

⁴ http://www.hertfordshire.gov.uk/your-council/hcc/healthcomservices/hscic/suporcarehe1/

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- 6.5. To inform future demand planning and care models we have developed 'future planning tools' to inform the development of options for accommodation based services. These tools enable us to understand the requirements and expectations of people that we support and commission the most appropriate accommodation offer.
- 6.6. District and Borough Councils are developing their Local Plans and strategic housing plans. Future accommodation needs for those people who require care and support will feed into these plans. This may result in growth in some areas and reductions in other areas and will be based on the requirements for mixed markets, catering for social and private needs, as well as affordable housing.
 - 6.7. People must be supported around their health and care needs to prevent unsustainable pressure on accommodation services and prevent the avoidable escalation of health or care needs that may lead to permanent admissions into care homes or hospital admission.

7. Older People - Changing models of supported accommodation

7.1. It is our intention to change the proportion of the current long-term models of care being delivered to help more people stay in their own home - and to develop new short-term models of care to manage Hertfordshire's future demand for supported accommodation. To meet demand by 2025, we would like to stimulate the market to deliver:

PEOPLE AGED 65+	HCC's Future intentions
Residential care homes	Slowing growth in residential care home beds and actively reducing long stay placements in residential care. Place a greater focus on supporting older people with dementia in the remaining places.
	Greater investment in short stay, rehabilitation, 'step down' and assessment bedded services to enable people to return home from hospital
	Reduction in overall commissions from HCC.
Nursing care homes	Growth and increased investment across all services within nursing sector.
	Accelerated growth in nursing dementia care
	Integrated nursing services across the NHS, social care, continuing health care and high needs dementia.
Flexicare Housing	Growth in local communities with greater flexibility of care to support a wide range of

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PEOPLE AGED 65+	HCC's Future intentions
	care needs
	More Flexicare accommodation for people and couples living with dementia

- 7.2. Hertfordshire County Council currently commissions 49% of the residential care market and 23% of the nursing market. 16% of the nursing market is commissioned by the NHS for continuing health care. A small number of beds are purchased by other councils; we plan to survey care homes during 2017/18 to quantify this. The remainder of beds are bought by people who self-fund, including people moving out of London and surrounding counties into care homes in Hertfordshire.
- 7.3. It is our intention to reduce Hertfordshire County Council spend on long term residential care placements by approximately £5m over the next five years (9% of current council spend); approximately £1.5m £2m will be re-invested to deliver short-stay type residential services to allow people to leave hospital and regain their confidence before returning home. Flexible contracts will be put in place with care home providers to secure capacity, provide market stability, take into account individual service pressures such as private and social funding ratios and incentivise service quality and performance
- 7.4. In 2029 two substantial block contracts that deliver nearly 700 residential care beds for HCC are due to end. Residential care home block contracts will be reviewed at that time and options to explore new models will be developed and shared with the market.
- 7.5. Significant pressure in the nursing care home market will be resolved, in the first instance, by investing at least £3m over the course of 2017/18 and 2018/19 to provide additional nursing beds over and above existing capacity, to support hospital discharges. If the market is unable to respond the County Council will explore options for developing its own homes in those areas where additional market competition will have the greatest impact.
- 7.6. The growth and changes in the nursing care home market will be supported by the commissioning integration of NHS 'Continuing Health Care' placements and Hertfordshire Partnership University Foundation Trust's reduction in their own building-based services, which will bring additional investment into the nursing care market.
- 7.7. Flexicare Housing accommodation models for older people will be developed further and more housing will be commissioned. Additional investment into that accommodation will result from a review of services that is currently underway in spring 2017. The new model of Flexicare Housing will be aligned to changes in the residential and nursing markets outlined in sections above.
- 7.8. Flexible accommodation schemes will be developed in close partnership with district and borough councils, taking into account local strategic housing plans. Locally, developments will be supported if they meet both County and

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- local council needs around care provision and housing, providing mixed tenure models to develop local communities.
- 7.9. We will review the use of both HCC leased and owned property where care and support is delivered to ensure the best use of property and leases.
- 7.10. There will be consideration of, and recommendations for, the use of county council capital funding to support the development and growth of businesses to secure capacity at competitive rates. Capital investment will be available through an open bidding process and could support a range of investment such as extensions, match-funding of accommodation units to support mixture of tenure or to deliver new builds.⁵

8. Younger adults with Disabilities or Mental Health Issues - Changing models of supported accommodation

8.1. It is our intention to change the proportion of the current long-term models of care being delivered, to help more people stay in their own home or tenancy and to develop new models of care to manage Hertfordshire's future demand for supported accommodation. To meet demand by 2025, we would like to stimulate the market to deliver:

Stillidate the market to deliver	
Care group	Future intentions
People with physical and/or learning disabilities or mental ill health, Autism or Asperger's	Actively reducing long stay residential care home places
	Greater investment in supported living type services where people have their own tenancy, for ages 18 – 65 years
	Development of communities with mixed accommodation tenures
	Accommodation separate from flexible care models
	Review of out-of-county placements: - Young people - Transforming care
	Capital contributions requested for key HCC sites where good value accommodation can be provided
	Increased take up of direct payments to fund the care element

⁵ One Public Estate strategy here

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Care group	Future intentions
	Flexible contracting models which will enable the market to respond to crisis and planned admissions
	Development of care group specific accommodation for older people with learning disabilities

- 8.2. A key priority will be to provide accommodation that supports people for as long as their care needs can be met in that setting. This will mean that accommodation should be separated out from care and support needs wherever appropriate, to allow people choice and control over how their care needs can be met.
- 8.3. Demographic projections show that Hertfordshire will need a minimum of 600 new supported living places for younger people with disabilities before 2025. Critical to this market development will be on building relationships with care providers based on a shared view of the outcomes to be achieved, a common understanding of any constraints and an equitable distribution of risk.
- 8.4. We want to move to commissioning supported accommodation based on the outcomes being achieved with people rather than contract check-lists. People being healthy, safe and having meaningful occupation in their lives is most important. We will make targeted support available to providers to help them adapt and respond while we continue to develop a local infrastructure that supports people to have choice and control.
- 8.5. Existing accommodation provision which is owned by HCC will be reviewed continually to ensure it remains fit for purpose and is capable of supporting people as they age or as their needs develop and change. Capital investment by the County Council will be considered and 'One Public Estate' principles will be applied where applicable.
- 8.6. We will work to increase the availability of Hertfordshire based supported housing options for people that currently live outside of Hertfordshire, including young people placed in other local authority areas or those under the remit of the national 'Transforming Care' programme. Providers will be expected to work with a range of commissioners including the '0-25 Together' service who support adults with disabilities in that age range, transitioning from Children's Services to Adult Care Services.
- 8.7. In order to ensure the right mixture of tenures and deliver growth in key services, we will take into consideration private sector growth and investment, social and private rental markets and incentives for people 'downsizing'. This will allow opportunities for working with a range of partners to deliver accommodation/housing, beyond the traditional providers. In order to identify

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- these opportunities, there will be a collaborative approach at a local level with district and borough councils.
- 8.8. We will work with housing providers to ensure their models of housing management support are aspirational and promotes recovery for people with mental health conditions, so that they can support people to live more independently and encourage people to move away from provision that is no longer suitable for their needs. This approach will alleviate issues such as creating dependency on care services and bottlenecks in care provision that prevents further referrals for support.
- 8.9. Development of transitional step down services to support people as they prepare to learn to live in the community, and to help prevent the escalation of crisis or out of county placements, is a priority. These types of models will remove pressure off inpatient units and lead to cost-effective delivery of services in a least restrictive environment. Voids risks for any move on placements will be managed with housing providers.
- 8.10. We will encourage supported housing providers to take a flexible approach in making housing available for people with a wide range of needs and consider new business models to enable this. This will include considering ways of working which could enable providers to invest more flexibly in the right developments and manage tenancy supply more flexibly.
- 8.11. The Strategy will explore and risk assess the issue of long term affordability for tenants and take into consideration the proposed changes to the Local Housing Allowance.
- 8.12. The use of capital budgets to support housing associations at the outset of any developments, by way of subsidy, to lower the rents that could be charged going forward. The Strategy will support the feasibility of HCA grants or Recycled Capital Grants to give the ability to have an element of sales and provide cross-subsidy from those sales or from free land

9. The road to market

- 9.1. To support, enhance and incentivise the care market across a range of care needs and age groups, we will:
 - Promote investment in supported accommodation in Hertfordshire in partnership with local councils, providers and the health system
 - ii) Communicate and update our predicted demand for supported accommodation in Hertfordshire, recognising and providing options where demand is greatest for social housing, shared ownership and private provision.
 - iii) Open dialogue with any and all potential partners for creative and sustainable ideas about the best ways to develop and provide the

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supported accommodation and services that Hertfordshire needs. To support this, we will:

- Use different and flexible contract models to ensure that both (a) larger national organisations with the ability to mobilise at sufficient scale, and (b) smaller local organisations with innovative ideas and the local knowledge necessary to develop provision that meets local needs will be able to work with the County and District Councils of Hertfordshire to fulfil this strategy.
- Encourage new and innovative approaches to capital finance and mixed tenure development in order to make supported accommodation a realistic choice.
- iv) Develop partnerships to identify and secure the funding necessary for the delivery of supported accommodation in Hertfordshire. Potential sources will include private developer contributions, HCA funding, and other assets and capital funding programmes the Council and partner district and borough councils are able to access.
- v) Share information about potential sites that the council may have that could be suitable for such developments, and work in partnership with the district and borough councils and developers to identify further appropriate sites.
- vi) Take to elected members proposals to make available a capital programme designed to support large and small scale developments
- vii) Consider the level of need in smaller settlements, alternative service models and the role of existing supported accommodation alongside any potential new developments.
- viii) Actively explore and seek out organisations operating at both local and national levels who are looking to invest in partnership with councils.
- ix) Undergo the necessary procurement exercises to secure a range of development and service partners capable of delivering supported accommodation at scale and pace, in accordance with local, national and EU procurement rules, and in compliance with State Aid rules.

9.2. The principles to underpin this strategy will be to make best use of and work in partnership to maximise opportunities for:

- i) Developing county council and district and borough council owned or purchased sites
- ii) Encouraging private development and mixed tenure schemes
- iii) Exploring sites owned or purchased by developers
- iv) Using existing schemes to realise full potential
- v) Re-modelling of older schemes to realise full potential
- vi) Developing supported accommodation in partnership with the NHS
- vii) Securing S106 funding

10. Supporting communities

- 10.1. Care models will reflect the types of supported accommodation and/or support needs people may have. This will include:
 - i) Services that support existing arrangements through rapid response principles to prevent things like tenancy breakdowns or carer breakdowns, for example
 - ii) Non-regulated care which may include funding streams such as Housing Related Support or other floating support type services
 - iii) Regulated care regardless of setting



10.2. These models will be set up through accreditation frameworks to allow some support to be independent of accommodation to allow greater flexibility for individuals and the wider system.

10.3. In order to ensure people have independence, are empowered and enabled to make choices about their care and support needs, we will:

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- Actively involve people in the commissioning of care and support services as part of the commissioning cycle and offer a suitable range of accommodation options.
- ii) Work with local district planners and property developers (both social and private) to secure an appropriate mix of accommodation allowing for mixed tenures to support the development of communities; this will include nominations rights, social rented and direct purchasing by people.
- iii) Aim to significantly alter the market mix for residential and nursing care for older people, as well as residential care for people with LD, by divesting in some areas to achieve growth in other areas. This will be done through a mixture of new contractual vehicles and use of capital investments as appropriate.
- iv) Work with local district accommodation boards to develop local opportunities within a countywide framework of responding to accommodation and housing need.

Implementation Plan for xx District/Borough Council

Project ID	Project Name & Intended Outcome	Project Leads	Estimated completion date	Status	Comments/Update

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HERTFORDSHIRE COUNTY COUNCIL

CABINET MONDAY 10 JULY 2017 AT 2.00PM

Agenda Item No.

6

WEST HERTFORDSHIRE HOSPITALS TRUST – STRATEGIC OUTLINE CASE

Report of the Director of Adult Care Services

Author:- Edward Knowles, Assistant Director – Health

Integration (Herts Valleys) (Tel: 07812 324788)

Executive Member/s:- Colette Wyatt-Lowe, Adult Care and Health

1. Purpose of report

1.1 To present a summary to Cabinet of West Hertfordshire Hospitals NHS Trust's (WHHT) Strategic Outline Case (SOC) for the provision of acute hospital services in West Hertfordshire and request that Cabinet agree that the Council formally responds to WHHT.

2. Summary

- 2.1 WHHT has formally written to all local partners in the Hertfordshire and West Essex Sustainability and Transformation Plan footprint, including the Council, to seek support for the preferred way forward as described in the SOC summary specifically for acute hospital services in West Hertfordshire to continue to be provided from the existing hospital sites at Watford and St Albans. The letter is attached at Appendix A. The summary of the SOC is attached at Appendix B and the full SOC is available on-line and referenced within the background documents section of this report. With the support of partner agencies, WHHT will seek approval from NHS England to allow it to continue to work up an Outline Business Case.
- 2.2 Section 4 of this report highlights the key elements of the SOC and the process by which it reached its preferred way forward.
- 2.3 The Director of Adult Care Services recognises the need for change to the operating and working environment at Watford General Hospital since the quality of the estate contributes to some of the key challenges and performance issues faced by the hospital and by Council staff operating in the hospital.
- 2.4 It should be noted that a Greenfield site, though ruled out on the basis of affordability, would offer significant opportunities. However, WHHT

have identified their preferred way forward as the most realistic means in terms of capital request, of meeting the urgent need to develop a safe and effective solution before the estate and performance deteriorates further.

2.5 The SOC was considered by the Health Scrutiny Committee at its meeting on 8 November 2016.

http://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/599/Committee/12/Default.aspx

In its discussion, members considered that a new build in a Greenfield site would be the best solution if there were no funding constraints; however, given the financial challenges, the rebuild and hub option was more realistic and the only plan that was financially achievable. Members also suggested it was possible to remain committed to the long term aspiration of a new hospital whilst fully supporting the more financially realistic and deliverable re-build and hub option. The Committee agreed that the Chairman write a letter to NHS England and local MPs requesting that in an ideal scenario funding could be allocated for a centrally located new build however, understanding the current financial climate, it should be noted that the Committee supported the preferred rebuild and hub option; and that funds be identified and committed as early as possible to allow planning to take place.

2.6 The Council is also working closely with Princess Alexandra Hospital in Harlow, which serves Hertfordshire residents in the east of the county, in their work to develop a SOC for capital investment. This work is at an early stage, although it is important that all Hertfordshire residents have access to acute care delivered in fit-for-purpose facilities.

3. Recommendation/s

3.1 The Adult Care & Health Cabinet Panel will consider a report on this item of business at its meeting on 3 July 2017. The Panel will be invited to recommend to Cabinet that Cabinet agree:

a formal response is made to the letter received from WHHT stating that the Council recognises the attraction of an entirely new hospital on a site that would be convenient to the residents of the whole area served by the Trust but understands that, if early funding is not available to progress such a project, patient services and safety may be put at risk. Therefore, should it be impossible to develop a new hospital swiftly, the Council would support West Hertfordshire Hospitals NHS Trust's application for funding to enhance the Trust's buildings and facilities as outlined in the Strategic Outline Case. The form of the

- letter is to be agreed by the Director of Adult Care Services, in consultation with the Executive Member.
- 3.2 The recommendation/s of the Cabinet Panel will be reported orally at the Cabinet meeting and circulated to Members in the Order of Business.

4. Background

- 4.1 In November 2014, *Your Care, Your Future* set out a strategic vision for the future of health and social care services in west Hertfordshire to ensure that patient care is joined-up, better co-ordinated and can be accessed closer to home. This vision for west Hertfordshire has been reiterated in *A Healthier Future*, the Hertfordshire and West Essex Sustainability and Transformation Plan (STP).
- 4.2 The Strategic Outline Case (SOC) is a key document required by NHS England as part of any major NHS estates development. A SOC appraises the main options for transformation and outlines a preferred way forward.
- 4.3 The WHHT SOC, as summarised in Appendix B, sets out the acute hospital transformation required in order for it to support the reconfiguration of services in the *Your Care, Your Future* programme.
- 4.4 WHHT notes that the current estate does not provide the required capacity and that it suffers from major functional suitability issues that adversely impact on patient care and experience and presents a significant risk to business continuity, which will put patient safety at risk if nothing is done. WHHT also notes that improvements in their estates are necessary to support WHHT's financial sustainability.
- 4.5 The SOC has been developed by WHHT taking into account future demand, operational considerations and patient flow. In addition, WHHT and Herts Valleys Clinical Commissioning Group undertook a series of public consultation and engagement activities around the development of the SOC.
- 4.6 An initial long list of options was assessed against non-financial criteria including access, patient experience, deliverability and strategic alignment. The resulting short list of options was then taken forward for more detailed economic and financial analysis.
- 4.7 Following this analysis, the SOC rules out Greenfield sites and concludes that the preferred way forward is for the Watford General Hospital to continue to be the location of emergency and specialised care and for the St Albans City Hospital site to continue to be the location for planned care.

4.8 If the SOC is approved by NHS England, further analysis will be undertaken on options including a new build on the Watford General Hospital site, a redevelopment of the Watford General Hospital site and a redevelopment of the St Albans City Hospital site. It is likely that the preferred approach would balance new build with redevelopment and refurbishment of existing buildings to provide the best value for money.

5. Equalities implications

- 5.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.
- 5.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.
- 5.3 The Equality Act 2010 requires the Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 5.4 As WHHT has developed the SOC it will need to consider the impact of its proposals on any individual or group with protected characteristics as part of the development of their business case and the Council will input into as required.

Background documents

• Your Care, Your Future – http://hertsvalleysccg.nhs.uk/your-care-your-future/the-your-care-your-future-vision

 West Hertfordshire Hospitals Trust Acute Transformation – Strategic Outline Case (February 2017)

http://www.westhertshospitals.nhs.uk/about/board_meetings/2017/february/documents/ITEM_2a_WHHT_AcuteTransformation_SOC_v1-0_170203.pdf

Appendix A- Correspondence from WHHT

Appendix B- SOC Summary

Appendix A – Correspondence from West Hertfordshire Hospitals Trust

Subject: STP SOC Presentation - email from Helen Brown

Importance: High

Dear Colleague,

Re: West Herts Hospitals NHS Trust Strategic Outline Case (SOC)

As you will be aware the Trust has been working over the past year to review the options for the redevelopment of its hospitals to meet future service needs and address the very poor condition and suitability of its existing estate infrastructure. This work has been undertaken jointly with HVCCG and is fully reflective of Your Care, Your Future and STP transformation and sustainability strategies.

The WHHT Trust Board approved a strategic outline case for the redevelopment of its estate in February 2017.

The SOC recommends the redevelopment of the Watford and St Albans Hospital sites, with emergency and specialist elective care provided at Watford and St Albans Hospital further developed as a planned care centre. As set out in Your Care, Your Future, Hemel Hempstead General Hospital will be redeveloped as a local health facility with a range of urgent care, diagnostics, outpatient and primary care facilities.

A wide range of stakeholders were engaged in the development of the SOC and HCC scrutiny committee has confirmed its support for the preferred way forward although they have also stated a clear preference for new build solutions.

Please find attached a copy of the SOC together with a summary briefing pack for partners and some FAQs that relate particularly to the decision not to recommend the greenfield site option.

As part of the review / approvals process we have been asked to demonstrate support from STP partners for the SOC. Could I therefore please ask you to formally confirm your support for the SOC by **Friday 23**rd **June**.

I would be grateful if in the meantime you could confirm receipt of this letter and confirm the process you expect to follow internally in order to provide this formal confirmation of support, with any key meeting dates. Please do let me know if you anticipate any difficulties with securing organisational support so that we can discuss how best to address any concerns.

If you require any further information or would like a face to face briefing or presentation to a relevant decision making body please do let me know so that this can be scheduled in during May or early June.

	U	U	,
early June.			
Thank you			

Yours sincerely

Helen Brown

Deputy Chief Executive West Hertfordshire Hospitals NHS Trust

01923 217388 07931 178224



Appendix B



Acute Transformation Strategic Outline Case

Briefing for STP Partners, May 2017













Overview

- 1. Your Care, Your Future and the STP for Hertfordshire and west Essex have set out a fundamental change in the way services should be delivered, and this is reflected in our future vision for our hospitals.
- 2. WHHT's current estate has poor functional suitability and represents a serious risk to business continuity; doing nothing is not an option.
- 3. Estate improvements will support new ways of working, leading to both efficiency and quality improvements, improving WHHT's income and expenditure position in the long term.
- 4. The Strategic Outline Case (SOC) rules out greenfield options and seeks approval to do more detailed analysis to confirm required works at WHHT's existing sites.
- 5. There is a spectrum of possible works to meet local requirements, but the SOC sets out two main options.

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1. Your Care, Your Future and the STP for Hertfordshire and west Essex have set out a fundamental change in the way services should be delivered, and this is reflected in our future vision for our hospitals

Your Care, Your Future has set out a future model of care to address an urgent case for change

Your Care, Your Future has established a compelling case for change for the local health economy:

- Changing population needs A rapidly ageing population and more people with long term conditions
- Quality Increasing A&E attendance and emergency admissions are placing pressure on services
- Sustainability Providers are generating increasing deficits and the workforce is under pressure

The future model of care addresses these factors based on the following principles:

- Greater focus on prevention
- Care closer to home
- More joined-up patient centred services
- Sustainable for the future

As part of the STP, HVCCG has forecast the following impacts over the next six years:

- 35% reduction in A&E attendances
- 13% reduction in elective admissions
- 28% reduction in non-elective admissions
- 25% reduction in outpatient appointments

WHHT needs to reconfigure its estate to deliver sustainable, high quality acute care for the next 20 years, in support of the Your Care Your Future model of care

In developing our plans for acute hospital services of the future, we have assumed:

- The Your Care Your Future impacts (outlined above) will be achieved by 2025/26
- The same percentage reductions will be further achieved between 2026/27 and 2035/36
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The Your Care, Your Future model of care will transform the services being delivered from acute hospital sites

A greater focus on prevention and delivering more care closer to home will change the care provided from acute hospital sites:

- There will be a reduced number of admissions (relative to population size) due to pathway redesign and a move from unplanned to planned care
- But, those who are admitted are likely to be higher complexity

	2015/16	202	5/26	203	5/36
Population	590,000	665,000	+13%	749,000	+27%
Forecast activity without Your Care, Your Future interventions					
Elective admissions	7,582	9,427	+24%	11,733	+55%
Non-elective admissions	54,395	68,507	+26%	86,111	+58%
Day cases	37,337	47,700	+28%	62,679	+68%
Outpatient appointments	454,557	677,663	+49%	1,010,274	+122%
Forecast activity with Your Care, Your Future interventions					
Elective admissions	7,582	8,184	+8%	8,867	+17%
Non-elective admissions	54,395	54,307	+0%	56,965	+5%
Day cases	37,337	47,700	+28%	62,679	+68%
Outpatient appointments	Agenda F 454,557	ack 74 of 274 513,436	+13%	600,023	+32%

2. WHHT's current estate has poor functional suitability and represents a serious risk to business continuity; doing nothing is not an option

WHHT's current estate does not meet current standards and cannot support modern healthcare needs

The WHHT estate does not meet current NHS building standards expected for acute hospitals:

- Only 10% of the WHHT inpatient bed base is in single rooms
- Inpatient ward areas are based on six bedded bays (rather than four) and are half the required size
- The neonatal unit is only 30% of the required size
- The delivery suite rooms are only 44% of the required standard

Further specific examples demonstrating the poor functional suitability of the WHHT estate include:

- Patients being transported between the main clinical buildings in WGH must travel via an underground **service corridor** used for domestic and clinical waste. stores deliveries and catering services.
- Many buildings have reached end of life and are no longer fit for purpose. Even with major refurbishment they could not be considered suitable for clinical services.

Insert photo

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A severe shortage of facilities such as waste disposal, linen storage and staff rest facilities adversely impacts on operational efficiency and staff and patient experience. Agenda Pack 76 of 274

WHHT's current estate is a significant risk to business continuity and the cost of maintaining it are escalating

Over 68% of WHHT's total estate, and 80% of the WGH site, is assessed to be in 'poor' condition or worse and backlog maintenance is estimated at over £100m.

A number of serious business continuity incidents have occurred over the last year:

• Closures or restrictions of use for operating theatres at WGH and SACH due to failures of ventilation

systems

 Loss of beds or clinical activity due to water ingress following heavy rainfall or failures in water distribution pipework (frequent at all sites)

 Frequent sewage ingress into clinical areas (Emergency Department, WACS and Radiology at WGH) due to failures of wastewater system





- Road collapse outside main entrance at WGH due to failure of underground duct
- Failures in steam distribution pipework leading to frequent loss of heating and hot water in clinical areas, particularly across WGH site

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3. Estate improvements will support new ways of working, leading to both efficiency and quality improvements, improving WHHT's income and expenditure position in the long term

A redevelopment of the estate will provide WHHT with the opportunity to properly exploit advances in hospital care

The nature of acute hospital care is changing and so WHHT's estate must be redeveloped to allow exploitation of these advances, and provide flexibility for the future. For example:

Telemedicine

Cumbria and Lancashire Telestroke Network, Aberdeen Royal Infirmary

Description

- Consultants provide clinical advice using an HD camera and monitor.
- Can be used to provide advice to other healthcare professionals in remote locations or out of hours.

Benefits

- Consultants spend less time travelling between sites.
- Available 24/7, leading to faster diagnosis.
- Quicker initiation of the correct treatment.
- Improved recovery rates for patients.





Virtual outpatient clinics

Lancaster Royal Infirmary

Description

Health professionals use HD video screens to have consultations with patients without being in the same 274 room.

Benefits

- A proportion of consultation rooms can be ~50% smaller, allowing space to be used for other purposes.
- Faster access for patients.
 - Reduced travel time and parking for patients.

A redevelopment of the estate will provide WHHT with the opportunity to properly exploit advances in hospital care

Barn theatres

Wrightington Hospital, Lancashire and Broadgreen Hospital, Liverpool

Description

- Open-plan surgical area with an ultra-clean air canopy to prevent spread of infection.
- Particularly appropriate for orthopaedic surgery, involving broadly repetitive processes.

Benefits

- Enables savings on overall floor space, and therefore cost.
- Allows surgeons to improve their knowledge and, in the long run, improve patient outcomes.





Endoscopy pods

Chase Farm Hospital

Description

- Each patient has their own trolley space, and ensuite toilet.
- The pod may have a fixed door or

Agenda Pack 80 of 227 to the front.

Benefits

- Space efficient method of eliminating mixed sex accommodation, in line with guidance from the Joint Advisory Group of GI Endoscopy (JAG)
- More privacy and dignity for patients.

Estate improvements are necessary to secure WHHT's financial sustainability

Investing in our estate will increase our annual expenditure:

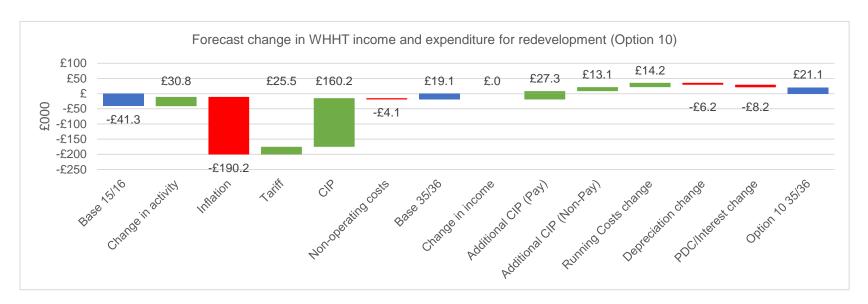
- In the SOC we have assumed that the required capital investment can be funded by PDC:
 - PDC incurs a charge of 3.5% of the net asset value per year
 - The change in annual costs to service a capital investment of around £600m will be around £15m
- The change in annual costs would be different if the capital investment was funded through private finance (e.g. PF2):
 - The annual cost of capital would be higher, perhaps around 5% of the debt
 - However, this approach would enable risk transfer to the private sector partner, which should ultimately reduce the overall cost to WHHT

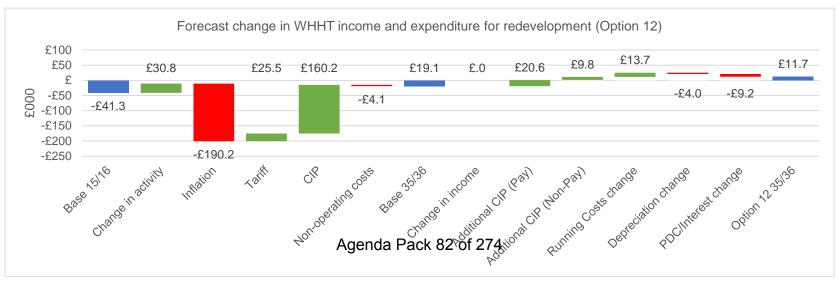
But, investment in our estate will lead to financial savings for WHHT:

- Reduced operating costs, as a result of increased efficiencies enabled by the new estate
- Avoidance of future high estates running costs due to the current estate deteriorating

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Forecast change in WHHT's income and expenditure





4. The SOC rules out greenfield options and seeks approval to do more detailed analysis to confirm required works at WHHT's existing sites

The SOC provides evidence to rule out greenfield options but more work is required to confirm required works

The SOC considered:

- The future location of the emergency & specialised care site
- The future location of the planned care site
- Construction works required at both sites

A greenfield site has been ruled out for both the emergency & specialised care site and planned care site:

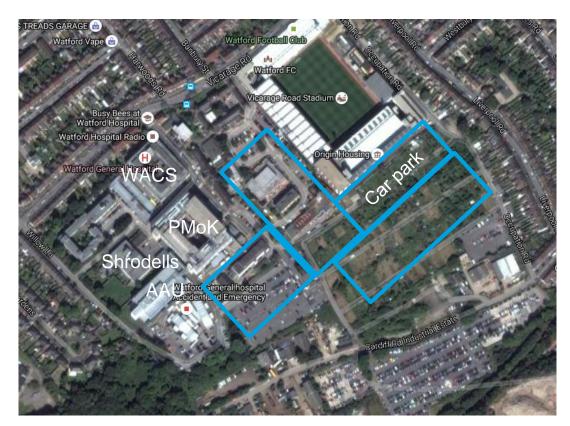
- Affordability It would cost significantly more to develop a greenfield site than WHHT's existing sites, and it is unlikely that investment would be financially sustainable in the long term.
- Value for money It would take much longer to develop a greenfield site and the potential extra benefits are not sufficient to justify the extra cost and additional risk involved.

The proposed preferred way forward is therefore for acute hospital services to continue to be provided from WHHT's existing estate at Watford and St Albans

- The SOC seeks approval to undertake more detailed design work to establish the implementation approach which is best able to balance value for money and affordability.
- This is likely to balance new build with redevelopment and refurbishment of existing buildings, aiming to achieve as close to new build as possible to ensure the best possible patient experience, with early benefits realisation.
- The Outline Business Case (OBC) will cogeidar Rable 84vofr 234 are necessary at each site to meet the requirements, considering the full range from 'Do Minimum' to full new build.

5. There is a spectrum of possible works to meet local requirements, but the SOC sets out two main options

New build on Watford General Hospital site (Option 10)

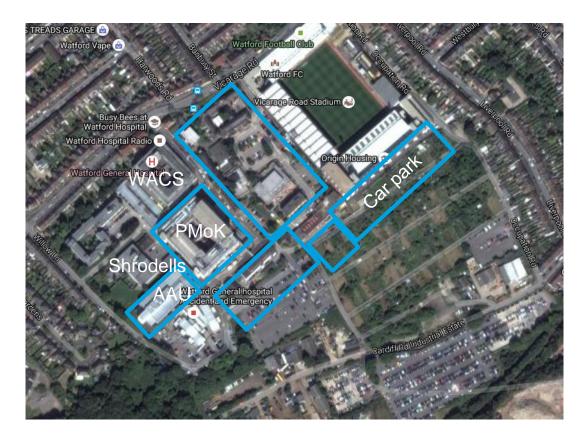


Note: illustrative only, preliminary design work underway

- A 100% new build option can be achieved on land adjacent to the existing WGH site.
- This is due to the flexibility offered by the Watford Health Campus redevelopment.
- The works could be phased, with existing facilities vacated as new facilities open.
- The main Princess Michael of Kent (PMoK) and Women's and Children's Services (WACS) buildings would be demolished and the land made available for disposal once vacated.
- The Acute Assessment Unit (AAU) and Shrodells unit would support transition and then could be disposed of if no longer needed.

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Redevelop Watford General Hospital site (Option 12)



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- A redevelopment of the estate would have to be phased, with existing facilities vacated as new / redeveloped facilities open.
- In this option PMoK and the AAU would be retained:
 - PMok would undergo a major refurbishment and would contain inpatient wards and theatres.
 - AAU would undergoing a medium refurbishment and provide inpatient ward space.
- The WACS building would be disposed of or converted to offices.
- Shrodells would support the transition and then could be disposed of if no longer needed.
- A significant amount of new build (57% of the final estate) has been factored in to this option for major clinical services

Redevelop St Albans City Hospital site (Options 10 & 12)



- Both options involve a redevelopment of the SACH site.
- The Gloucester and Runcie Wings would be retained:
 - The Gloucester Wing would undergo refurbishment and would contain the urgent care centre, outpatients and radiology.
 - The Runcie Wing would undergo refurbishment and would contain day surgery and inpatient wards.
- The Moynihan block would be demolished to make room for a new build theatre block.

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All options require significant capital investment

- We have developed an estimate of the capital investment required to pursue each option, based on advice from professional project and cost management consultancy Turner & Townsend.
- The work to develop these estimates follows HM Treasury and NHSI guidance, including an adjustment for optimism bias appropriate for SOC stage.
- The required investment ranges from £290m to £641m in 2016/17 prices, depending on the scale of works undertaken.

£m	New Build (Option 10)	Redevelopment (Option 12)	Do Minimum (Option 13/14)	
NETT works costs	256	229	115	
Typical abnormals and risk	52	41	23	
Non-work costs, equipment and fees	108	95	51	
Optimism bias adjustment	104	92	45	
Transition costs	15	13	7	
VAT	107	94	48	
Total	641	566	290	

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We want to gain support for our SOC so that we can move forward to OBC stage

- We have developed a SOC for our proposed acute transformation that:
 - Establishes a compelling case for change for the acute hospital estate in west Hertfordshire.
 - Provides a sense of scale for the size of acute hospital estate required over the next 20 to 30 years.
 - Rules out greenfield options as the future location of acute hospital services.
 - Confirms that there are a number of feasible options for redevelopment of WHHT's current estate to meet future requirements, and that these will improve our financial sustainability.
 - Sets out clear parameters to be addressed at OBC stage.
- We are now looking for support from our STP partners for this SOC, so that we can move forward to OBC stage:
 - We will refine the demand and capacity modelling, based on the work being done by the STP, to confirm the requirements of the future acute hospital estate.
 - We will then undertaken more detailed design work to consider what works are necessary at both Watford General Hospital and St Albans City Hospital sites to meet these requirements, considering the full range from a 'Do Minimum' refurbishment to full new build.
 - This will allow us to establish the implementation approach which is best able to balance value for money and affordability, and confirm the most appropriate commercial approach to deliver it.

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HERTFORDSHIRE COUNTY COUNCIL

CABINET MONDAY 10 JULY 2017 AT 2.00PM

Agenda Item No.

7

LEARNING DISABILITY TRANSFORMATION

Report of the Director of Adult Care Services

Author:- Helen Maneuf, Assistant Director Planning &

Resources (Tel:01438 845502)

Executive Member:- Colette Wyatt-Lowe – Adult Care and Health

1. Purpose of report

1.1 To request that Cabinet agrees the closure of the current Invest to Transform Bid related to the 'Accommodation for Independence Project' and agrees a new Invest to Transform Bid (ITT), designed to deliver better choice and control in relation to accommodation for people with learning disabilities, and improve value for money for spend in this area using a 'whole systems' approach.

2. Summary

- 2.1 Cabinet agreed an investment of £1.65million of Invest to Transform monies in November 2015. The monies were allocated over four years to fund a team to facilitate changes and achieve savings through an 'Accommodation for Independence Programme'. The premise of the programme was to facilitate the large-scale conversion of residential care homes for people with learning disabilities into supported living accommodation.
- 2.2 In November 2016 the government launched a consultation proposing changes to the funding framework for supported housing as part of its implementation of Universal Credit. The proposed changes introduce a level of uncertainty for housing providers which means that there is less willingness from residential home providers to pursue conversion to supported living. The basis therefore of the original proposal is no longer achievable.
- 2.3 Nonetheless, accommodation and the associated care / support delivered into specific settings for people with learning disabilities is a major area of council expenditure and a strategic approach is necessary to deliver effective solutions which offer good outcomes for individuals and provide value for the public purse. The national policy

direction is towards more choice and control, and options that promote independent living. Central to this is ensuring there are more 'settled accommodation' options that give people control over where they live and how they are supported.

2.4 The paper therefore proposes a new Invest to Transform bid for £1.14m over three years as part of the ACS Adult Disability Service Efficiency Programme. The new bid is to create strategic planning and commissioning capacity for the service, and deliver solutions that will reduce the cost of future demand to the council, particularly in relation to accommodation costs.

3. Recommendation/s

- 3.1 The Adult Care & Health Cabinet Panel will consider a report on this item of business at its meeting on 3 July 2017. The Panel will be invited to recommend to Cabinet that Cabinet:
 - a) agrees the closure of Invest to Transform Bid for the 'Accommodation for Independence Project'
 - b) agrees a new Adult Disability Service Efficiency Programme Invest to Transform Bid designed to deliver better choice and control in relation to accommodation for people with learning disabilities, and improve value for money in this area by taking a 'whole systems' approach.
- 3.2 The recommendation/s of the Cabinet Panel will be reported orally at the Cabinet meeting and circulated to Members in the Order of Business sheet.

4. Background

Original Invest to Transform Bid: Accommodation for Independence

- 4.1 In November 2015, Cabinet agreed an investment of £1.65 million of Invest to Transform monies allocated over four years to fund a team to facilitate changes and achieve savings through an Accommodation for Independence Programme. The key objectives of the programme were to:
 - significantly reduce the use of institutional type residential care provision in favour of promoting the development of more sustainable future proofed Supported Living services.
 - convert up to 50% of existing residential care to supported living over 3 years.

http://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeeting s/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/338/Committee/8/De fault.aspx

- 4.2 Savings of £7m were identified, predicated on the different funding arrangements in place in relation to supported housing where certain costs were eligible to be charged to Housing Benefit, in comparison with traditional residential care where costs fall to the county council.
- 4.3 The Government launched a national Supported Housing consultation in November 2016 proposing changes to the funding regime to take effect in April 2019.

https://www.gov.uk/government/consultations/funding-for-supported-housing

- 4.4 The proposed changes will see a limitation on the level to which Supported Housing costs will be covered by Universal Credit.

 Alternative mechanisms are being considered by which to distribute the difference between amounts currently funded by Housing Benefit and amounts which will not be fundable under Universal Credit. This has created high levels of uncertainty for housing providers and a reluctance to change provision at this time, making the original premise of the bid invalid.
- 4.5 Whilst closure is recommended, the existing Accommodation for Independence project has delivered a detailed review of individual housing schemes and the development of options for future provision. A number of projects have been identified that will be pursued by the Integrated Accommodation Commissioning Team as part of 'business as usual activity'. Delivery of these schemes will generate ongoing annual revenue savings of £275k by March 2019. Costs incurred from the original £1.65m bid amount to £513k and therefore £1.14m is no longer required for this original bid.
- 4.6 The existing project has also identified learning points in relation to the intensive care management support required to work with people and families when considering a change in accommodation to ensure a successful outcomes. All of this must take place within a framework which is guided by what is in the best interests of the individuals concerned.

<u>Proposed New Invest to Transform Bid: Adult Disability Service</u> <u>Efficiency Programme</u>

- 4.7 The County Council's net budgeted spend on people with learning disabilities in 2017/18 is £153.2m. Benchmarking information (2015/16 actual data) demonstrates that Hertfordshire is a high cost authority for learning disability expenditure, indicating that Hertfordshire's social care services for adults aged 18 to 64 (of which learning disability services form by far the greatest element) are some 9.4% more expensive on average than comparator authorities, after adjusting for expected regional cost differences.
- 4.8 The Adult Care Services Department has created an Adult Disability Service Efficiency Programme² which brings a 'whole systems approach' to delivering an efficient and effective service within budget. The programme recognises that the achievement of learning disability efficiency is a department-wide objective and drive. The approach aims to stabilise annual increases in care purchasing spend and maximise the amount of people supported within available resource. The programme has identified a lack of strategic planning and commissioning capacity and a need for the development of long-term and sustainable solutions. This is best done within a 'whole systems' approach based on best practice, and which requires:
 - Detailed knowledge of service users and costs paid to meet needs
 - Ensuring all opportunities to maximise independence are taken
 - Ensuring all social workers, commissioners, and providers work to achieve outcomes
 - Good partnership working with carers to achieve outcomes
 - Alignment in support levels between children and adult services
 - Good partnership working with NHS for those with very challenging behaviours
 - A workforce with the right skill sets to support this agenda
 - Housing strategies to support those who are suited to supported living
 - Housing and associated strategies for those with more complex needs
 - Culture change and time to achieve and embed new ways of working and service design.
- 4.9 A new Invest to Transform bid has been prepared which is attached at Appendix A. The intention of the bid is to create the capacity to support the drive towards efficiency and effectiveness that will see the County Council's spend profile move closer to other local authority comparators, reducing the cost of future demand to the council, particularly in relation to accommodation costs.
- 4.10 The Invest to Transform activity will focus on:
 - a) Putting in place the overall framework for efficiency set out in paragraph 4.7

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¹ LG Futures Financial Intelligence Toolkit 2016/17

² The Adult Disability Service comprises Learning Disability and Physical Disability services for adults 18-64

- b) Improving data, intelligence and strategic planning and commissioning capacity to analyse predicted demand, and working particularly with the Children's Services and Resources Departments to do this;
- c) Delivering strategies for effective demand management which will include a major procurement exercise in relation to supported living, and other options to secure supply of appropriate accommodation, working particularly with the Property Service.
- d) Providing the care management, specialist housing and project support to:
 - Improve access to mainstream housing for people with mild to moderate learning disabilities
 - Improve access to mainstream residential and nursing care for older people with learning disabilities.
- e) Ensuring sustainable arrangements at the end of the period of the Invest to Transform bid.
- 4.11 A series of milestones have been identified that will guide activity and there will be regular progress tracking. Performance indicators to measure achievement of benefits will include financial measures, such as per capita cost reduction, and wider measures such as service user experience.

5 Financial Implications

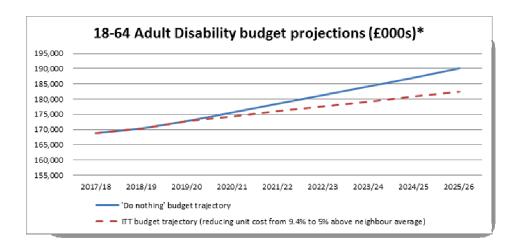
5.1 The table below summarises the efficiency requirements in the current Integrated Plan relating to adults with learning disabilities

	17/18	18/19	19/20
	£'000	£'000	£'000
Adults with Learning Disabilities	2400	3,100	5,600

- 5.2 The Adults Disability Service Efficiency Programme is targeted to deliver these amounts. Projects 2 and 3 in this bid will also support specifically the achievement of these efficiencies, for example the bid identifies £482k per annum of cashable savings in the work proposed to create access to mainstream residential accommodation for older people with learning disabilities.
- 5.3 Looking further ahead, the population of adults with learning disabilities in Hertfordshire is due to increase by 14.7% by 2030 and therefore, all things being equal, the council will need to expand future funding in overall terms.
- 5.4 The premise of the new Invest to Transform bid is to reduce the cost of future demand in this area of spend. The graph at paragraph 5.6

below models a reduction in per capita costs from 9.4% above nearest neighbour average (per the benchmarking report referred to in paragraph 4.7) to 5% above average by 2025/26. This percentage is felt to represent a realistic target given current performance, but work to improve data and cost information will help to understand the opportunities to achieve greater levels of efficiency beyond this.

- 5.5 The model uses IP figures to 2019/20 and beyond that assumes 0.6% annual population growth and underlying inflation of 1%. The thick line or 'do nothing' projection therefore assumes per capita costs increase 1% per year from 2020/21 onwards. The dashed line assumes this per capita cost increase can be made lower as a result of the Adult Disability Services Efficiency Programme and that these benefits start to arise from 2019/20.
- 5.6 By 2025/26, per capita costs are brought down by £1.5k per person from a 'do nothing' projection of £37.5k to £36k which results in a £7.7m annual financial benefit.



[* assumes existing budget projections as per the 2017/18 Integrated Plan to 2019/20 and thereafter 1% underlying inflation and population growth]

[* assumes relative reduction in unit costs from 2020/21 onwards from 9.4% to 5% above average]

- 5.7 The key risks in the model are around the timing and deliverability of the reduction in per capita costs, along with the assumptions on population growth and the underlying inflation rate. In particular a higher rate of inflation or population growth would see a much steeper increase in the 'do nothing' line.
- 5.8 The model will be able to be refined and its accuracy improved as a result of the proposals set out in the ITT bid, and the progress towards the reduction in costs will need to be carefully monitored.

- 5.9 The bid costs are £1.14m for creation of a staff team to deliver this activity to be incurred over the period August 2017 until July 2020. The costs cover:
 - a) Programme management for the Adult Disability Service Efficiency Programme
 - b) Commissioning leads for Supported Living procurement and the management of specific commissioning work strands
 - c) Care Management staff and management to oversee operational care management related tasks
 - d) Senior Estates officer to provide linkages between corporate property and support on suitability of property and associated opportunities.

6 Equalities Implications

- 6.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equality implications of the decision that they are making.
- 6.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment produced by officers.
- 6.3 The Equality Act 2010 requires the County Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 6.4 An Equality Impact Assessment has been undertaken which is attached at Appendix B.

Background Information:

Appendix A – Invest to Transform Bid Appendix B - Equalities Impact Assessment (EqIA)

Appendix A- Template for Business Case for ITT Bids

Service and Portfolio: Adult Care Services				
Project		Budget		
Sponsor:		Holder &	Sue Gale	
Sue Darker / Helen Maneuf		Budget Manager:	Sue Darker	

Project Name:

Adult Disability Service Efficiency Programme

Brief Project Outline:

To improve the management of growth in demand for services for people with learning disabilities and thereby improve value for money for spend, and control the cost of future demand.

Benchmarking information indicates that Hertfordshire's Learning Disability (LD) services are some 9.4% more expensive on average than comparator authorities, after adjusting for expected regional cost differences. Modelling indicates that bringing costs down to five per cent above average by 2025/26 could offer an annual financial benefit of £7.7m in comparison with costs that might be expected if no other action is taken¹.

The intention of the bid is to create the capacity to support the Adult Disability Service Efficiency Programme that will see the council's spend profile move closer to other local authority comparators, reducing the cost of future demand to the council, particularly in relation to accommodation costs.

The Invest to Transform (ITT) activity will focus on both:

- Driving forward the Adult Disability Service Efficiency Programme, putting in place the overall arrangements for efficiency in this area as identified in this bid document.
- Improving data, intelligence, strategic planning and strategic commissioning capacity to analyse predicted demand, and plan and deliver solutions for how it is managed,

and within the overall programme, specific pieces of activity associated with the Right Home / Right Time workstream:

- Improving access to mainstream housing for people with mild to moderate learning disabilities
- Improving access to mainstream residential and nursing care for older people with learning disabilities.

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¹ Further detail on caveats and assumptions later in document

Context

National Picture of Learning Disability Spend

Nationally LD spend is recognised as one of the more difficult areas of social care spend against which to achieve savings. Spend on LD service users has not reduced at the same rate as for other user groups over the five years to 2014/15². Councils are experiencing growth in demand of around 3% from new service users who have a learning disability.

Those councils which have developed more sustainable solutions for improving outcomes and efficiency in this service area have³:

- Detailed knowledge of service users and costs paid to meet needs
- Ensured all opportunities to maximise independence are taken
- A strong focus on ensuring all social workers, commissioners, carers and providers work to achieve outcomes
- Good partnership working with carers to achieve outcomes
- Reduced discrepancies in support levels between children and adult services
- Good partnership working with NHS for those with very challenging behaviours
- Developed a workforce with the right skill sets to support this agenda
- Housing strategies to support those who are suited to supported living
- Housing and associated strategies for those with more complex needs
- Appreciated the necessity for culture change and time to achieve and embed new ways of working and service design.

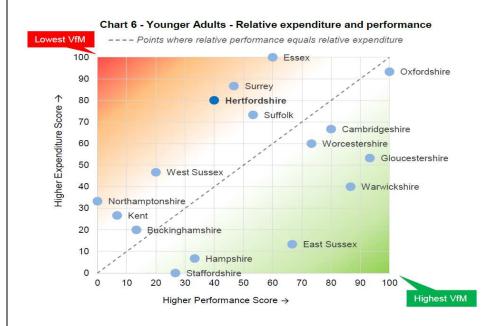
² LGA Adult Social Care Efficiency Project Agenda Pack 99 of 274

³ LGA LD Services Efficiency Report

Hertfordshire Picture of LD Spend

HCC budgeted spend on people with learning disabilities in 2016/17 is £152.4m.

Benchmarking information⁴ (2015/16 actual data) demonstrates that Hertfordshire is a high cost authority for Learning Disability expenditure, even after controlling for area cost differences:



Hertfordshire's pattern of comparatively high spend is likely to have continued in 2016/17, particularly since the LD service financial outturn for 2016/17 was £7.6m overspend. This outturn result continued a trend of increasing overspend pressure in the service in recent years:

Financial Year	2013/14	2014/15	2015/16	2016/17
	£'000	£'000	£'000	£'000
Final outturn LD	-2,129	478	4,324	7,619

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⁴ LG Futures Financial Intelligence Toolkit 2016/17 – NB chart shows spend for younger adults for all client

The Accommodation Challenge for People with Learning Disabilities

A major cost driver for LD is that of accommodation and care / support delivered into specific settings. The national policy direction is towards more choice and control, and options that promote independent living. Central to this is ensuring there are more 'settled accommodation' options that give people control over where they live and how they are supported. In this context, 'settled accommodation' means individuals having security of tenure in the medium to long term, in models where the individual's status as owner/ occupier or tenant allows them to access certain benefits and, if they wish, change their provider without having to move home.

Currently in Hertfordshire there are three main options for meeting personalised housing related needs:

- A place in a residential care home this is not 'settled accommodation' in terms
 of the above definition, although residential settings are still viewed as having an
 important role to play for certain care groups; the council funds care and 'hotel'
 costs
- 2. A place in supported accommodation this is 'settled accommodation' in terms of the definition, with users typically having tenant status; 'hotel' costs are often funded through benefits
- 3. Living at home with family carers.

The table below shows 17/18 budgeted LD accommodation / care purchasing spend:

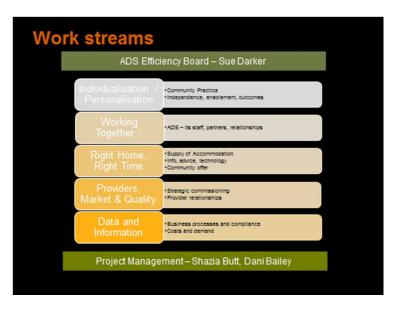
Category	Budgeted spend 2017/18 £'000
Adult Placements	863
Funded Nursing Care	(254)
Residential – long stay – gross	70,908
Nursing	790
Short Stay - gross	1,537
Supported Living	39,868
Total Residential Spend	113,713

Ensuring that all people with a learning disability are living in the right home environment in relation to their needs and aspirations is core to achieving individual outcomes and wellbeing, and also a key area in achieving value for money. In Hertfordshire work on this area has been ad hoc and opportunistic for a number of historical reasons; an effective approach requires new ways of working and a re-thinking of approach.

ACS is developing an Accommodation Strategy to work with new and existing partners to develop its accommodation ambitions locally. The strategy will seek to provide both large scale supported accommodation schemes (moving away from residential care) and locally responsive initiatives that help the council meet accommodation needs in an efficient and effective way.

Adult Disability Service Efficiency Programme

Building on the analysis in the LGA LD Efficiency report cited above, ACS has created an Adult Disability Service Efficiency Programme⁵ which brings a 'whole systems approach' to delivering an efficient and effective LD service delivered within budget. The programme recognises that this is a department wide issue and drive. The approach aims to stabilise annual increases in spend and maximise the amount of people supported within available resource, summarised in the diagram below:



The ITT bid seeks support for the overall Adult Disability Service efficiency programme approach and capacity to take forward the 'Right Home, Right Time' workstream; all proposed activity is also linked closely to the other workstreams in the diagram above.

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⁵ The Adult Disability Service comprises Learning Disability and Physical Disability services for adults 18-64

Cost Reduction Scenario Modelling

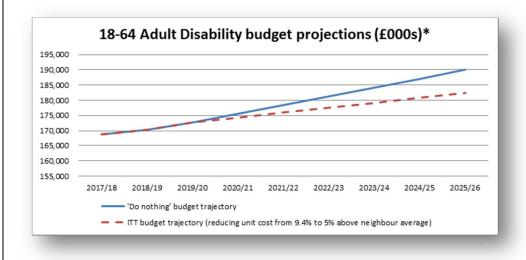
The population of adults with Learning Disabilities in Hertfordshire is due to increase by 14.7% by 2030 and therefore the council is likely to continue to need to expand LD funding in overall terms. This bid aims to support the drive to better cost management in the service with a view to improving value for money over the longer term and reducing the cost to the council of future demand.

The graph below models what would happen if per capita costs were to reduce from 9.4% above nearest neighbour average per the benchmarking report to 5% above average by 2025/26.

The model uses IP figures to 2019/20 and beyond that assumes 0.6% annual population growth and underlying inflation of 1%. The blue line therefore assumes per capita costs increase 1% per year from 2020/21 onwards. The red dashed line assumes this per capita cost increase can be made lower as a result of ADS efficiency programme. By 2025/26, per capita costs would need to be brought down by £1.5k from a 'do nothing' projection of £37.5k to £36k which results in a £7.7m annual saving.

The model assumes that the impact of the whole systems approach starts to be seen in 2019/20 which marks the point at which the thick and dashed lines start to diverge. This is a key milestone as the Council anticipate that by this date there is a new contractual framework for supported living along with property activity that will be improving the supply of suitable care and accommodation for people transitioning into accommodation.

The key risks in the model are around the timing and deliverability of the reduction in per capita costs, along with the assumptions on population growth and the underlying inflation rate. N.B. The model is applied across with Adult Disability Service as a whole including staffing costs.



- * assumes budget per IP to 2019/20 and thereafter 1% underlying inflation and population growth
- * assumes relative reduction in unit costs from 2020/21 onwards from 9.4% to 5% above average

ITT Bid: LD Efficiency

1. Project 1:

- a) Driving forward the Adult Disability Service Efficiency Programme, putting in place the overall arrangements for efficiency in this area, working with corporate departments, comparison with other council approaches, and ensuring the sustainability of new arrangements at the end of the ITT bid period
- b) Strategic capacity, management of future demands, improvement of management information, planning and service development activity
- 1.1. Page 2 of this document identifies the areas required in order to ensure value and effectiveness in relation to expenditure in this area. Whilst the current service has elements of many of these areas there is a need to ensure all these areas are sustained and embedded into standard practice. Project 1a) proposes a programme approach to deliver this and ensure the necessary focus and momentum. This project will also be responsible for embedding the new arrangements so that they are sustained beyond the lifetime of the bid period.
- 1.2. A further element of Project 1a) will be the formation of strong linkages with corporate services for example links with the Intelligence Team to support the development of better management information, and to links to property related activity including the work of the emerging PropCo. Activity will also take place to explore approaches with other councils particularly those showing better performance in the LG Futures benchmarking work.
- 1.3. Project 1b) builds on this to take forward the fundamental transformation of the strategic planning and commissioning capacity in this area. Key to this is developing management information that presents a 'single version of the truth' i.e. a consistent view between service data, finance data and commissioning information. At present management information is held in a variety of places across the organisation, and gives an incomplete and unreliable overview of demand. This makes it difficult to identify and plan ahead to fully understand the level of services required to meet needs and the level of accommodation support required. This in turn hampers the development of appropriate service models and leads to crisis management and reactive placements, which tend to be costlier in nature.
- 1.4. Currently there are fragmented commissioning pathways from the 0-25 operational team and education services into adult services. Additionally, there has been an absence of a strategic commissioning approach for adults with LD aged 18 and over. The absence of a strategic framework has created a difficult market environment, and supply side difficulties. Providers are reluctant to develop new models for support and services in the county. There is an opportunity for improved market engagement and for procurement activities to

drive new and innovative provision including from providers who currently are not trading in Hertfordshire.

- 1.5. Quality, timely and detailed information about service user needs as they move through transition is business critical in order to have effective control of spend. In addition to this, better data and information will support the identification of problematic trends in expenditure, and enhance the ability of commissioners to respond to these by developing appropriate, preventative and cost effective strategies for meeting need, with an ultimate aim of reducing the cost of future demand.
- 1.6. For example the 'LG Futures, Financial Intelligence Toolkit 2016/17- Adult Social Care Report', indicates that Hertfordshire spends proportionately more than comparator authorities on residential spend within the younger adults group, at 40.7% of total accommodation spend, compared to 37.5% for the nearest neighbouring authority and 31.5 % across England. A better understanding of what is driving this distribution of spend will facilitate alternative approaches.
- 1.7. Project 1b) will therefore develop and embed a data management system in order to undertake service user needs analysis and drive commissioning activity.
- 1.8. The project will also review commissioning arrangements to align processes across the department and in relation to the 0-25 service.
- 1.9. This activity will put in place the strategic capacity to deliver the broader LD Efficiency agenda. It will also give the capacity to take forward specific targeted activities, of which projects 2 and 3 below are examples of the sorts of approaches to be developed.

2. Project 2 - Right Home; Right Time - Access to Mainstream Accommodation

- 2.1. This project involves targeted work to support people with a mild to moderate learning disability to live as independently as possible, working in partnership with district/borough council housing services and the county council's Property Services Department. The objective is to identify and alleviate pressures created by either gaps in services or placements which have overtime become inappropriate.
- 2.2. For the existing group already in mainstream housing this project will:
 - (a) Provide appropriate support where this is lacking to sustain tenancies and avoid the need for costlier interventions at times of crisis
 - (b) Move people from supported living into mainstream accommodation with enablement. The Council estimate that there are around 60 people annually who would benefit from a move to mainstream housing with support

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2.3 For others still at home with parents this will support work to accommodate

people, when they wish for this and where appropriate, in mainstream housing thus reducing the need for more specialist forms of provision.

- 2.4 In principle this will:
 - (a) Reduce the cost of care for some service users who are 'over-provided' for:
 - (b) maximise the existing budget to allow for more people to access support within the spend
 - (c) enable people to achieve greater independence at the right time
 - (d) further develop community support where there are currently service gaps i.e. for low level housing related support for people in the community with a Learning Disability.
- 2.5 Spend analysis indicates 292 people are currently in supported living where spend is less than 10k per annum individually this is a total annual cost of £1,639,415 and average of £5,614 per person per annum. This equates to an hour of support a day and may be an indicator that mainstream accommodation could be beneficial for these individuals, and freeing resource for higher need individuals coming through transition. Care management support will be needed to conduct the care assessments and conversations to carefully support people in moving into settings as appropriate.
- 2.6 In addition and based on information from the Asperger's Team there are approximately 20 people currently who could benefit from living in mainstream housing with minimal support.
- 2.7 Through building on already established links with the county wide district Heads of housing group there is an opportunity for a 'mutually beneficial' arrangement in moving this forward. This will involve engagement from LD team managers taking active role in building local relationships and pathways to support with District Borough council housing services; this could also be an opportunity for the county council's own property strategy.
- 2.8 The Council will also alongside commissioners review the support offered by existing floating housing related support to this LD cohort to establish if further development of service models or investment could support preventative service and a move from social care provision.
- 3 Project 3 Right Home / Right Time: Supporting older people with a Learning Disability by accessing mainstream services.
 - 3.1 Currently the vast majority of people with a learning disability aged over 60 years live in either, small and specialist LD residential care homes or supported living. As these individuals age, some of the existing care settings are unable to meet their needs due to either the physical environment and/or personal care arrangements which are geared around supporting people with an LD. Whilst the aim is to keep all older people living in their own homes for as long as possible, inevitably sometimes needs cannot be best met within these limitations. At this point there is an opportunity to create a clear pathway to access services for older people in the same way as the general population. This thir/Agranitac Pack of this glfy 25 around creating the pathway and developing services for older people with LD, so the approach is embedded

in to business as usual.

- 3.2 Creating these pathways and developing mainstream residential services will ensure that older people with a learning disability have their needs met, create services to meet new need, and thereby maximise the efficient use of care budgets and service placements.
- 3.3 The total annual spend on people over 65 years of age with LD is £24,382,378. The current average cost per placement in LD is £1193 per week, and for older people in mainstream residential and nursing provision the current cost per placement is £575 per week. The difference on average is £618 per week per placement.
- 3.4 It is clearly unrealistic and inappropriate to move 392 older people out of their homes specifically to achieve savings. A significant saving however is possible with the movement of smaller numbers of people who are struggling to have needs met appropriately in their current care setting.
- 3.5 If at the appropriate time The Council were to place 20 people in Care home for older people with dementia and or mental health conditions at £575.32 the annual cost would be £599,943. The equivalent cost in LD residential placements at an average of £1193 would be £1,244,060. An approximate annual saving of £644,117 would be made for every 20 people placed.
- 3.6 The Council already have examples of older people with a learning disability in mainstream residential care as below case studies highlight;

Example A

Client Y (aged 66) was resettled form Cell Barnes hospital to Granta homes in Baldock in 1991. She has severe epilepsy, severe physical disability and is nonverbal. In 1999 she moved to Poppis Gardens in Ware as her care needs had increased. In the financial year 2014/15 the cost of placement at Poppis Gardens was £64,010. In that year her physical health deteriorated further and she was placed in Premier Court in Bishops Stortford. The Cost of that placement in 2017/18 is £49,809 to HCS and £8,150 to the health service for her nursing care contribution.

Example B

Client X (aged 62) in 2008/09 has a learning disability and was living in Stamford Avenue at an annual cost of £115,366. In 2013/14 she suffered a severe stroke and Stamford Avenue were no longer able to provide the care she needed. Client X moved to a BUPA Nursing home in Luton at an annual cost in 2017/18 of £34,560 to HCS and £8,150 to the health service for her nursing care contribution.

- 3.7 As part of the process the Council would need to ensure that any legal obligations are fulfilled i.e. court of protection applications and mental capacity processes completed in order to facilitate the moves.
- 3.8 In order to facilitate these moves LD operations would need to prioritise service users over 60 years old for review and care management support to identify and then enable appropriate individuals to move now or in the foreseeable future

4. Project Costs and Savings

Cost of the scheme (revenue and capital) and, where relevant, projected savings:

The main element of the bid costs are for creation of a staff team to deliver this activity. There is a need to invest additional resource for a period of time to create the strategic capacity required to deliver the transformational change required; it is not possible to free up existing resource to do this given the scale of the task and the need for operational teams to focus on day to day activity.

The assumption is that the team is established from August 2017 for two years until July 2019. A further residual amount is required from August 2019 until July 2020 for project completion and transfer to business as usual. In total £ 1,142k is required across the three year period from August 2017.

Staffing aspects cover the following areas of programme activity:

- a) Programme management for the Younger People's Efficiency Programme (1 M5 role) and admin support (1 H6 role) Project 1a)
- b) Commissioning leads for Supported Living procurement and the management of specific commissioning work strands including: establishing strategic commissioning arrangements, reviewing the linkages between commissioning teams and operational teams, stakeholder management, communications, systems development of management information for forecasting future need (2 * M3 roles) – Project 1b)
- c) Care Management staff and management to oversee operational care management related tasks including assessments of needs and reviews, and leadership around all aspects of service user and carer engagement (1 M4 role; 1 M3 role; 1 M2 role; 2 H9 roles) – Projects 2 and 3
- d) Senior Estates officer to provide linkages between corporate property and support on suitability of property, opportunities (1 M2 role) Projects 2 and 3

Costs are summarised below

1	Revenue Costs		WTE	17/18	18/19	19/20	20/21
2				£	£	£	f
3	Programme						
4	Programme Manager	M5	1	42,799	64,196	21,397	C
5	Admin officer	H6	1	19,552	29,326	9,774	(
6	Commissioning						
7	Commissioning Manager	M3	1	37,688	56,529	56,529	18,841
8		M3	1	37,688	56,529	18,841	
9	Care Management						
10	Manager	M4	1	40,194	60,288	20,094	(
11	Deputy	M3	1	37,688	56,529	18,841	
12	Advanced Practitioners	M2	1	35,142	52,710	17,568	(
13	Social Wokers	Н9	2	55,881	83,817	27,936	(
14	Estates						
15	Senior Estates Officer	M2	1	35,142	52,710	17,568	(
16							
17	Total			341,773	512,634	208,549	18,841
18							
19	Workforce Development			10,000	15,000	0	(
20	Comms			8,000	7,000	0	(
21	Service User Engagement			10,000	10,000	0	(
22							
23				369,773	544,634	208,549	18,841
24	Overall total						1,141,797

Project Savings and Benefits

Cashable revenue savings are estimated below:

	2017/18	2018/19	2019/20
Revenue Savings Older LD project – based on:			
7 people in year 1 15 people in year 2 onward	(224,952)	(482,040)	(482,040)

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Non-cashable revenue benefits: The bid document models a £7.7m reduction in future demand as set out above, subject to various assumptions which are detailed.

Wider benefits are mapped in the embedded document and shown in more detail at section 5 below:



Performance Monitoring

Progress will be monitored monthly at the Adult Disability Service Transformation Board with regular updates to Adult Care Service Management Board.

A series of milestones are proposed in section 5 below and accountability for these will be assigned to individual Transformation workstreams. This will allow the tracking of project progress.

The management information and data workstream will monitor and report on financial progress.

5. Benefits for each Project area	Timeline, August 2017 – August 2019	Outputs	Outcomes	Measures for Success
Transition for 0-25	Year 1	 Tool developed for recording the need for accommodation and other relevant data gathered - all year groups aged 14 -25 Needs of 14-25 year olds will be identified and recorded in line with tool Management Information shared with provider market and District/ Borough Councils 	Analysis will highlight the type of accommodation and level of need Commissioning analysis to align to procurement model requirements for SL (with cashable/ non cashable savings options)	 Commissioning strategies by district reflect 100 % full detail of need for 14-25 by April 18. Embedding of tool into business as usual for work of 0-25 and commissioning team in HCS i.e. regular management information is provided to commissioners to inform planning Use of assistive technology within accommodation setting is increased, 20 % increase year on year
	Year 2	 Second year group analysis completed for Year 10 to Year 14 Needs of 14-25 year olds identified and recorded in line with tool. Management Information shared with Provider market and District/ Borough Councils. Procurement for Supported Living Go Live 	 Analysis will highlight the type of accommodation and level of need Potential high need service users identified and 0-25 teams identify early case work on outcomes needed. Service developments begun to meet needs analysis by District Borough Council areas. Business process embedded into 'business as usual' in 0-25 teams and HCS Commissioning 	
Access to Mainstream Accommodation	Year 1	Existing care pathways to mainstream housing mapped		20 people per district are offered more appropriate leve

	 Partnership working approach agreed with ten District /Borough Councils ,and operational teams New care pathway pilot set up and trailed in two District Borough areas Care managers communications and/or trained on pathway development in pilot teams 10 service users moved in line with pathway in two pilots 10 people supported in existing tenancies in pilot areas 		of service independence
Year 2	 Agreement of District Borough councils to roll out programme across county and LD teams (explore option for PD SU's) Support Living providers facilitating an enabling pathway for people locally to move in a and out of specialist and mainstream provision with support 	 50 people move across Hertfordshire to mainstream housing from home or existing supported housing 50 people supported across county in mainstream housing Embedding of pathway completed across all ten District/ Borough councils and LD teams (and for PD groups). 	50 places are freed up countywide from people in traditional LD settings

Older people with a Learning Disability by accessing mainstream residential services	Year 1	 Identification by each District Borough area of two residential and Nursing homes which are able to admit older people with learning disability. Care managers and Nurses to identify individuals whose needs are not met by existing LD residential or supported living due to increasing frailty Consider contractual or fee changes with providers, commissioners Establish requirements for staff to be trained on adjustments needed for supporting people with a learning disability. Involve Nurses in LD teams as named link for the individual homes and arrange for them to deliver awareness training. Establish a process for CST to maintain the list of homes by District area 	 Contracts in mainstream residential are expanded for LD access/outcomes Established pathways are agreed between homes /LD teams/nurses 	7 people move in year 1. A part year saving of £224.5k
	Year 2	 Care homes by District and Borough councils begin admitting across the county. Each home has a named Nurse liaison Pathway established as business as usual Service embed approach into resi contract renewal process April18 	Approach is embedded into business as usual across stakeholder groups as need identified all service users move	 Approach is business as usual i.e. peoples primary needs are core to housing options 15 people move in year 2. A full year approximate saving of £482,000

Significant Assumptions and Risks

Below outlines some of the key risks that have been identified across project areas. In order to mitigate against individual risks the Council will develop an overarching risk register to articulate and monitor on a monthly basis the relevant areas. In addition to this, there will also be reference to the work of the ADS Efficiencies Board and the implementation of a new Adult Accommodation strategy in Herts as areas of significant interdependency.

Project Area	Significant Risks/Assumptions to Project Success	Mitigations
Project 1 : Programme Management / Strategic Commissioning	Risks A lack of engagement from transition team/operational/commissioning teams and education services due to existing priorities A lack of clarity around roles and responsibilities between programme resources and commissioning /operational services Culture – resistance to move away from the current approach Unless substantial changes are made to operating models unmet need will be hard to predict due to poor planning and lead in time needed to develop service solutions, leading to rises in costs, increases in crisis placement and out of county solutions Providers do not see the benefits changing service models to meet new demands – and that prices continue to be inequitable comparably for LD against other care groups Assumptions That key stakeholders (HCC) accept significant and bold	 HCSMB sign off around roles and responsibilities/expectations -and relevant sign off from Children's service as appropriate Workforce development – identification and implementation around organisational development requirements Key messages are developed for internal/external stakeholders Clarity about the roles of different stakeholders across the commissioning cycle is revisited and agreed for e.g. CST,BVT, Strategic Commissioning Savings for key HCS stakeholder teams will need to be linked to team plans/PMDS targets
	 That key stakeholders (HCC) accept significant and bold changes need to be made in order to maximise use of budgets going forward- and that Senior Managers collaborate in relation to key messages around 'rationale' for change Support Living providers (post procurement) will engage with new ways of working i.e. drive community first 	

Project 2 - Access to mainstream housing

Risks

- There could be mixed views on the importance of the project from districts which will result in fragmented business processes across the county resulting in delays to placing and/or supporting people appropriately
- A lack of clarity around roles and responsibilities between programme resources and operational/commissioning services
- LD operational Services are unable to engage due to existing pressures (they will be required to link with district leads as well as undertake case work)
- Service users may not want to leave where they currently are as want to sustain existing relationships and feel more secure in a familiar setting

Assumptions

- That there are services users in LD specialist housing who may be overprovided for (based on costs analysis) – and there are people in mainstream housing with an LD who have care and support needs but currently don't receive support. Some of the people in specialist services may be reluctant to move as do not want change for a range of reasons
- Future supported Living providers will engage with new ways of working i.e. community first

- Mutual benefits will need to be clearly communicated i.e.
 ensuring people in both mainstream housing and specialist
 services get the right care and support and can sustain a
 tenancy as appropriate. Key messages developed for
 internal/external stakeholders
- There will be some requirements around court of protection processes and capacity assessments for service users prior to moves
- LD will be required to ensure the work is linked to the future planning process
- Savings for LD teams will need to be linked to team plans/PMDS targets

Project 3 - Older
People with
Learning
Disability (LD)
moving into
mainstream
residential care

Risks

- Mainstream residential care providers are unable to provide flexible care either due to existing capacity pressures and/or perceive they are unable to meet the needs of older people with an LD
- This could push up price as a new demand i.e. the cost of mainstream residential care increases hence lower efficiency margin
- People with learning disability experience discrimination in mainstream services as their needs are not understood and/or met
- LD teams are unable to support case work due to existing pressures and /or reluctant too due to perceptions that mainstream services cannot meet needs
- Service users are reluctant to move despite needs being better met and therefore savings are not realised and capacity not released – this is likely to result in increased care costs (total budget terms) in LD to meet future demands

Assumptions

 There will be mixed interest from mainstream residential providers but with some workforce development the needs of LD people will be able to be met

- Contracts for mainstream residential services will need to be varied in order to ensure the needs of people with a LD are met
- There will be variable interest from residential providers around supporting LD service users – workforce development opportunities will need to be identified and provided to facilitate change
- Case examples shared with mainstream providers to show where LD people are already being supported
- There will be some requirements around court of protection processes and capacity assessments for service users prior to moves
- Savings for LD teams will be required to be linked to team plans/PMDS targets

STEP 1: Responsibility and involvement

Invest To Transform	Right Home Right	Head of Service or	Kulbir Lalli,
Bid	Time	Business Manager	Head of Integrated
			Accommodation
			Commissioning
Names of those	Shazia Butt	Lead officer	Mark Janes
involved in	Mark Janes	contact details:	
completing the			01438 843504
EqIA:			mark.janes@hertfordshire.gov .uk
			····
Date completed:	03.02.2017	Review date:	
•	Updated		
	06.06.2017		

STEP 2: Objectives of proposal and scope of assessment – what do you want to achieve?

Proposal objectives:

- –what you want to achieve–intended outcomes
- -purpose and need

Transform (ITT) programme is to create the capacity to support the Adult Disability Service Efficiency Programme that will see the council's spend profile move closer to other local authority comparators, reducing the cost of future demand to the council, particularly in relation to accommodation costs. The ITT activity will focus on both:

The intention of the 'Right Home', Right Time' Invest to

- Driving forward the Adult Disability Service Efficiency Programme, putting in place the overall arrangements for efficiency in a range of service areas
- Improving data, intelligence, strategic planning and strategic commissioning capacity to analyse predicted demand, and plan and deliver solutions for how it is managed. And within the overall programme, specific pieces of activity associated with the Right Home / Right Time work stream

Alongside the above a review of the supported living and residential care in Hertfordshire and the lessons from the Accommodation for Independence programme (previous ITT bid) has led to the identification of three key areas of development in terms of specific projects, and that will help drive programme activity forward;

(A) Firstly a review of and the development of the



pathway for younger people with disabilities in transition from childhood to adulthood. The identification of the needs of this group for accommodation in adulthood and the development of the new services to meet this growing need. Failure to plan and develop services for this group would lead to poor outcomes for the young adults, and services which do not provide value for money for the local authority.

(B) A review of the links between operations and commissioning (micro and macro) to strengthen the procurement cycle and ensure needs are identified and met over time.

Secondly a need to enable the creation of a pathway for those service users with a learning disability who could manage in mainstream housing with support. Currently service users find accessing mainstream housing problematic for a range of reason. The creation of a pathway with District and Borough housing and housing providers could facilitate the independence of this group and create opportunities for the County Council to achieve value for money by freeing existing provision for new service users.

Thirdly Hertfordshire has an aging group of service users with a learning disability due to the long term effect of resettlement in Hertfordshire. With this group age there is a need to ensure that robust care pathways exist to ensure needs can be met in there existing care settings of supported living or residential care, and when need changes in specialist older peoples services.

Stakeholders:

Who will be affected: the public, partners, staff, service users, local Member etc A communications plan will be prepared to ensure stakeholders are briefed on the aims of the programme and engage and involve them in its development. Those affected include:

- all significant stakeholders in the transition process from children's to adult services.
- Identification of service users who could benefit from targeted support in their existing tenancies, and those who would benefit.
- Identification of service users who are older and have needs unmet by existing services as a result of ageing.
- Families and carers of service users / adults with Learning Disability in the target groups



- Current providers of accommodation and care services and their staff
- New providers of accommodation and care services
- Hertfordshire County Council services and staff
- District Council Housing and Planning Services
- NHS partners and CCG's

STEP 3: Available data and monitoring information

Relevant equality information For example: Community profiles / service user demographics, data and monitoring information (local and national), similar or previous EqIAs, complaints, audits or inspections, local knowledge and consultations. What the data tells us about equalities

Analysis (Poppi, Pansi) indicates that there are predicted to be 4447 people with a Severe to Moderate Learning disability in Hertfordshire in 2015. Of these 1438 are predicted to live with parents. Additionally 6958 people are predicted to be on the Autistic Spectrum. Of these some will be eligible for support from Heath and Community Services Asperger's team.

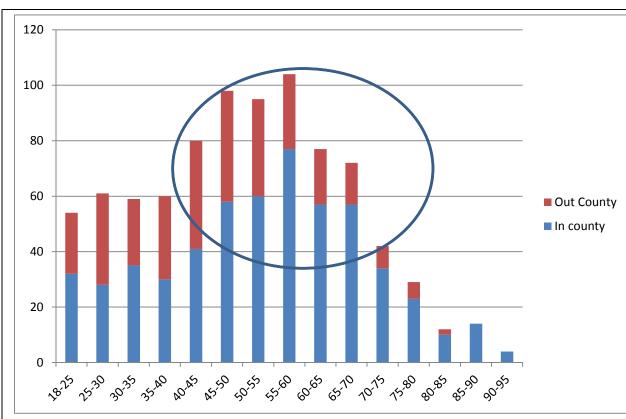
Transition

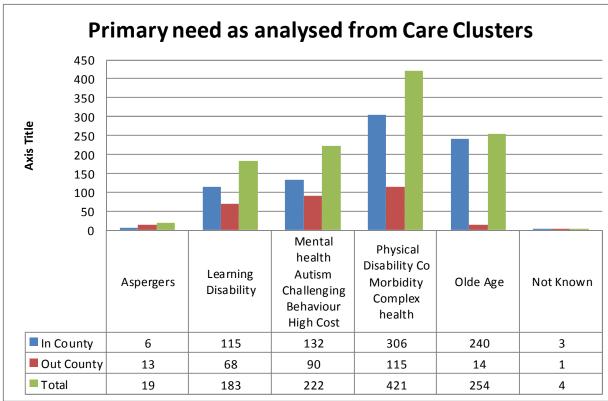
Around a 100 people transition from children's services to adult services each year. They have a wide range of need disabilities and family circumstances and require services to be targeted to meet that diverse need. Currently in the 18 -25 age group there are 114 people waiting for accommodation based services.

Residential

In Hertfordshire Adult Care Service currently commission 560 beds and a further 301 out of county, in a range of small residential care homes. The average age of the service users in County is 53 and the average age out of county is 45. The graph below shows the age distribution. A proportion of the service users in the ring are resettlement clients.





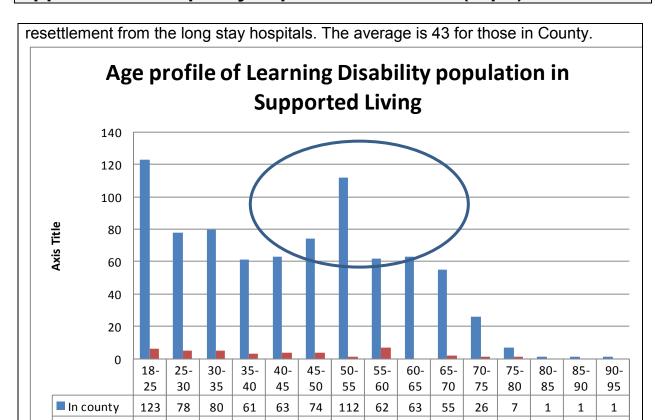


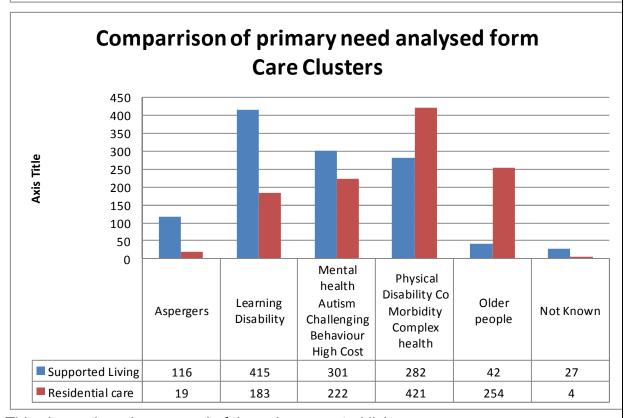
This table shows the primary need of those in residential care.

Supported Living

Currently there are 807 people with a Learning Disability living in Supported living in Hertfordshire and 39 out of county the age distribution of these service users is shown in the table below the spike of users aged 50-55 is thought to be due to the effect of







This shows the primary need of those in supported living.

Mainstream Housing

Out County

5

5

It is unknown how many people with a learning disability are living in mainstream housing requiring support. There are 292 people in supported living with low level



support who might benefit form a move to mainstream housing. In addition 20 people with Asperger's are currently struggling to access mainstream housing.

Ethnicity

Over 95% of clients in residential homes are White. 90.3% are classified as White British compared to 81% of people in Herts, 2.5% are White Irish, 2% White: Any Other White Background, 0.3% White: Gypsy / Roma. 1.5% of clients are Black or Black British and 1% Asian or Asian British compared to 2.7% and 5.5% of Hertfordshire residents respectively. The ethnic profile of clients in supported living is similar to the profile in residential homes.

STEP 4: Impact Assessment – Service Users, communities and partners (where relevant)

Guidance on groups of service users to consider within each protected group can be found here

Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
Age	Currently older people with a learning disability are impacted as they age and needs may not be met.	By creating new pathways and procuring new services we will provide some mitigation to this impact for older people.
	The better identification of the needs of younger people with disability and the development of care pathways for this group will mean that the needs of this group are identified and services developed.	By improving the information and analysis of the needs and diversity of 0-25 year olds in transition, new procurement will be targeted to meet need. Individual assessment and care management process will target interventions on need and diversity.
Disability Including Learning Disability	The majority of clients have moderate to severe learning disabilities as their primary support reason with some also requiring mental health and physical: personal care support.	As new services and pathways emerge all decisions will be made in line with best practice on capacity and best interest assessments.
Race	Around 4% of clients in Learning Disability residential homes and supported living are from minority ethnic backgrounds	The diverse needs of this group will be identified as part of the review and care management process. Best interest decision will ensure that race is taken into account as part of the design of individual care packages.
Gender reassignment	No data is available. This is something which is likely to have more visibility in the transition	Individual needs in relation to gender reassignment will be taken into account across all best interest



Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative)	can you propose?
	pathway	decision processes.
Pregnancy and maternity	No data is available This is something which is likely to have more visibility in the transition pathway	The identification of service users with a learning disability who require support in this area will be done on a case by case basis. This may be particularly relevant to the transition strand of the pathway.
Religion or belief	Around 2% of clients follow faiths other than Christianity. The beliefs of 51% are unknown or not recorded.	Procurement activity and individual case work will need to take account of the impact of religion and belief.
Sex	There are nearly 17% more men in LD residential homes than women.	Procurement and individual service user assessments will need to consider the impact of gender on appropriate care.
Sexual orientation	No data is available. This is something which is likely to have more visibility in the transition pathway	Procurement and individual service user assessments will need to consider the impact of sexual orientation on appropriate care.
Marriage & civil partnership	No data is available. This is something which is likely to have more visibility in the transition pathway	Procurement and individual service user assessments will need to consider support marriage and civil partnerships.
Carers (by association with any of the above)	Around 10% of the Hertfordshire population have informal unpaid caring responsibilities.	Carers will be consulted about and involved in the development of pathways for 0-25 year olds and older people. Families and carers will be involved in all capacity and best interest assessments when appropriate.

Opportunity to advance equality of opportunity and/or foster good relations (Please refer to the <u>guidance</u> for more information on the public sector duties)

The programme is designed to enable people with learning disabilities to have the opportunity to maximise their potential and lead full lives as confident citizens in their own tenancies within their local communities. Receiving the right care at the right time.

Strengthening the development of range of housing options and improving the accessibility of mainstream housing, will support better access to community living for this service user group.

As people age the pathway will ensure that services adapt to their changing needs and as with other older people where this is not possible more suitable accommodation will be found.



Impact Assessment – Staff (where relevant)

Protected	Potential for differential impact	What reasonable mitigation
characteristic	(positive or negative)	can you propose?
Age		
	It is not envisaged there will be any impact on staff as part of this process.	Review of EQIA on a regular basis.
	This will of course be kept under review as the EQIA is reviewed	
Disability	As above	As above
Including		
Learning		
Disability		
Race	As above	As above
Gender	As above	As above
reassignment		
Pregnancy	As above	As above
and maternity		
Religion or belief	As above	As above
Sex	As above	As above
Sexual	As above	As above
orientation		
Marriage &	As above	As above
civil		
partnership		
Carers (by	As above	As above
association		
with any of		
the above)		Mar Santa and Alaka

Opportunity to advance equality of opportunity and/or foster good relations (Please refer to the <u>guidance</u> for more information on the public sector duties)

The development of new pathways in transition, mainstream housing and for older people. Will further enhance the opportunities for people with a learning disability to engage with the community, by receiving the right care at the right time.



STEP 5: Gaps identified

Gaps identified	The ongoing impact of the proposed changes will need to be kept
Do you need to collect	under review and the impact monitored.
more data/information or	
carry out consultation? (A	
'How to engage'	
consultation guide is on	
Compass). How will you	
make sure your	
consultation is accessible	
to those affected?	

STEP 6: Other impacts

By ensuring that service user pathways increase access to the community, and better support old age for people with a learning disability. It will be necessary for them to continue to access mainstream health services. The involvement of the nurses employed in HCS care management teams will support this.

STEP 7: Conclusion of your analysis

Select one conclusion of your analysis		Give details
	No equality impacts identified No change required to proposal.	
	Minimal equality impacts identified Adverse impacts have been identified, but have been objectively justified (provided you do not unlawfully discriminate). Ensure decision makers consider the cumulative effect of how a number of decisions impact on equality.	
	 Potential equality impacts identified Take 'mitigating action' to remove barriers or better advance equality. Complete the action plan in the next section. 	The potential for negative impacts have been identified.
	Major equality impacts identified Stop and remove the policy The adverse effects are not justified, cannot be mitigated or show unlawful discrimination. Ensure decision makers understand the equality impact.	



STEP 8: Action plan

Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date
Transition of 0-25 year olds creation and development of pathways	The development of a system to gather information on need will need to take account of the diversity across the areas of the EQIA	Mark Janes April 2018
Transition of 0-25 year olds creation and development of pathways	Individual case work decisions and procurement of packages of care will need to take account of diversity. This will be highlighted in the assessments within the care management process	Care managers Ongoing
Review of procurement practice	The review of procurement practice will take into account the robustness and the effectiveness of business processes in relation to equalities	Shazia Butt April 2018
Accessing mainstream housing	The development of pathways will need to ensure that they support diversity.	Shazia Butt April 2018
Older people care pathway	This pathway will need to take into account the diverse needs of this group. Individual case work assessments will need to ensure equality needs are met	Shazia Butt Mark Janes Care managers Ongoing
Alignment is needed across LD and Commissioning areas of strategic priority	Develop an overarching EqIA for Adult Disability Services and commissioning requirements to help understand how we prioritise needs for people who are disadvantaged and identify opportunities	Shazia Butt

This EqIA has been reviewed and signed off by:

Head of Service or Business Manager: Helen Maneuf **Date:** 10/05/17

Equality Action Group Chair: N/A Date:



HERTFORDSHIRE COUNTY COUNCIL

Agenda Item No.

8

CABINET MONDAY 10 JULY 2017 AT 2.00PM

REGULATION OF INVESTIGATORY POWERS (RIPA) ANNUAL REPORT

Report of the Chief Legal Officer

Author: Guy Pratt, Deputy Director Community Protection

(Tel: 01992 507501)

Executive Member: Terry Hone, Community Safety & Waste Management

1. Purpose of report

- 1.1 To inform Members of the use of the Regulation of Investigatory Powers (RIPA) within Hertfordshire County Council over the past year.
- 1.2 To obtain the Cabinet's agreement for the continued use of policies on:
 - (a) Directed Surveillance and Covert Human Intelligent Sources; and
 - (b) Acquisition and Disclosure of Communications Data from communication service providers.

2. Summary

- 2.1 A report is produced on an annual basis to Members to inform them of The use of RIPA within the County Council and to obtain agreement to the confirmed use of the Council's RIPA policies.
- 2.2 The Council's RIPA policies for approval by Members are annexed at Appendices A and B to this report.
- 2.3 Minor changes have been made to correct typographical / formatting errors in the Surveillance Procedure. The Communications Procedure has been rewritten to reflect current practice and the use of the National Anti-Fraud Network (NAFN).
- 2.4 This report covers the period 1 April 2016 31 March 2017.

3. Recommendations

- 3.1 The Community Safety and Waste Management Cabinet Panel considered a report on this item of business at its meeting on 27 June 2017. The Panel recommended to Cabinet that Cabinet approve the continued use of the policies on:
 - (a) Directed Surveillance and Covert Human Intelligent Sources, attached at Appendix A; and
 - (b) Acquisition and Disclosure of Communications Data from communication service providers, attached at Appendix B.

4. Background

- 4.1 The Regulation of Investigatory Powers Act 2000 (the Act) regulates covert investigations and the acquisition and disclosure of communications data from communication service providers by a number of bodies, including local authorities. It was introduced to ensure that 'individuals' rights are protected, while also ensuring that law enforcement and security agencies have the powers they need to do their job effectively.
- 4.2 The County Council has separate policies on covert investigations and the acquisition and disclosure of communications data. These require Members to consider internal reports on the use of RIPA on at least an annual basis, to ensure that it is being used consistently with the Council's policy and that the policy remains fit for purpose.

5. Use of RIPA for Covert Surveillance

5.1 In the year April 2016 to March 2017 the use of RIPA for surveillance purposes was as follows:

(a) Directed Surveillance

The number of directed surveillance authorisations granted during the period was one. This was for a test purchasing exercise (of alcohol).

(b) Covert Human Intelligence Sources (CHIS)

The number of CHIS recruited during the period was 0 (zero); the number who ceased to be used during the period was 0 (zero); and the number of active CHIS at the end of the period was 0 (zero).

(c) Breach in procedures

The number of breaches identified under each category of authorisation (Directed Surveillance and CHIS) was 0 (zero).

6. Use of RIPA for the Acquisition and Disclosure of Communications Data

- 6.1 In the year April 2016 to March 2017 the use of RIPA for obtaining communications data was as follows:
 - (a) Applications for communications data: 2

One application was in connection with an investigation into the activities of an importer of counterfeit clothing and the other related to the illegal use of colours in food

(b) Applications not proceeded with: 1

(The application which was not proceeded with was subject to a recordable error report from the National Anti-Fraud Network (NAFN) as the application contained a factual error and also it did not sufficiently identify potential collateral intrusion (the risk of obtaining private information about persons who are not the subject matter) as the relevant mobile phone number was also associated with the suspect's wife. Steps have been taken to minimise the risk of similar errors occurring in the future)

6.2 NAFN is used to process the Council's applications for communications data. This means that no inspections of the service in Hertfordshire, requesting communications data, will be made. NAFN will continue to vet individual applications and the Council's applications will form part of any audit made of NAFN.

7. General Matters

- 7.1 The Council has RIPA policy documents on 'Directed surveillance and use of covert human intelligence sources' and the 'Acquisition and disclosure of communications data from communication service providers'. These policy documents are put into practice through associated RIPA procedure documents in each area. These procedure documents assist officers in the practical application of RIPA. All four documents are reviewed and updated as necessary on an annual basis. The updated Communications Procedures for 2017 allows for additional enforcement staff to have responsibility for accessing communications data subject to built in scrutiny through advanced notice to Legal Services.
- 7.2 RIPA understanding across the County Council continues to be assessed and training is made available accordingly. During 2016 /17, every Directorate Board received RIPA training, with subsequent follow-up training being given to identified managers and Heads of

- Service. For 2017/18 an e-learning package is being to be produced and will be uploaded onto the intranet.
- 7.3 It is recognised that there is a need to have a social media policy and for 2017/18 a Policy document and linked Procedure document will be produced and brought back to members for approval.
- 7.4 The legislation surrounding RIPA has recently expanded with 'The Investigatory Powers Act 2016' ('the 2016 Act'). The 2016 Act has yet to come fully into force, and relevant documents will be updated as the 2016 Act does so. Changes brought about by the 2016 Act include:
 - An Investigatory Powers Commission will be created to oversee the use of all investigatory powers.
 - Fire and Rescue Services will be allowed to see Internet connection records, as part of a targeted and filtered investigation, without a warrant
 - Local government will keep some investigatory powers but will not be able to have access to Internet connection records

8. The Benefits of RIPA to Hertfordshire County Council

- 8.1 RIPA authorisations form an essential tool for County Council Services, particularly Trading Standards, and any restriction in the use of RIPA would have a severe adverse impact on the work of the Council.
- 8.2 RIPA authorisations are an integral part of the authority's enforcement work, enabling the detection and prevention of crime, providing a cornerstone in building safer and stronger communities.
- 8.3 The other outcomes for the authority following RIPA authorisations in the year April 2016 to March 2017 are:

Directed Surveillance

One shop was visited under the authorisation for alcohol and tobacco test purchasing, based on intelligence. An underage volunteer was refused in their attempts to make a purchase.

Communications data

The authorisation granted for communications data is related to a food supplier and confirmed that the address details required on the packaging of a food there are concerns with, are not genuine. Investigations are on-going.

9. Financial Implications

9.1 There are no financial implications resulting from this report.

10. Equalities

- 10.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.
- 10.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.
- 10.3 The Equality Act 2010 requires the Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 10.4 No Equalities Impact Assessment (EqIA) was undertaken in relation to this matter as the review and subsequent minor amendment of the Policies did not constitute the need.

Background Documents

Regulation of Investigatory Powers Act 2000: http://www.legislation.gov.uk/ukpga/2000/23/pdfs/ukpga 20000023 en.p

Appendix A: Directed Surveillance and Covert Human Intelligent Sources Appendix B: Acquisition and Disclosure of Communications Data from communication service providers

Appendix A



REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

DIRECTED SURVEILLANCE AND USE OF COVERT HUMAN INTELLIGENCE SOURCES

Policy approved by CABINET on

[] July 2017

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REGULATION OF INVESTIGATORY POWERS ACT 2000 POLICY IN RELATION TO DIRECTED SURVEILLANCE AND USE OF COVERT HUMAN INTELLIGENCE SOURCES

1 INTRODUCTION

- 1.1 The Regulation of Investigatory Powers Act 2000 (the Act) regulates covert investigations by a number of bodies, including local authorities. It was introduced to ensure that individuals' rights are protected while also ensuring that law enforcement and security agencies have the powers they need to do their job effectively.
- 1.2 Hertfordshire County Council (we, us) is included within the Act's framework with regard to the authorisation of both Directed Surveillance and of the use of Covert Human Intelligence Sources (CHIS).
- 1.3 Whilst the Act also regulates acquisition and disclosure of communications data, Directed Surveillance and of the use of CHIS are overseen by the Chief Surveillance Commissioner (the Commissioner). The Commissioner does not oversee acquisition and disclosure of communications data. This policy therefore only relates to the part of the Act that is the responsibility of the Commissioner.
- 1.4 This policy applies to the both the authorisation of Directed Surveillance and of the use of Covert Human Intelligence Sources (CHIS).
- 1.5 The Home Office publish codes of practice pursuant to section 71 of the Act for Directed Surveillance and of the use of Covert Human Intelligence Sources ("CHIS"). This policy should be read in conjunction with current guidance issued by the Home Office and the Chief Surveillance Commissioner which can be found at https://www.gov.uk/government/publications/covert-surveillance-and-covert-human-intelligence-sources-codes-of-practice
- 1.6 In summary the Act requires that when the Council undertakes "directed surveillance" or uses a "covert human intelligence source" these activities must only be authorised by an Officer with delegated powers when the relevant criteria are satisfied.
- 1.7 It must be noted that the Council cannot authorise "Intrusive Surveillance" which is defined in the legislation. That relates to surveillance in residential properties or private vehicles.
- 1.8 The Investigatory Powers Act received Royal assent on 29 November 2016 and when it comes in to force this Policy will be updated.

2 ROLES

- 2.1 The legislation creates a number of roles:
- 2.2 The Senior Responsible Officer ensures the integrity of the process within the Local Authority, compliance with the Act and the Code of Practice, oversight of the reporting of errors to the Commissioner, engagement with the inspectors when they conduct inspections and where necessary oversight of the implementation of post-inspection action plans. The Senior Responsible Officer is the Chief Legal Officer of Hertfordshire County Council.
- 2.3 The Senior Authorising Officer is the Deputy Director of Community Protection who has overall responsibility for RIPA issues across the Council and holds the Central Register of Authorisations.
- 2.4 Each of the Council Service's Scheme of Delegations can nominate at least one officer who can authorise "directed surveillance" and the use of "covert human intelligence sources" (Authorising Officers). The prescribed Local Authority officers who may be Authorising Officers must hold the rank of a director, head of service or service manager or equivalent. For Hertfordshire Fire and Rescue Service the prescribed officer is a group manager. The Authorising Officers are currently all officers within the Community Protection Directorate and the Senior Authorising Officer holds the current list.
- 2.5 The prescribed Local Authority officer who may authorise surveillance activity when knowledge of confidential information is likely to be acquired, or in the case of a CHIS when a vulnerable individual or juvenile is to be used as a source, is the Head of Paid Service or a person acting in their absence. The Head of Paid Service for Hertfordshire County Council is the Chief Executive.
- 2.6 Confidential Information relates to medical records or spiritual counselling, confidential journalistic material, confidential discussions between Members of Parliament and their constituents, or matters subject to legal privilege.

3 PURPOSE

- 3.1 The Act prescribes the purpose for which we can authorise Directed Surveillance and of the use of a CHIS. We will comply with those requirements.
- 3.2 The only purpose for which we can authorise Directed Surveillance or the use of a CHIS is for the purpose of preventing or detecting crime or of preventing disorder. For Directed Surveillance authorisation is restricted to investigation of offences which attract a maximum custodial sentence of six months or more or criminal offences relating to the underage sale of

- alcohol or tobacco. The Fire and Rescue service may also authorise directed surveillance in the interests of public safety.
- 3.3 Internal disciplinary investigations do not come within the scope of this policy unless we are investigating a criminal breach. If that is the case, the processes within this policy must be followed.

4 SCOPE

- 4.1 Definitions are given in the legislation and codes of practice. The following is a brief guide only and are not complete definitions.
- 4.2 If directed surveillance is undertaken then authorisation is required. Surveillance includes monitoring, observing or listening to persons, their movements, their conversations or their other activities or communication by recording anything monitored, observed or listened to in the course of surveillance
- 4.3 Covert surveillance is any surveillance which is carried out in a manner calculated to ensure that the persons subject to the surveillance are unaware that it is or may be taking place.
- 4.4 Directed surveillance is covert but not intrusive surveillance undertaken for the purposes of a specific investigation in such a manner as is likely to result in the obtaining of private information about a person (whether or not one is specifically identified for the purposes of the investigation or operation).
- 4.5 Directed surveillance does not include covert surveillance carried out by way of an immediate response to events or circumstances which, by their very nature, could not have been foreseen. For example, a Trading Standards Officer would not require an authorisation to conceal them self and observe a suspicious person that they came across in the course of a visit to a trader. However, if as a result of that a specific investigation subsequently takes place then it would be within the framework of the 2000 Act.
- 4.6 If a Covert Human Intelligence Source is used then authorisation is required.
- 4.7 A person is a Covert Human Intelligence Source if he/she establishes or maintains a personal or other relationship with a person for the covert purpose and they covertly uses such a relationship to obtain information or to provide access to any information to another person; or they covertly disclose information obtained by the use of such a relationship, or as a consequence of the existence of such a relationship.
- 4.8 A purpose is covert, in relation to the establishment or maintenance of a relationship, if and only if the relationship is conducted in a manner that is

- calculated to ensure that the other party to the relationship is unaware of that purpose.
- 4.9 The use of a CHIS can include inducing, asking or assisting a person to engage in the conduct of a CHIS or obtain information by using that CHIS.
- 4.10 Where members of the public volunteer information to the Council, as part of their normal civic duties, they would not generally be regarded as a CHIS. However, a member of the public may become a CHIS if he provides information on more than one occasion or has been asked or assisted by a Council Officer to provide information.

5 CONSIDERATIONS

- 5.1 Authorisation and renewal is a 2 stage process. The first being the internal authorisation, which if successful then has to go before a court for judicial approval.
- 5.2 The Authorising Officer will need to be made aware of particular sensitivities in the local community with respect to the activities authorised and the purpose of the investigation. In addition, as required by the legislation they must have regard to whether the acquisition is necessary and proportionate and the degree, if any, of interference with the privacy of persons other than the direct subject(s) of the application.
- 5.3 No Authorising Officer shall grant an authorisation for the conduct or use of a CHIS unless he believes arrangements exist for ensuring:
 - 5.3.1 that there will at all times be a person who will have day-to-day responsibility for dealing with the CHIS on behalf of the Council, and for the CHIS's security and welfare which will normally be the investigating Officer
 - 5.3.2 that there will at all times be another person who will have general oversight of the use made of the CHIS which will normally be the Authorising Officer
 - 5.3.3 the investigating Officer will have responsibility for maintaining a record of the use made of the CHIS
 - 5.3.4 that the records that disclose the identity of the CHIS will only be available for access to those Officers deemed necessary
- 5.4 The Authorising Officer must consider the safety and welfare of a CHIS, and the foreseeable consequences to others of the tasks they are asked to carry out. The Authorising Officer must ensure a risk assessment has been carried out before authorisation is given. Consideration from the start for the safety and welfare of the CHIS, even after cancellation of the authorisation, should also be considered. In practice this means that the authorisation of a CHIS by HCC will only take place in exceptional

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- circumstances, or not at all. The Senior Authorising Officer must be consulted before a CHIS authorisation is to take place.
- 5.5 Additional safeguards contained in Regulation of Investigatory Powers (Juveniles) Order 2000 SI No. 2793 apply to a CHIS under the age of 18 years. Only Trading Standards investigations are likely to require the use of CHIS's under the age of 18. Such use must be authorised by the Head of Paid Service or a person acting in their absence.
- 5.6 Once the internal process is approved a duly authorised officer within HCC (usually an appropriate officer within Trading Standards) will request the judicial approval.
- 5.7 Further guidance is available from the procedure: Procedure Document on the Regulation of Investigatory Powers Act 2000 (RIPA) Directed Surveillance and Use Of Covert Human Intelligence Sources. This document can be found on the intranet.

6 FORMS AND KEEPING OF RECORDS

- 6.1 The Senior Authorising Officer shall be responsible for ensuring the authority has the appropriate forms and records to comply with the requirements of the legislation and code. The Senior Authorising Officer is responsible for retaining and keeping secure the Central Register of Authorisations.
- 6.2 Whatever the nature of the decision taken by the Authorising Officer it should be confirmed in writing with reasons for the decision.
- 6.3 Authorising Officers must ensure that the relevant details of each authorisation are sent to the Senior Authorising Officer as soon as practicable and within 5 working days.
- 6.4 Authorising Officers are responsible for ensuring that authorisations undergo timely reviews and are cancelled promptly after the authorised activity is no longer necessary.

7 COMPLAINTS

- 7.1 The Authority's complaints procedure applies to complaints about activities within the scope of this policy.
- 7.2 The Act establishes an independent Tribunal, called the Investigatory Powers Tribunal that has full powers to investigate and decide on any case within its jurisdiction.

8 SCRUTINY

8.1 This policy must be examined by Members on a yearly basis and approved as fit for purpose.

Appendix B



POLICY DOCUMENT ON THE REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)

ACQUISITION AND DISCLOSURE OF COMMUNICATIONS DATA FROM COMMUNICATION SERVICE PROVIDERS

Policy approved by CABINET on

[] July 2017

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REGULATION OF INVESTIGATORY POWERS ACT 2000 POLICY IN RELATION TO ACQUISITION AND DISCLOSURE OF COMMUNICATIONS DATA FROM COMMUNICATION SERVICE PROVIDERS

1 INTRODUCTION

- 1.1 The Regulation of Investigatory Powers Act 2000 (the Act) regulates the acquisition and disclosure of communications data from communication service providers by a number of bodies, including Local Authorities. It was introduced to ensure that individuals' rights are protected while also ensuring that law enforcement and security agencies have the powers they need to do their job effectively.
- 1.2 Whilst the Act also regulates directed surveillance and of the use of Covert Human Intelligence Sources (CHIS), the acquisition of communications data is overseen by the Interception of Communications Commissioner (the Commissioner). The Commissioner does not oversee surveillance and CHIS issues. This policy therefore only relates to the part of the Act that is the responsibility of the Commissioner.
- 1.3 This policy applies to the acquisition and disclosure of communications data from communication service providers under the Act.
- 1.4 Hertfordshire County Council (Council, we, us) is included within the Act's framework with regard to the acquisition and disclosure of communications data but only for the purpose of the prevention and detection of crime. Hertfordshire Fire and Rescue Service may access communications data about the maker of an emergency call within one hour of its termination to enable the provision of emergency assistance. Such access is outside the provision of the Act (it is under the Communications Act 2003) and therefore outside the scope of this policy
- 1.5 In summary, the Act requires that when the Council undertakes the acquisition or disclosure of communication data, these activities must be authorised by a designated person when the relevant criteria are satisfied and the authorisation must be approved by a Justice of the Peace.
- 1.6 For the avoidance of doubt, Local Authorities such as Hertfordshire County Council cannot apply for the content of communications nor 'intercept' communications and therefore cannot apply to listen into telephone conversations or read emails. Local Authorities can only apply for communications data (see 4. below for an explanation of 'communications data').
- 1.7 The Home Office publish a code of practice (the code) pursuant to section 71 of RIPA, for the Acquisition and Disclosure of Communications Data (March 2015). https://www.gov.uk/government/publications/code-of-

<u>practice-for-the-acquisition-and-disclosure-of-communications-data</u> This code applies to public authorities and the code and its principles will be followed by us. This policy should be read in conjunction with current guidance issued by the Home Office and the Interceptions of Communications Commissioner (2016).

https://osc.independent.gov.uk/wp-content/uploads/2013/07/OSC-Procedures-Guidance-July-2016.pdf

1.8 The Investigatory Powers Act received Royal assent on 29 November 2016 and when it comes in to force this Policy will be updated.

2 ROLES

- 2.1 The legislation creates a number of roles:
- 2.2 The Senior Responsible Officer ensures the integrity of the process within the Local Authority, compliance with the Act and the Code of Practice, oversight of the reporting of errors to the Commissioner, engagement with the inspectors when they conduct inspections and where necessary oversight of the implementation of post-inspection action plans. The Senior Responsible Officer is the Chief Legal Officer of Hertfordshire County Council.
- 2.3 The Designated Person is a person holding a prescribed office who considers the application and either grants or rejects the application in accordance with the legislation and the code. The Designated Person(s) are the Assistant Chief Legal Officer Environment and Dispute Resolution and the Head of Commercial and Property Law.
- 2.4 The single point of contact (SPoC) is a group of trained, externally accredited individuals who facilitate the effective co-operation between us and the communication service providers. We can use the services of an alternative SPoC facility and we use the SPoC facility of the National Anti-Fraud Network (NAFN) of which we are a member.
- 2.5 The applicant is the person involved in conducting the investigation.
- 2.6 The person within the Council with responsibility for RIPA is the Deputy Director of Community Protection.

3 PURPOSE

- 3.1 The Act prescribes the purpose for which we can access communications data. We will comply with those requirements.
- 3.2 The only purpose for which we can access such data is for the purpose of preventing or detecting crime or of preventing disorder. The exception is

- the Fire and Rescue service who may also access such data in the interests of public safety.
- 3.3 Any postal or telecommunications operator is referred to as a communications service provider (CSP). All applications for communications data from a CSP must follow this policy.

4 COMMUNICATIONS DATA

- 4.1 Communications data is divided into three categories. Note that the content of communications is not communications data. The categories are defined in the legislation. Briefly:
- 4.2 Traffic data is information that identifies the person to or from whom the communication is transmitted or the location. Such information is not available to us.
- 4.3 Service use information is data relating to the use made by any person of a postal or telecommunications service, such as itemised phone bills. We may access such information in accordance with the legislation and code
- 4.4 Subscriber information is information about the person to whom the communications service provider has provided the service, so the name and address of someone who may own a specific mobile phone. We may access such information in accordance with the legislation and code.

5 CONSIDERATIONS

- 5.1 Authorisation and renewal is a 2 stage process. The first being the internal authorisation, which if successful then has to go before a court for judicial approval.
- 5.2 The applicant must apply for the data through NAFN and at the same time must forward a copy of the application to the Designated Person who will check the application and seek further information if required. Once approved by NAFN and Legal Services, judicial approval must be sought before the data can be obtained from NAFN.
- 5.3 The Designated Person will need to be made aware of particular sensitivities in the local community with respect to the data applied for and the purpose of the investigation. In addition, as required by the legislation they must have regard to whether the acquisition is necessary and proportionate and the degree, if any, of interference with the privacy of persons other than the direct subject(s) of the application.

6 FORMS AND KEEPING OF RECORDS

- 6.1 The Community Protection Directorate shall be responsible for ensuring the authority has the appropriate forms and records to comply with the requirements of the legislation and code. They are responsible for retaining and keeping secure the applications and product as detailed in the code.
- 6.2 Further guidance is available from the procedure: Procedure Document on the Regulation of Investigatory Powers Act 2000 Communications Data, which can be found on the intranet.

7 COMPLAINTS

- 7.1 The Authority's complaints procedure applies to complaints about activities within the scope of this policy.
- 7.2 The Act establishes an independent Tribunal, called the Investigatory Powers Tribunal that has full powers to investigate and decide on any case within its jurisdiction.

8 SCRUTINY

8.1 This policy must be examined by Members on a yearly basis to be approved as fit for purpose.

HERTFORDSHIRE COUNTY COUNCIL

CABINET MONDAY 10 JULY 2017 AT 2.00PM

Agenda Item No.

9

TRANSPORT ASSET MANAGEMENT PLAN, ASSET PERFORMANCE REPORT 2016

Report of Chief Executive and Director of Environment

Author: Chris Allen-Smith, Head of Profession, Asset Management

& Maintenance (Tel: 01992 658167)

Executive Member: Ralph Sangster (Highways)

1. Purpose of Report

- 1.1 To seek Cabinet approval on the Transport Asset Management Plan (TAMP), Asset Performance Report 2016 (APR). The APR presents an annual update on the progress of transport asset management, both in Hertfordshire and nationally.
- 1.2 The APR provides an outline of ongoing work that will align with requirements of the "Incentive" element of revised Department for Transport (DfT) Highway Maintenance capital funding formula and deals with each major asset on an individual basis.
- 1.3 This paper also introduces a new Code of Practice 'Well-Managed Highway Infrastructure' where an in depth review of current practices is required.
- 1.4 Carriageway Performance Indicators have been unchanged from 2010/11, where the objective has been achieving a steady state of road condition based upon this base year. Views from the Panel are sought on revising these Performance Indicators.

2 Summary

- 2.1 The APR is divided into eight chapters.
- 2.2 Chapters one and two give an overview of recent progress in the field of transport asset management, both in Hertfordshire and nationally.
- 2.3 Chapters three to eight each focus on one of the six asset groups. Within each of these chapters a number of themes are addressed relating to each asset.
- 2.4 The TAMP APR 2016 will be presented to Cabinet for consideration and approval on 10 July 2017 along with any comments from the Panel.

3 Recommendations

3.1 The Highways Cabinet Panel considered a report on this item of business at its meeting on 22 June 2017. The Panel noted and commented on what the future aspirations should be for carriageway conditions and the impact this should have

on condition targets and recommended to Cabinet that Cabinet approves the Transport Asset Management Plan Asset Performance Report 2016.

4 The Transport Asset Management Plan, Asset Performance Report 2016

- 4.1 The APR is presented in full at Appendix 1 to the report. This report is not intended to reproduce the APR but rather to give Cabinet an overview of its contents, highlight key points for consideration and to assist navigation.
- 4.2 APR Chapter 1 Transport Asset Management 2016 highlights a number of key developments in asset management that are either national issues or cut across all of Hertfordshire's transport assets. These include national initiatives (such as financial reporting) and local initiatives such as the TAMP review and ongoing work on cross-asset optimisation.
- 4.3 **APR Chapter 2** *Highway Infrastructure Overview* gives a general summary of the main information presented in more detail in chapters 3-8.
- 4.4 **APR Chapters 3 to 8** each deal with a particular asset group:
 - Carriageways;
 - Footways & Cycleways;
 - Drainage;
 - Structures:
 - Street Lighting and
 - Intelligent Transport Systems, Traffic Management Equipment.

Within each of these chapters, a number of themes are addressed as they relate to each asset; including:

- Inventory and Value
- Strategy and Lifecycle Planning
- Condition Monitoring and Performance
- Budget and Delivery; and
- Key Issues and Improvement Actions.

5 DfT Incentive Funding.

- 5.1 From 2016/17, an increasing proportion of the DfT's capital allocation for local highways highway maintenance will be tied to a local authority's performance in a number of key areas, such as asset management and efficiency.
- 5.2 A paper was taken to Highways Cabinet Panel on 8 September 2015 to inform about the "Incentive" element of the revised DfT Highway Maintenance capital funding formula and its implications.
- 5.3 The Panel endorsed the identified actions to ensure that future funding was not compromised. Hertfordshire County Council have achieved the top level of

funding, level 3, but work is still required to ensure this level is maintained and the benefits of working to the rigorous standards are achieved.

6 Approved Codes of Practice Review.

- 6.1 The new Code of Practice <u>'Well-Managed Highway Infrastructure'</u> was released on 28 October 2016. This document supersedes the three previous individual Codes; <u>'Well-Maintained Highways'</u>, <u>'Management of Highway Structure</u>s' and <u>'Well-lit Highways'</u>. Highway Authorities have until October 2018 to adopt the risk based approach which the Code of Practice describes.
- 6.2 The new Code of Practice details 36 recommendations which Hertfordshire County Council is broadly complying with. A more in-depth review of the Council's current practices has commenced, comparing these against the Code and its Recommendations. Where they differ the Council will need to either change practices to suit the code or document the reasons for taking an alternative approach.
- 6.3 A paper was taken to the Highways Cabinet Panel on 1 December 2016 to make the Panel aware of the new code of practice and its potential implications for the highways service.
- 6.4 An update will be taken to the September Panel with a more detailed analysis of the new code, how well Hertfordshire County Council's current practices conform, further work that will be required and any areas where guidance is likely to be sought from the Panel at future meetings.

7 Carriageway Performance Indicators

- 7.1 Appendix 2 is an Information Note to Members (2017-18/01) (Issued in April 2017) advising of the County Council's carriageway performance compared to national results published by the Department for Transport. Some key points are summarised below.
- 7.2 **Steady Improvement:** The results show that the condition of the authority's roads has improved over the five years since the local targets were set based on the 10/11 values. This is true for all classes of road, albeit there have been some variations over the years due to factors like the severity of particular winters.
- 7.3 This improvement has been achieved by following our asset management-based maintenance strategy to get the best value from the sustained levels of investment made available over the period.
- 7.4 The maintenance strategy, which was agreed by members following the 2011 scrutiny of the highway maintenance service, focuses on getting the best value for the available money by applying the 'Right Treatment, Right Time' principle as far as possible. This frequently means intervening early with a cheaper, preventative treatment before a road has deteriorated too far rather than simply focusing on fixing the worst roads. Although it gives an immediate improvement, fixing the worst roads can be expensive; maintaining roads before they become poor has less immediate impact but is more cost effective and has a greater impact down the line as fewer roads become poor. Hertfordshire is now seeing the benefits of following this long-term strategy reflected in these national condition measures.

7.5 **Review of Targets:** The current targets are now seven years old and Members may wish to review them. Table 1, below, shows the historic data for Hertfordshire for the last five years with National averages in brackets for ease of comparison.

	Baseline Year		Historic Data		Actual		Current Targets		
	10/11	11/12	12/13	13/14	14/15	15/16	15/16	16/17	
A Road Condition	8% (5%)	6% (5%)	8% (5%)	4% (4%)	4% (4%)	3% (3%)	8%	8%	
B&C Road Condition	11% (10%)	15% (10%)	17% (9%)	14% (8%)	8% (7%)	6% (6%)	11%	11%	
U Road Condition	17% (16%)	13% (17%)	11% (18%)	17% (18%)	19% (18%)	15% (17%)	17%	17%	

Table 1: Historic Road Condition as Measured by National Indicators (Numbers in brackets are National Average figures for comparison)

- 7.6 In each case, the percentage above refers to the proportion of the network that 'should be considered for maintenance' and therefore broadly equates to the number of roads in a 'poor' condition; a lower number is consequently better.
- 7.7 For 'classified' (A, B and C roads) the national trend has been for steady improvement over the past five years. Hertfordshire's classified roads have also followed or been ahead of this trend with the result that we have, broadly speaking, halved the number of 'poor' classified roads on the network over the past five years.
- 7.8 Unclassified roads nationally deteriorated slightly during the past five years but have recovered slightly this year. Hertfordshire's unclassified roads followed a similar pattern but with a stronger recovery putting them ahead of where they were five years ago.
- 7.9 It should be noted that there is significant year-on-year volatility in these numbers due to factors like the severity of the preceding winter, so it is best to look at the trend over a number of years as discussed here rather than year-to-year changes.
- 7.10 The improvements to Hertfordshire's figures over this period and, especially the relatively stronger performance when benchmarked against national figures over the same period, has been achieved by following our asset management-based maintenance strategy to get the best value from the sustained levels of investment made available over the period.

7.11 Reviewing Targets - Classified Roads

7.12 Reviewing Hertfordshire's targets for A, B and C roads where current condition is well ahead of where it was in 2010/11, Members may wish to consider resetting the 'steady state' target to 15/16 values +/-2% to allow for annual variations.

- 7.13 Retaining the current targets would seem inappropriate considering the current condition of the classified roads and the current national averages for classified roads.
- 7.14 The cost of setting targets lower (better) than current Classified road performance levels could be explored, however achieving such targets is likely to be expensive and make relatively little difference to the service offered to the public in comparison to aiming to hold the current levels.
- 7.15 Modelling and technical analysis work suggests that steady state based on 15/16 indicator values could be maintained with the following annual Cat 4 programme allocations:

Road Class	Annual Spend
A Roads	£6.6m
B&C Roads	£4m
Total classified	£10.6m

These allocations are <u>in line</u> with those envisaged in the funding identified for maintenance work in 17/18 and onwards through the Forward Plan. Note that these are scheme works costs only and don't include design elements or other non-scheme works funded from the capital allocation.

7.16 Reviewing Targets – Unclassified Roads

- 7.17 **Steady State:** The unclassified roads remain close to their steady state level (which also happens to be the national average for unclassified roads). The authority, therefore, could keep this target unchanged at 17% or lower the target to 15% to represent the current value. In either case the suggested target would be +/- 2% to take into account single year variances.
- 7.18 Maintaining this steady state can be achieved with an annual Cat 4 scheme works programme of £10m. This is in line with that envisaged in the funding identified for maintenance work in 17/18 and onwards through the Forward Plan. Note that these are scheme works costs only and don't include design elements or other non-scheme works funded from the capital allocation.

7.19 In summary:

- The condition of the various classifications of the road network has improved over the last five years by varying degrees
- This improved condition could be maintained within existing indicative budgets
- It is suggested that Hertfordshire should re-benchmark its targets against current (15/16) values (+/- 2% to allow for annual variations due to weather etc.).

8 Summary of Key Issues for Consideration

- 8.1 The general information within the APR on matters such as programme delivery, performance and the like, along with the update on general progress with asset management is presented for information and to create an ongoing record.
- 8.2 This report highlights three key areas for consideration
 - Maintaining level 3 performance on the DfT Incentive Fund,
 - The introduction of a new code of practice, "'Well-Managed Highway Infrastructure" and
 - Potential changes to carriageway performance targets

9 Financial Implications

9.1 The APR and appendices do not introduce any changes that will have a direct budgetary impact.

10 Equalities Impact Assessment

- 10.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.
- 10.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.
- 10.3 The Equality Act 2010 requires the Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 10.4 No EqIA was undertaken for this report because the APR and appendices do not introduce any changes that require an Equalities Impact Assessment (EqIA). Individual projects, programmes and strategies under development will be subject to an EqIA where appropriate.

11 Background information

- Appendix 1 Transport Asset Management Plan, Asset Performance Report 2016/17
- Appendix 2 Carriageway Performance Information Note.

Transport Asset Management Plan

Asset Performance Report 2016/17

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Executive Summary

The Asset Performance Report (APR) is the annual review of Transport Asset Management at Hertfordshire County Council (HCC), including updates on performance, policy, strategy development and other issues.

As an annual review, much of the material in the APR is a matter of factual updates and statistics rather than Policy or service changes. Chapters 1 and 2 give an overview of asset management nationally and locally while Chapters 3 to 8 detail particular asset groups.

Items impacting on Policies and strategies (new or updated) include:

- DfT Incentive Funding: successful award of Band 3 status, but with continuing work required to keep this.
- Code of Practice: ongoing work to fully understand the requirements and recommendations of the new 'Well-Managed Highway Infrastructure' Code
- Local Initiatives: Development of specific areas of work to ensure more efficient or effective working as outlined in National Guidance associated with Highways Asset Management.

Introduction

Asset Management continues to be at the heart of government thinking for the delivery of efficiencies within local and national highway services. The DfT incentive element of highway maintenance funding is now well established and I'm pleased to say that Hertfordshire achieved the top 'Level 3' this year, securing the full funding available to us. 2016 saw the launch of the long-awaited revised codes of practice and reviewing and, where necessary, revising our standards to take the new guidance into account will be a significant task over the next 18 months.

The highway service in Hertfordshire County Council has continued to evolve with the second generation of framework contracts now in place building on the experience gained so far. This year the focus will be on the two main term contracts for works and professional services. The first major break points in these contracts are in September 2019, meaning we will need to decide this year whether to extend or retender and also what changes we might want to see under either scenario in order to support the continued evolution of the service.

The apprentice, graduate and 'gap year' programmes are starting to mature and show their value with some capable young individuals joining the service; we are also actively exploring what other courses we might be able to use or see developed in order to make further development available to existing staff via the apprenticeship levy.

The Hertfordshire County Council highways service continues to be well placed to benefit from its strong position in the field of highway asset management by incorporating further improvements and efficiencies into the service as it develops over the next few years.

Rob Smith

Deputy Director, Environment (Highways)

May 2017

1. Asset Management State of the Nation

1.1 National Initiatives

1.1.1 DfT Incentive Funding.

From 2016/17, an increasing proportion of the Department for Transport's (DfT) capital allocation for highway maintenance will be tied to local authority performance in a number of key areas, such as asset management (AM) and efficiency.

Hertfordshire County Council's most recent application was submitted in February 2017 and met the requirements of a Band 3 rating (the highest), securing the full funding allocation. This was achieved after a lot of work was done compiling historical data, implementing changes to practices and creating/updating documents. However, as ongoing annual submissions are required, authorities must continually demonstrate they are delivering value for money, carrying out cost effective improvements and achieving planned outcomes, and continuous improvements.

Table 1: DfT Incentive Funding Levels.

Year	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21
Band 1	100%	90%	60%	30%	10%	0%
Band 2	100%	100%	90%	70%	50%	30%
Band 3	100%	100%	100%	100%	100%	100%
Planned	100%	100%	100%	100%	100%	100%
Actual	100%	100%	100%			
Actual	Band 2	Band 2	Band 3			

1.1.2 Approved Code of Practice (CoP) Review

The new CoP 'Well-Managed Highway Infrastructure' was released in October 2016, and Highway Authorities have until October 2018 to adopt the risk based approach it describes. The new CoP replaces the three previous individual Codes; 'Well-Maintained Highways', 'Management of Highway Structures' and 'Well-lit Highways'.

The CoP details 36 recommendations; an initial review identified some work to be done but did not identify major challenges for HCC arising from the new Code. A more in-depth review HCC's current practices has begun, comparing these against the CoP and its Recommendations. Where they differ HCC will need to change practices to suit the CoP or document the reasons for taking an alternative approach.

A paper was taken to Highways Cabinet Panel on 1 December 2016 to make the Panel aware of the new CoP and its potential implications for the highways service.

1.2 Local Initiatives

1.2.1 Highway Infrastructure Asset Management Plan (HIAMP)

A review of the previous Transport Asset Management Plan (TAMP) began in 2016 and is scheduled to be completed in 2017; when completed the resulting suite of documents will become the HIAMP. This is a large body of work that will include:

- Updating the AM Policy and Strategy that reflects the desired coordinated whole service approach to AM;
- Incorporating recommendations arising from the DfT Incentive Fund and the new CoP (where deemed suitable);
- Reviewing the interfaces between asset maintenance, network management and customer inputs; and
- Reviewing the lifecycle planning for main asset types.

1.2.2 Highways Asset Information

Ensuring current and reliable asset data is maintained is crucial when making decisions about service delivery, such as future maintenance treatments.

In 2016 a large amount of work was done by the AM Team under the Highways Asset Information (HAI) initiative. This project developed a policy, strategy, manual, processes and templates to ensure that when any asset is modified, added or removed from the network that the asset register is updated. It has been implemented by delivery teams for the 2017/18 financial year, with, indicators to measure performance still being developed.

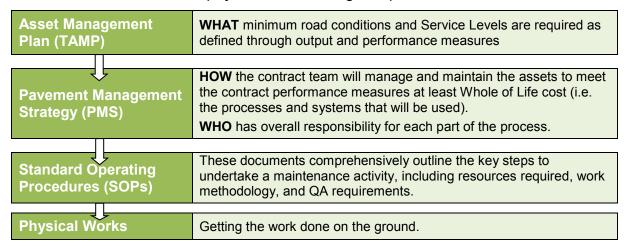
1.2.3 Pavement Management Strategy

Work commenced in late 2016 on the creation of a Pavement Management Strategy (PMS). Due for completion in 2017 the PMS will further document HCC's strategy for maintaining the highway networks paved carriageway areas ('pavements').

It is designed to increase the efficiency and effectiveness of carriageway asset management and maintenance. This will ensure that the physical condition of the County's roads under is adequate for the needs of road users. In essence it aims to answer the following three questions:

- 1. What do we want the pavements to deliver / how do we want them to perform?
- 2. What is the plan to achieve this?
- 3. How to measure whether this has been achieved?

The PMS document is the key link between the outcome requirements detailed in the contract document and the physical works being completed.



1.2.4 Roads in Herts update

The AM Team are working alongside Development Management in updating the 'Road in Herts' document. This document serves as a guide for how the County's roads should be designed and is especially important for developers. The changes the AM Team are recommending are closely linked to AM functions and include but are not limited to:

- Reducing future maintenance issues/obligations from new adoptions; and
- Ensuring developers provide HCC with all relevant asset information.

1.2.5 Resilience

In 2016 a project was started to identify a Resilient Network and corresponding strategy; a key piece of evidence required by the new DfT Incentive Funding.

An interim Resilient Network was agreed in December 2016, with some outstanding issues to be resolved before a final network and strategy is approved.

1.2.6 One and Done

In February 2017 guidance was issued on the concept of 'One and Done' work. This is about ensuring that when any HCC directed works are undertaken on the highway network, due consideration is given to ensuring, that from a public, financial and technical perspective, known issues in that area are considered and, where affordable and beneficial, undertaken at the same time. If successfully implemented, balances Asset vs Network vs Customer vs Affordability.

1.2.7 Maintenance Capital Funding

Historically these have been submitted as one bid for the annual maintenance of the majority of the highway assets. The 2017/18 bids (submitted early 2017) have been split into individual asset bids for structures, carriageways, footways and drainage.

The aim here is to present a better overall picture or business case of what the maintenance funding will specifically be spent on and what it will deliver as a result.

1.2.8 Restoration Fund

In 2016 the Restoration Fund Project was implemented with the aim of tackling lower priority works which the standard maintenance budget cannot always cover. The focus in 2016 was on work to signs – cleaning, clearance of obscuring vegetation, adjusting, repairs or removal where the sign was no longer needed. Under the same programme and where possible utilising the traffic management for the signage works the following operations were also delivered:

- Road marking renewal;
- Vegetation works clearance; and
- Drainage works

1.2.9 Skid Resistance

In 2016, the processes associated with the Skid Resistance Strategy were completed and are now being implemented. This includes development of a complex model categorising the entire carriageway network against the requirements in the Strategy. As a result a methodology for prioritisation of sites that require further investigation for possible remedial works has been agreed.

There is also a future desire to carry out research into the choice of materials and cost effective treatments for increasing skid resistance.

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2. Highway Infrastructure Overview

2.1 Summary of Highway Inventory and Value

Hertfordshire County Council manages a complex highway network, with equally complex assets, all working to connect people and move goods across the large County (4.5 million daily journeys on the network). Whilst Hertfordshire County council as the Highway Authority is responsible for A, B, C and unclassified roads, the motorway and trunk roads operated by Highways England (i.e. M25, M1, A1) are closely linked with these, and how the region operates as a whole.

Highways assets managed by Hertfordshire County Council have a replacement value (GRC) of £21 billion, which represents the theoretical cost to rebuild HCC's assets from scratch with a modern equivalent asset. The current value (DRC) of £7 billion represents the current value of the assets, in their current deteriorated condition.

Table 2: Overview of HCC's Highway Infrastructure Inventory

Highway Infrastructure	Highway Infrastructure Inventory Overview*		
Carriageways – All classes A, B, C and U	Section Lengths - 5,110 km Area – 32.7 million m ²	£ 6,044,234	£ 5,552,622
Footways and Cycleways	Linear – 5,456 km Area – 10.4 million m ²	£ 810,439	£ 729,568
Structures	1,600 structures	£ 1,003,068	£ 6,25,539
Street Lighting	115,500 Lamp columns 2,000 feeder pillars 5,800 illuminated bollards 13,600 illuminated signs	£ 196,375	£ 51,146
Traffic Management Equipment (ITS)	467 signal crossings 197 signal junctions Traffic counters, VM signs.	£ 61,186	£ 26,934
Street Furniture	175,000 non illuminated signs 259 km safety fencing Bus stops/shelters, grit bins	£ 121,938	£ 60,969
Land		£12,440,011	
		£20,677,251	£ 7,046,779

^{*}Information presented in this table is approximate. Further details are provided in individual sections

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Deriving these asset valuations is complex and varies annually due to factors such as unit rates, condition, inflation and the inventory information held. Small unit rate changes aggregated across millions of square meters impacts the total asset value.

There is a continual drive for better asset and condition information and use of this information to guide the service and make efficiencies. AM utilises informed decision making which only comes from robust asset inventory and condition information.

2.2 Highway Annual Programme Overview

HCC operates multiple annual work programmes continually throughout the year. Some scheme types are seasonal due to weather requirements (longer daylight hours and generally better weather means summer is preferred), whilst others are less weather dependent and can be done throughout the year. Programmes allow for mobilisation and lead in; time used to finalise site details, designs, apply for necessary permits, traffic orders and order/mobilise materials as required.

Table 3: Overview of the Annual Highway Programmes

Programme	Programme Detail	Programme Information				
Carriageway, Footway & Cycleways	Preventative Treatments. (surface dressing, slurry sealing & micro surfacing)	Preventative treatments seal the surface. These are undertaken from spring through to late summer and prepare the carriageway for the winter weather. The large scale and volume of sites covered results in these projects being managed as countywide work streams. Preliminary preparation work, such as patching, precedes the preventative treatment works.				
	Surfacing. (overlay, inlay, reconstruction, recycling)	Surfacing works are less weather dependant and can be programmed throughout the year although works can be delayed by wet weather and low temperatures.				
Drainage	Schemes	Significant design aspects and longer lead in times				
Structures	Maintenance & Upgrades	require many schemes to be programmed over two years, year 1 investigation and design, year 2 construction. Works carried out throughout the year.				
Lighting & Traffic Mgmt Equipment (ITS)	Refurbishment & Replacement	Specialist design and construction with delivery throughout the year. Often lighting or ITS improvements are delivered as part of a wider project. Works carried out throughout the year.				

2.3 Budget Overview – Highway Infrastructure

Table 4 shows the annual expenditure across the different asset types for the past three years. On the whole, funding proportions are kept relatively constant for asset Agenda Pack 163 of 274

types across years. This gives consistent expenditure trends which can be tracked against condition. There are several investment peaks in particular years which represents additional funding for specific projects.

Table 4: Expenditure Overview for all Highway Infrastructure Assets 2014/15 – 2016/17

Programme Detail		2014/15 (000)		2015/16 (000)		2016/17 (000)	
Carriageway Surfacing & Surface Treatment	£	19,055	£	20,278	£	19,673	
Footway Surfacing & Surface Treatment		2,245	£	5,035	£	5,101	
Drainage Schemes	£	1,295	£	1,200	£	1,385	
Structures Capital Maintenance Schemes	£	1,416	£	2,460	£	4,950	
Street Lighting Replacement	£	1,580	£	1,000	£	1,951	
ITS Refurbishment	£	650	£	446	£	403	

3. Carriageways

3.1 Inventory and Value

HCC have approximately $\underline{32.7 \text{ million } m^2}$ of carriageway – the equivalent of about 4,500 football pitches. This equates to over $\underline{5,100kms}$ in total section length distributed as shown in Table 5.

Table 5: Overview of HCC Carriageway Network

Road Class		Length (km)	Area (m2)	Proportion GRC (000s)		DRC (000s)	
	Α	307.9	2,677,101	8.2	£ 550,349	£ 455,315	
Urban	В	176.8	1,373,736	4.2	£ 272,302	£ 233,210	
Orban	С	359.6	2,319,420	7.1	£ 416,379	£ 394,236	
	U	2,638.5	16,833,630	51.5	£ 2,557,425	£ 2,859,600	
	Α	403.3	3,601,997	11.0	£ 572,746	£ 610,788	
Rural	В	154.4	1,033,605	3.2	£ 142,947	£ 177,683	
Ruiai	С	468.3	2,430,477	7.5	£ 296,324	£ 416,446	
	U	602.5	2,391,925	7.3	£ 279,147	£ 405,341	
Total 5,111.3 32,661,891 £ 5,087,619							
	_	ay GRC and DI n and regional fa	ear items like	£ 6,044,234	£ 5,552,620		

The carriageway asset is continually growing through the adoption of roads from new developments, new road construction and occasional de-trunking.

HCC has good basic carriageway dimension information (lengths and widths). In addition most roads have further limited information about surface type and construction, but only limited data relating to age and maintenance treatments.

The HAI initiative (section 1.2.1) is aiming to improve the information held by recording more detailed asset information, based on treatment type, material information and location as part of the contractual requirements for HCC suppliers.

This data will improve the deterioration modelling which in turn enables better informed decision making about the network investment. The condition and age profile will be used together to determine the right treatment at the right time for each road section. Optimisation work is used to determine which sections get treated within the limited resource available.

3.2 Strategy and Lifecycle Planning

3.2.1 Maintenance Strategy

The basic strategy for maintaining the carriageway network is:

- To discharge HCC's statutory duty under the Highways Act to maintain the public highway in a safe condition, thus ensuring the safe and efficient movement of people and goods in line with the hierarchy; and
- To extend the life of carriageways and ensure they reach their full service potential as efficiently and effectively as possible by adopting an asset management approach that seeks to minimise whole life costs for a given level of service and maximise the benefits gained from the available investment.

In implementing the strategy account is taken of:

- The agreed <u>Objectives</u> (currently to keep the network in steady-state);
- The <u>Benefits</u> to customers and road-users (busier roads, which benefit more people, typically have a higher priority); and
- The potential <u>Costs and Risks</u> to the authority from different actions.

The strategy is primarily delivered through the Category 1, 2 and 4 programmes.

Table 6: Category 1, 2 and 4 Programmes

Category	Purpose	Typical Work Types	Delivery
Cat 1 (Safety Focus)	Reactive service. Keep the network safe & ensure HCC discharges its legal duties in a robust and efficient way.	Fixing potholes & similar defects	HST
Cat 2 (Serviceability Focus)	Planned preventative maintenance & repairs. Keep the network serviceable & prevent Cat 1 defects forming & defer the need for Cat 4 work.	Localised patching works & joint sealing to fix specific localised defects or areas of deterioration.	Contractor (Ringway)
Cat 4 (Efficiency Focus)	Planned preventative maintenance & planned renewals. Keep the network serviceable, prevent Cat 1 defects & deliver best value by focusing on long term benefits and whole life costs of options to deliver optimised programmes of work as efficiently as possible.	Large scheme-type works &, where possible, developed & delivered as work streams in order to get economies of scale	Framework contracts

3.2.2 Lifecycle Planning

Lifecycle planning is a key AM tool using condition and performance data to gauge asset deterioration over time and plan the most effective interventions at the right time to get the best performance from the asset.

Carriageway condition data is gathered through surveys and historical trends are compiled to establish how the asset performs and what factors influence longevity and treatment lives. Using this and considering cost and function over the asset life, optimum treatment intervention points are determined. Several models are used for predicting trends through empirical condition and inventory data; these are used to support strategic maintenance planning decisions.

3.3 Condition Monitoring and Performance

3.3.1 Condition Monitoring

The following surveys (machine on A, B & C and visual on U roads) are currently used to collect carriageway condition data. This condition information is then used to plan future maintenance works and produce a range of Performance Indicators (PI's).

Table 7: Carriageway Survey Types

Survey Type	Survey Scope	Coverage	Frequency	Output	
Surface Condition Assessment for the	A roads	100%	Annual	Surface Defects,	
National Network Roads (SCANNER)	B, & C roads	100% in one direction	(Sept – Oct)	Roughness, Rutting, Spatial geometry	
Coarse Visual Inspection Survey (CVI)	U roads	100%	Annual (Sept – Oct)	Surface Defects, Rutting	
Safety Inspections	Varies	Varies	Ongoing	Surface Defects, Rutting – above a given tolerance	
Sideways Force Coefficient Routine	A roads	100% in one direction	May Sont	Measure of wet skid resistance of the road surface	
Investigation Machine (SCRIM)	Busy B & C Roads	Varies	May - Sept		
Falling Weight Deflectometer (FWD)	Varies	Varies	Oct - Apr	Structural information	
Core Data Logs	Varies	Varies	Oct - Apr	Structural information	

3.3.2 Carriageway Performance

Carriageway condition targets are based on maintaining steady-state, relative to the 2010/11 condition baseline (when targets were last reviewed) as shown in Table 8.

Table 8: HCC Carriageway Condition Data

DI Decemination	DI Def	Target	Historic Data					
PI Description	PI Ref	2010/11 Baseline	2012/13	2013/14	2014/15	2015/16	2016/17	
A Road Condition	130-01	8%	6%	4%	4%	3%	3%	
B&C Road Condition	130-02	11%	17%	14%	8%	6%	5%	
U Road Condition	*U/C Roads	17%	11%	17%	19%	15%	16%	
A Road ACI (Average Condition Index)		5.6	6.1	6.8	5.7	4.9	4.5	
B, C, U Road ACI (Average Condition Index)		10.4	8.8	14.6	10.3	10.2	10.4	

^{*}Not compulsory data.

National Indicators (NI) - The first two PI's are official NI's which are reported to Central Government annually as part of the single data set, required under Local Government Act 1972. The third PI, covering U roads, is no longer compulsory but is still collected by most local authorities on a voluntary basis and these results are collated by DfT and published along with the compulsory NIs as part of their annual report 'Road Conditions in England.

Each of these NI's shows 'Percentage of the network where maintenance should be considered' so a lower number is better and the measure can broadly be thought of as the percentage of the network in 'poor' condition. Consequently this only reflects the proportion of poor roads and doesn't reflect the whole network condition. So although they are national standards and useful for benchmarking, they do not reflect or take account of preventative maintenance done on the network which might prevent a road falling into 'poor' condition.

To better reflect the condition of the whole of the network, HCC has developed and reports on its own Average Condition Index (ACI), which is discussed in more detail later.

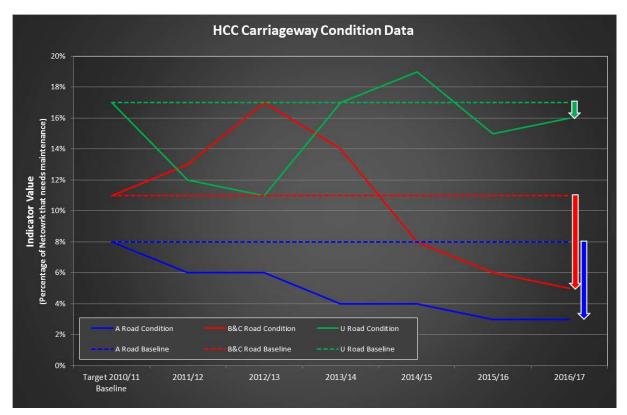


Figure 1: Historic Road Condition (NI).

The NI's recorded in HCC are generally in line with nation trends, with the condition improving, driving the lines downward.

<u>A Roads</u> – have fallen consistently over the 5 years from 8% down to 3% in 2015/16 with no occurrences of the condition worsening in the period. *Consistent improvement over the past 5 years*

<u>B&C Roads</u> – the first 3 years after the target was set at 11% saw the condition worsen with a peak level of 17% recorded in 2012/13. Since then it has fallen year on year, passing under the target for the first time in 2014/15. The latest record in 2015/16 of 6% is the lowest score on record. *Consistent improvement over the past 3 years*

<u>U Roads – the first 3 years after the target was set at 17% saw the condition improve</u> or stay the same. 2014/15 saw an anomaly where the condition worsened to a peak of 19%. Since then the last record is below the target at 15%. *Inconsistent -2 years improving*, 2 year worsening, and 1 year improving.

However, single-year variances must be treated with caution as condition returns can vary by up to a few percentage points from year to year and trends monitored over a longer period give a more reliable view.

<u>Average Condition Index (ACI) -</u> the final PI in Table 8 is ACI, which unlike the NI's is a measure of the overall condition of the network as a whole.

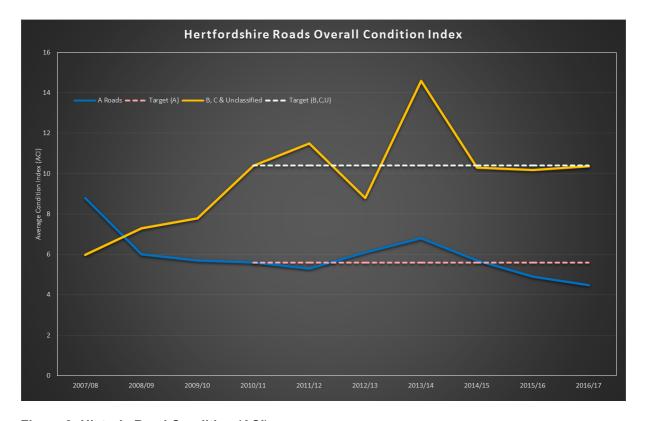


Figure 2: Historic Road Condition (ACI).

<u>A Roads</u> – have fallen consistently over the 5 years from 8% down to 3% in 2015/16 with no occurrences of the condition worsening in the period. *Consistent improvement over the past 5 years*

B, C & U Roads – condition has varied since the baseline was set, with it peaking at its worst in 2013/14. Since then it has improved and the past three years has seen it at or below the target.

3.4 Budget and Delivery

The overall budget for carriageway capital maintenance 2016/17 was £19.6 million distributed across the various work streams as shown in Table 9.

Table 9: Carriageway Capital Maintenance Programme.

Treatment Type	Delivered 2015/16		gramme. Delivered 2016/17		Proposed 2017/18	
	Area (m²)	Cost (000)	Area (m²)	Cost (000)	Area (m²)	Cost (000)
A Road Surface Dressing	295,000	£1,475	403,000	£2,000	106,000	£750
A Road Surface Inlay	111,363	£4,485	150,185	£4,361	196,154	£5,100
Total A Roads	406,363	£5,960	553,185	£6,361	302,154	£5,850
Local Road Surface Dressing	479,000	£1,625	272,000	£900	619,000	£2,450
Local Road Micro Asphalt	793,808	£ 5,248	457,194	£ 3,405	356,700	£ 4,000
Local Road Surface Inlay	333,000	£ 7,445	490,000	£ 9,007	500,000	£ 8,669
Local Road Recycling/Recon.	-	-	-	-	-	-
Total Local Roads	1,605,808	£14,318	1,219,194	£13,312	1,475,700	£15,119
Total All Roads	2,012,171	£20,278	1,772,379	£19,673	1,777,854	£20,969

3.5 Key Issues and Improvement Actions

Condition Baseline

As detailed in 3.3.2 the condition baseline was set at those measure in 2010/11. It has been six years since that 'baseline' was set so it is due for a review; during this year, we will consider whether this baseline is still appropriate or whether it should be updated.

Pavement Management Strategy

Current work on developing this strategy will be completed during 2017/18 and will document and detail how HCC manage the carriageway assets (more detail is included in section 1.2.3).

Part of the PMS will be a 'materials toolkit' which in addition to its primary purpose of maximising carriageway life is to use supply chain and regional technical group discussions to gather expertise in the latest maintenance innovations and materials being used.

Maintenance in Design

Design and materials for improvement schemes need to take future maintenance into account. A whole-life cost approach is preferable to a short term view and a strategy and guidance is being developed to provide design engineers with information to assist in designing with this in mind.

Drainage

Poor drainage can contribute to and accelerate carriageway deterioration – hence there is a key link and need to provide a clear strategy/ approach to the design and regular maintenance of drainage for carriageway preservation. This will be a key section of the Pavement Management Strategy.

4. Footways and Cycleways

4.1 Inventory and Value

HCC have over $\underline{10 \text{ million } m^2}$ of surfaced footways and cycleways. This equates to over 5,400kms of total section length distributed as shown in Table 10, all of which are operated and maintained by HCC.

Table 10: Overview of HCC Footway Network

Table 16. Overview of 1100 Footway Network							
Footw Hierar		Length (km)	Area (m²)	Proportion % Length.	GRC (000s)	DRC (000s)	
Urban	1	35.8	107,644	0.7	£ 8,864	£ 5,107	
	2	169.6	376,630	3.1	£ 28,492	£ 22,617	
	3	628.5	1,291,019	11.5	£ 87,066	£ 83,900	
	4	3,971.1	7,531,630	72.8	£ 487,673	£ 531,126	
Rural	1	0.0	0	0	0	0	
	2	1.9	3,383	0	£ 232	0	
	3	27.3	54,412	0.5	£ 3,332	£ 3,648	
	4	504.4	825,763	9.2	£ 50,388	£ 67,120	
Cycleway bound su		117.4	213,125	2.2	£ 16,123	£ 16,050	
Total 5,456 10,403,606				£ 682,170			
Total footway and cycleway GRC and DRC including inflation and regional factor				£ 810,439	£ 729,568		

This asset inventory is growing through the adoption of new developments and the creation and extension of existing features across the county. There is a continual need to ensure the footway asset inventory is up to date with accurate information.

The footway inventory is generally quite good, with a lot of available data. Basic footway dimensions have been historically collected and are held within Confirm. Previously surface material had not been updated; however the Footway Network Survey (FNS) has made this data available and has been added to the inventory. More detail about the surface material and its characteristics is being collected as surface treatments or resurfacing works are carried out.

Age profiles of footways and cycleways have not been recorded in the past and so condition has had to be related to expected age. However, for works carried out in future this data will now be recorded.

4.2 Strategy and Lifecycle Planning

4.2.1 Maintenance Strategy

The strategy is to maintain the asset as effectively and efficiently as possible by targeting resources to where they will give the greatest overall long-term benefit. Implementation of the strategy takes account of:

- Benefits to customers and pedestrians (busier footways, which will benefit more people, typically have a higher priority); and
- Potential Costs and Risks to the authority from different courses of action.

The strategy is primarily delivered through the Cat 1, 2 and 4 programmes, each of which has its own role to play (see Table 7 and section 3.3.1 for more information).

4.2.2 Lifecycle Planning

A simple lifecycle model uses the condition information collated within the FNS. Each footway is modelled for in-year treatment selection and estimated cost of works. Sites that are identified from the model are verified for suitability and extent by the project manager.

4.3 Condition Monitoring and Performance

4.3.1 Condition Monitoring

The nationally developed FNS was adopted in 2011 as the format to collect footway condition data. It is a quick network level survey tool which enables authorities to determine which footways require further consideration for possible treatment.

It is efficient for surveying of large sections of footways, as traditional surveys collected data relating to individual defects/defect types along a footway section. This was time consuming and resulted in either a very coarse or overly detailed results (depending on survey used). FNS provides a balance by using an assessment rating instead of a defect type.

Alternatives to the standard FNS have been developed as it was felt that its basic form did not provide enough detail for scheme development. HCC have created a simple lifecycle model and the additional inspection data captured is used for analysis and to update the inventory. Furthermore, the collection of 'additional data'

will enable the creation of a deterioration model based. This is the long term objective of condition monitoring and will help provide future value for money.

Table 11: FNS

Survey Type	Survey Scope	Coverage	Frequency	Output
Footway Network Survey	All footways	100%	Network to be covered every 2 years.*	Condition banding together with the major cause of defect onsite. Asset inventory information provided for update

^{*}The FNS Survey aims to cover the entire network every 2 years. Due to recent changes, this is not currently being achieved.

The introduction of new technology and streamlined work processes should ensure that the target is met in the near future.

Survey results provide a consistent benchmark for site comparisons and aiding scheme selection (but do not yet give a robust means of reporting overall condition). The additions to the survey methodology developed a measure that reasonably reflects the condition of the footway network as the public might perceive it.

4.3.2 Footway Performance

A simple lifecycle model is used that reports a desired treatment against each footway section based upon condition recorded during the FNS. The results are then calibrated against onsite inspections and a robust network programme is formed. In line with the footway and cycleway strategy, this work is supplemented by discussions with Ringway on issues emerging from the Cat 1 and 2 routes that need consideration for inclusion in the Cat 4 programmes.

Reporting asset performance is a key part of the longer term desired outcomes for the development of the footway survey. This will help to support both performance management and investment decisions.

4.4 Budget and Delivery

The overall budget for footway capital maintenance 2016/17 was £5.1 million distributed across the various work streams as shown in Table 12. Note that this includes significant footway schemes funding via the Highway Locality Budget as well as those that formed part of the core programme.

Table 12: Footway and Cycleway Capital Maintenance Programme.

Treatment Type	Delivered 2015/16		Delivered 2016/17		Proposed 2017/18	
	Area (m²)	Cost (000)	Area (m²)	Cost (000)	Area (m²)	Cost (000)
Surface treatment (micro asphalt)	78,219	£ 1,115	95,587	£ 1,223	82,155	£ 1,063
Resurfacing & Reconstruction	81,321	£ 3,920	80,470	£ 3,878	61,581	£ 2,995
Total	159,540	£5,035	176,057	£5,101	143,736	£ 4,058.

4.5 Key Issues and Improvement Actions

Footway Lifecycle Planning Model

The simple network level lifecycle planning model has already evolved into a footway section model. Further work and analysis will be undertaken in conjunction with the footway survey. Once the rule set for the survey has been established, a lifecycle planning model can utilise the condition information and translate this data into treatment requirements for each footway section.

Footway Deterioration Model

Leading on from the lifecycle planning model a deterioration model will be developed over the coming years. This model will provide an optimised programme of works and a condition forecast based on budget expenditure. This can be used to understand what investment level is needed to maintain the footway network at the current service level, or what would happen to future condition based on different budget scenarios.

5. Drainage

5.1 Inventory and Value

The HCC highway drainage system is an evolved asset comprised of several distinct asset sub-groups:

- Carriageway and footway gullies (drainage system inlets);
- Inspection and access chambers (manholes and catchpits);
- Sustainable Drainage Systems (SuDS) such as soakaways and storm cells etc.;
- Highway drains (buried pipework);
- Outfall structures (drainage system outlets to watercourses);
- Roadside grips (shallow unlined ditch inlet channels cut in verges); and
- Road-side ditches (in many cases owned by adjacent landowners).

These assets work in combination to remove surface water from the highway and transport it into a water course, utility storm system or SuDS system.

The drainage asset valuation is included in the carriageway linear items valuation and forms part of the carriageway GRC. Drainage asset inventory is not a readily available data set so general assumptions have been made based upon carriageway classification and modern equivalent design to value the drainage assets.

5.2 Strategy and Lifecycle Planning

5.2.1 Maintenance Strategy

The basic strategy for maintaining the highways drainage network is:

- To discharge HCC's statutory duty under the Highways Act to maintain the public highway in a safe condition, thus ensuring the safe and efficient movement of people and goods in line with the hierarchy; and
- To extend the life of the highway drainage assets and ensure they meet their full service potential efficiently and effectively as possible by adopting an asset management approach that seeks to minimise whole life costs for a given level of service and maximise the benefits gained from the available investment.

The strategy is delivered through the Category 1, 2, 4 and 5 programmes.

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Table 13: Drainage Service Delivery

Category	Purpose / Activities
Cat 1 Emergency/Urgent Works	Placing flood warning signs, cleaning up and jetting pipes from flood events and minor reactive repairs.
Cat 2 Reactive Maintenance	Minor repairs and/or adhoc clearance of non- functioning drainage assets such as grips, ditches and pipe drains etc. Investigation and escalation of more significant issues to the Cat 4 programme.
Cat 4 IWP Drainage Schemes	More significant drainage repairs or major improvement works identified through Cat 2 and 5 activities.
Cat 5 Cyclical Routine Maintenance	Cyclic cleansing / emptying of road-side gullies and similar drainage assets.

5.2.2 Lifecycle Planning

Lifecycle planning is a key AM tool using condition and performance data to gauge asset deterioration over time and predict and plan future interventions to make them as effective and efficient as possible. However, there are a number of challenges with applying this technique to drainage assets. Many drainage assets like pipes, gullies and chambers are long- or indefinite-life assets, meaning that they will not need renewal or replacement on a predictable basis within a normal lifecycle. Other assets that do need renewal or replacement, like soakaways, are difficult to access for routine condition surveys and the inventory we have is incomplete or unreliable. The confidence in the accuracy of the drainage inventory and the lack of easily obtained, consistent, repeatable condition information (many buried drainage assets require expensive CCTV surveys to assess condition) makes lifecycle planning more difficult for drainage assets than for many other asset types. Future improvements to the asset inventory and condition data techniques may address this in the future but, in the short term, the lifecycle planning focus for drainage assets is likely to focus on key assets and locations where the work will significantly improve network resilience.

Cyclical routine maintenance is delivered by the HST contractor Ringway as part of the Cat 5 'Contractor Led' service and has elements of lifecycle planning in its structure. Emptying and cleaning HCC's 168,000 gullies is undertaken on an 18 month cycle with vulnerable gullies (6,152) and those gullies on high speed roads (7,122) cleaned on a 6 and 12 month cycle respectively. A project is underway to collect and record silt levels in gullies as they are cleaned to enable future Agenda Pack 178 of 274

improvements to the cyclical maintenance scheduling. Knowledge of silt levels will provide a record of asset performance and may allow cleaning schedules to be refined in the future to more closely reflect actual need.

In addition The Cat 1 and 2 service is now being used to inform the Cat 5 service and will provide further information to identify hot spot areas.

5.3 Condition and Performance

5.3.1 Condition Monitoring

Aside from the silt level measuring and general condition check on gullies during emptying described above there is no routine condition monitoring of drainage assets for the reasons touched on in 5.2.2.

5.3.2 Drainage Performance

For reasons previously addressed there is no structured measure of how the drainage asset is performing. Possible measures that could be adopted include but are not limited to:

- Number of highway flooding incidents
- Silt levels in gullies
- Road traffic collisions attributed to highway flooding/surface water

5.4 Budget and Delivery

The overall budget for drainage maintenance schemes in 2016/17 was £1.38 million distributed across the various project types as shown in Table 14.

Table 14: Drainage Capital Maintenance Programme.

	Delivere	d 2015/16	Deliver	red 2016/17	Proposed 2017/18	
Reference	No. Schemes	Total Expenditure	No. Schemes	Total Expenditure	No. Schemes	Total Expenditure
Investigation	16		12	£1,385,000	10	£1,600,000
Quick Win	1		1		0	
Minor Works	2	£1,200,000	1		1	
Major Schemes	20		18		18	
3rd Party	4		0		TBC	
Total	43		32		29	

5.5 Key Issues and Improvement Actions

HCC have a database of carriageway and footway gullies but little information on other drainage assets, despite the huge amount in existence. This currently means HCC cannot organise a cyclical cleaning or inspection regime on these other assets and the lack of regular maintenance could lead to premature failure of said assets.

The HAI intuitive is aiming to continually improve the accuracy and completeness of drainage assets year on year.

6. Structures

6.1 Inventory and Value

HCC has a large bridge stock being seventh on the list of highway authorities in terms of numbers of structures. HCC's ageing bridge stock is typical of similar Counties, with many historic structures but with a large proportion of reinforced concrete bridges many of which are now more than half way through their anticipated life. HCC's structures are broken down into the structure types shown in Table 15.

Table 15: Overview of Bridge Stock Valuation at April 2016

Asset Group	No. of Assets	GRC Value (000)	DRC Value (000)
Bridges	622	£ 699,971	£ 277,923
Retaining Walls	74	£ 16,644	£ 9,158
Culverts	442	£ 94.259	£ 64,017
Sign Gantries	8	£ 746	£ 546
High Masts	114	£ 3,405	£ 1,930
Tunnels & Underpasses	5	£ 61,194	£ 44,591
Other	337	£ 126,848	£ 83,250
Total	1,602	£ 1,003,068	£ 625,540

This large highway structures stock is currently valued at around £1 billion. The 1,600 highway structures listed above are owned and maintained by HCC, but there are 900 more structures in the county owned and maintained by Network Rail, Canals and Rivers Trust and the District and Borough Councils.

6.2 Strategy and Lifecycle Planning

6.2.1 Maintenance Strategy

The basic strategy for maintaining the highways structures assets is:

- To discharge HCC's statutory duty under the Highways Act to maintain the public highway in a safe condition, thus ensuring the safe and efficient movement of people and goods in line with the hierarchy; and
- To extend the life of the highway structures assets and ensure they meet their full service potential efficiently and effectively as possible by adopting an asset management approach that seeks to minimise whole life costs for a given level of service and maximise the benefits gained from the available investment.

Bridges schemes are promoted in two ways as detailed in Table 16 below.

Table 16: Bridge Schemes

Category	Purpose / Activities			
Reactive Maintenance	Inspection records identify schemes to correct poor condition			
Targeted Preventative Maintenance	Asset Management approach which utilises targeted preventative maintenance interventions to maximise the life and value from the DfT's Structures Asset Management Planning Toolkit (SAMPT). The toolkit is summarised below in Figure 3.			

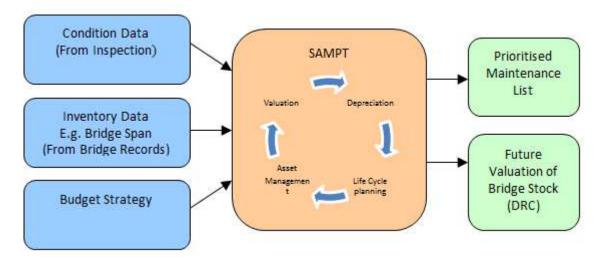


Figure 3: The Structures Asset Management Planning Toolkit

The SAMPT's valuation is used in Hertfordshire's accounts in line with Whole Government Accounting (WGA) Principles.

6.2.2 Lifecycle Planning

The introduction of the SAMPT has enabled HCC to develop a basis for lifecycle planning. HCC has developed this programme further and uses the base information for determining estimated service lives and deterioration rates for each element.

The toolkit has been used to look at future predicted condition information based on different capital expenditure. The complexities of the structural model are being further refined, to better inform the life cycle planning and maintenance prioritisation of the structure stock.

6.3 Condition Monitoring and Performance

6.3.1 Condition Monitoring

Condition monitoring of structures is undertaken as follows:

- General Inspection every two years; and
- Detailed Principal Inspection every 6-10 years.

Table 17 - Condition of Structures Stock

		Condition Band					
Structure Type	Number	Very Good	Good	Fair	Poor	Very Poor	
Bridges	622	254	225	128	15	0	
Retaining Walls	74	30	18	16	10	0	
Culverts	442	204	144	78	13	3	
Sign/Signal Gantries	8	4	3	1	0	0	
High Mast Lighting	114	0	0	0	114	0	
Tunnels and Vehicular U/P	5	1	4	0	0	0	
Other	337	176	127	33	1	0	
Full stock	1,602	669	521	256	153	3	

6.3.2 Structures Performance

Condition data generates a Bridge Condition Indicator Score (BCI) for every structure. The BCI's are combined to calculate an overall Bridge Stock Condition Score (BSCI). BCIAVERAGE scores include all elements of the bridge. BCICRITICAL score considers only load carrying and safety critical elements.

Hertfordshire's BSCI_{AVERAGE} score is 89.38, BSCI_{CRITICAL} score is 81.13. This places both indicators in the 'good' range.

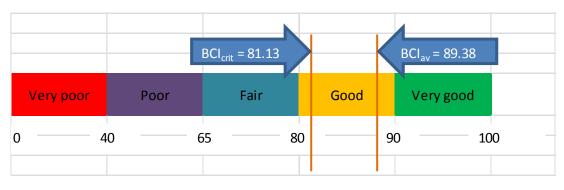


Figure 3: Hertfordshire BCI (Stock) Condition Banding

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The 2017 Bridge Stock Condition Scores have changed only marginally from the previous calculation in April 2016.

Table 19: HCC Structures Condition Scores

Condition	April 2013	April 2014	April 2015	April 2016	April 2017
BSCI _{AVERAGE}	90	90	89	89.44	89.38
BSCICRITICAL	87	84	80	81.13	81.13

6.4 Budget and Delivery

The Structures budget for 2016/17 was increased significantly from previous years, based on an analysis of the risk and deterioration profile of the stock. The forward works programme is planned to deliver a continuing capital spend of £4.95m.

Table 20: IWP Scheme Delivery 2016-2017

Bridges Capital Programme	Delivered 15/16	Delivered 16/17	Planned 17/18
Highway bridge refurbishment	£2,158,478	£ 527,406	£1,515,000
Footbridge refurbishment	£ 13,562	£ 709,608	£ 985,042
Retaining wall, Culvert and "Orphan"	£ 0	£ 658,212	£ 621,734
Waterproofing and joint replacement	£ 6,793	£1,603,064	£ 798,224
Bridge capacity assessment	£ 33,841	£ 20,960	£ 110,000
Programme Management and overheads	£ 146,474	£ 226,644	£ 250,000
Overheads	£ 0	£ 500,000	£ 600,000
Asset Management	£ 105,114	£ 15,440	£ 70,000
Total	£2,464,261	£4,261,335	£4,950,000

7. Street Lighting

7.1 Inventory and Value

HCC has the fifth largest number of lighting units for any UK highway authority, with a gross replacement cost of almost £200 million. The various street lighting assets are summarised in Table 21.

Table 21: Street Lighting Assets

Street Lighting Assets	Number of units		GRC (000)
Columns up to 12.0m	113,637	£	179,711
Subway Units	3,907	£	1,102
Feeder Pillar	1,950	£	2,954
Columns up to 15.0m	114	£	275
Footway Street Lighting	905	£	317
Illuminated Signs.	13,594	£	9,059
Belisha Beacon	416	£	383
Bus Shelter	96	£	21
Centre Island Beacons	338	£	203
Safety Bollard	5,815	£	2,350
Total	140,772	£	196,375

Since 2014 HCC has been systematically replacing street lighting lanterns with new Light Emitting Diode technology combined with a central management system (LED/CMS Project), in the following Phases:

Table 22: LED/CMS Project Summary

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Phase	Description	Appx Number	CapEx					
1*	A Roads	12,600	£ 7.1m					
2	Exceptions (lights on all night, not A Roads) and heritage lighting on A Roads	21,000	£ 7.0m					
3	Outlying settlements and remote footways that are in part night lighting	9,000	£ 3.5m					
4**	Part night lit assets	70,000	£18.5m					
4***	Belisha Beacons	388	£84,000					

All phases of work include survey, design, installation of new LED and CMS

^{*} includes installation of lighting control CMS (central management system) infrastructure

^{**} includes other heritage lighting to be reconditioned or refurbished

^{***} conversion of remaining stock to LED only

To date, circa 45,000 units have been changed (including ad hoc replacements following column knockdowns), reducing carbon emissions by 5231 tonnes p.a.

7.2 Strategy and Lifecycle Planning

7.2.1 Maintenance Strategy

Street lighting maintenance is delivered by the HST contractor Ringway as part of the Cat 5 'Contractor Led' service. The strategy is implemented through the 'safe and operational' approach with regard to the ongoing maintenance and replacement of the existing street lighting and illuminated signs infrastructure. All replacements are installed with LED/CMS technology to ensure they fully integrate with the Council's long term strategy.

The strategy is based on **new technology** installed on **structurally sound** apparatus. This asset management approach is data driven and condition led, resulting in less wastage and making the best use of the existing infrastructure.

Works are also being carried out to develop Capital Bids for 2018/19 with regard to the replacement or renewal (where required) of the remaining street lighting assets not included within the LED/CMS project, these include high mast lighting, subways, illuminated signs, bollards, school crossing lights, and the existing underground private cable network.

7.2.2 Lifecycle Planning

The HMEP suite of tools includes a lifecycle planning toolkit for Ancillary Assets which has been reviewed by the HCC AM Team. Further work is required to complete a fully functional lifecycle plan for lighting assets; this will allow us to provide robust analysis of the works projects to optimise the budget spent.

7.3 Condition Monitoring and Performance

7.3.1 Condition Monitoring

An ongoing programme of non-destructive structural testing is being undertaken on street lighting columns 10 years old or older. Since the commencement of the HST contract, around 90,000 tests have been undertaken, some of which are now into their second 3-year cycle. A 5-year testing strategy is currently being developed.

The structural testing programme is now producing robust information, where only columns identified as life-expired are actually replaced. The remaining units which have passed the structural inspection are factored back into the rolling programme for inspection within a three or six year period. This process has ensured that the life of individual units is maximised.

7.3.2 Street Lighting Performance

Table 23 below sets out the structural testing quantities, along with the estimated number of replacements for the year following the test.

Table 23: Structural Testing Programme

Year	Total Number of Structural Tests	Estimated Number of Column Replacements
2016/17	16,483	495 (2017/18)
2017/18	10,030	301 (2018/19)
2018/19	8,215	247 (2019/20)
2019/20	7,488	225 (2020/21)

In addition to the column replacements as a consequence of the planned structural testing, an additional circa 1,500 units per annum are replaced as a consequence of accident damage, vandalism and visual detection via reactive inspections.

7.4 Budget and Delivery

The overall budget for street lighting capital maintenance 2016/17 was £1.95 million distributed across the various work streams as shown in Table 24.

Table 24: Street Lighting Capital Maintenance

Street Lighting	Delivered 2015/16		Delivered 2016/17		Proposed 2017/18	
Schemes	Number of units	Cost (000)	Number of units	Cost (000)	Number of units	Cost (£000)
Replacement Street Lighting	597	£ 940	1,103	£ 1,336	1,240	£ 1,500
Replacement High Masts	0	0	0	0	0	0
Sign Lighting / De- Illumination	30	£ 21	552	£ 591	600	£ 642
Cable Replacement	5	£ 18	8	£ 19	40	£ 100
Replacement Subway Fittings	4	21	12	£ 5	60	£ 25
Total	636	£ 1,000	1,675	£ 1,951	1,940	£ 2,267

7.5 Key Issues and Improvement Actions

In response to interest shown, the Council has shared its approach and lessons learned regarding the LED/CMS project at a regional (e.g. ADEPT), national (e.g. Highway Electrical Association Conference) and international level (e.g. Portugal and Singapore). The Council's paper 'from PFI to LED' has also been shortlisted for the CIHT Sustainability Award 2017.

With conversion of part night lit assets on Traffic Routes - B & C roads (part of Phase 4 of the LED/CMS project) due to be completed by June 2017, a review of the existing customer fault reporting and the night scouting process is currently being undertaken. There is potential to cease and/or reduce the night scouting of street lighting equipment and also to review the way in which subways are monitored.

The Project Team is looking at further dimming, in conjunction with the road safety team, and police.

The Council is also exploring the potential of using CMS infrastructure for new applications and to consolidate existing systems, viz.

- Dynamic dimming of street lighting based on traffic flow
- Ice detection in the carriageway
- Sensors in gullies to measure silt levels and in traffic cones to give travel information
- Wind speed and air pollution monitors

8. Intelligent Transport Systems

8.1 Inventory and Value

The Intelligent Transport System (ITS) asset is made up of a wide range of specialist electronic equipment across the County, performing a multitude of different functions, as shown in Table 25. Its purpose is to facilitate the efficient movement of vehicles, pedestrians, cyclists and ease congestion around the HCC network.

Table 25: ITS Assets

Asset Type	No of Units	GRC Value (000)
Signal controlled crossings	467	£ 25,320
Signal Controlled Road Junction	197	£ 20,370
Zebra Crossing	198	£ 5,940
Vehicle Activated Signs - (VAS)	142	£ 497
ANPR and CCTV Cameras	234	£ 1,047
Safety and speed camera equipment	219	£ 2,190
Automatic Traffic Counters	418	£ 229
E P Information Point	47	£ 470
School Crossing (flashing amber lights per sign)	157	£ 628
Fixed and Mobile EMS/VMS Signs	80	£ 1,316
Real time passenger info (display & remote comms)	131	£ 655
Real time passenger info (in vehicle)	140	£ 840
Car Park Signs	33	£ 495
Other ITS equipment	25	£ 1,191
Total	2,553	£ 61,188

The ITS assets are currently worth £61 million.

8.2 Strategy and Lifecycle Planning

8.2.1 Maintenance Strategy

The basic strategy for maintaining the highways ITS assets is:

- To discharge HCC's statutory duty under the Highways Act to maintain the public highway in a safe condition, thus ensuring the safe and efficient movement of people and goods in line with the hierarchy; and
- To ensure the expeditious movement of traffic under the Traffic Management Act (TMA) 2004.

ITS maintenance is delivered by the HST contractor Ringway as part of the Cat 5 'Contractor Led' service. The strategy is implemented through the 'safe and operational' approach with regard to the ongoing maintenance and replacement of the existing ITS infrastructure.

Many traffic signals are operating outside of their recommended life cycle (15 years). Existing equipment has become increasingly unreliable and difficult to maintain with problems including leaning poles, poor detection and connection issues and sites vulnerable to water ingress and pest infestation.

Replacing individual traffic signal components can prolong the life of the junction arrangement, but this approach is not always cost effective and does not deliver many additional benefits. Compatibility issues, maintaining outmoded spares and negligible energy savings can ultimately lead to increased maintenance costs without significantly reducing the likelihood of failures.

Renewing whole junction installations provide the means to update all the associated hardware including control equipment, resulting in improved optimised journey times, remote monitoring and operation, reduced maintenance liability and reduced energy consumption.

Works are being carried out based on the current Asset Profile to develop Capital Bids for 2018/19 with regard to the refurbishment or replacement of ITS assets that comprise:

- Traffic signal junction sites on the priority network which are in urgent need of replacement and already exceed the recommended 15 year replacement period
- Mast arms at traffic signal installations (subject to principal inspections to assess the structural condition);
- Sites which exceed the 15 year life expectancy; replacing the remaining sites within the county which use Halogen signal heads with LED signals; and
- Replacing the remote monitoring system connection to the sites (from land based Public Switched Telephone Network to Global System for Mobile communication).

8.2.2 Lifecycle Planning

The HMEP suite of tools includes a lifecycle planning toolkit for Ancillary Assets which has been reviewed by the HCC AM Team. Further work is required to complete a fully functional lifecycle plan for ITS assets, but this is required to provide robust, realistic analysis of the works projects to optimise the budget spent.

On the basis of a 15 year asset life, there are approximately 200 sites (40%) within the county which are fully or partially older than this and a further 220 sites. which will also exceed the expected life cycle within the next five years. As around 20 sites are refurbished per year, this could mean the effects of not having a lifecycle plan could be felt if funding were to be reduced/delayed.

Refurbishment is the preferred option as it allows HCC to maintain the equipment at an age limit which maximises reliability and effectiveness. Sites are selected on the basis of age, current reliability levels and the junction/crossings strategic importance.

8.3 Condition Monitoring and Performance

8.3.1 Condition Monitoring

ITS maintenance is delivered by the HST contractor Ringway as part of the Cat 5 'Contractor Led' service and as such condition monitoring is integrated as part of this service. An ongoing programme of non-destructive structural and electrical testing is being undertaken on ITS assets that require it.

8.3.2 ITS Performance

The performance of ITS equipment is closely related to the Network Management function of the highway network. The safe and reliable operation of signal controlled junctions is vital to effective performance of the highway network. Signal failures at junctions quickly lead to congestion, increased journey times, accidents and environmental impacts.

As related to asset management there is currently no defined performance management system or measures in place.

8.4 Budget and Delivery

The overall budget for ITS capital maintenance 2016/17 was £403k distributed across the two work streams as shown in Table 26.

Table 26: ITS Capital Maintenance Programme

Traffic Management	Delivered 2015/16		Delivered 2016/17		Proposed 2017/18	
Equipment	No. of units	Cost (000)	No. of units	Cost (000)	No. of units	Cost (£000)
Replacement Junction	1	£115	3	£189	5	£263
Replacement Crossing	19	£331	16	£214	17	£375
Replacement CCTV	0	0	0	0	0	0
Replacement ANPR	0	0	0	0	0	0
Replacement VMS	0	0	0	0	0	0
Total	20	£446	19	£403	22	£638

8.5 Key Issues and Improvement Actions

HCC submitted a capital bid to the DfT (circa £1million) in late March 2017 for Highways Maintenance Challenge Fund (2017/18) to replace 12 traffic signal junctions on the primary route network. These sites are essential to the safe and reliable operation of the highway and provide vital resilience to the strategic road network. At the time of writing an announcement from the DfT is awaited.

Development of the Asset Profile including performance management and measures to include for example: fault rate per site per year and associated potential to reduce maintenance costs; savings accrued through the reduction in accidents, delay at a junctions, carbon emissions and energy consumption.

This will enable HCC to develop its asset management approach and robust business cases in the support of optimising budgets for maintenance, improve coordination of network operations (e.g. with Highways England and neighbouring Local Highways Authorities) and optimising journey times.

Modern equipment provides better control of through traffic by vehicle detection and optimisation of signal phases, increasing junction capacity and reducing failures.

Linking control systems provides the ability to remotely monitor and adjust traffic flow through individual junctions and wider areas in real time, for regular peak hours and "one off" situations. Priority can also be provided for buses and emergency vehicles. The physical layout of junctions can also be changed to improve turning movements for vehicles or to provide better facilities for pedestrians a pedestrian phase may also be a required improvement. The future requirements for the ability to freely distribute signal data for public use also need to be considered.

HERTFORDSHIRE COUNTY COUNCIL

HIGHWAYS PANEL

<u>Information Note</u> **2017-18/01**

INFORMATION NOTE - Issued April 2017

ROAD CONDITION RESULTS UPDATE

Author: Chris Allen-Smith Head of Profession, Asset Management & Maintenance

(Tel: 01992 658167)

Executive Member: Terry Douris

1 Purpose of report

1.1 This Information Note summarises the latest national and local road condition results.

2 Road Conditions in England

- 2.1 The Department for Transport (DfT) published Road Conditions in England 2016 at the end of March. This is an annual summary of condition data collected from local authorities and Highways England showing local and national trends.
- 2.2 The release, factsheet and publication tables can be found at the link below: https://www.gov.uk/government/statistics/road-conditions-in-england-2016
- 2.3 Table 1 below summarises the national indicator information for Hertfordshire for A, B&C and Unclassified roads, as well as the national and regional averages.

	Hertfordshire 2015/16	East of England Average 2015/16	England Average 2015/16
A Roads	3%	3%	3%
B & C Roads	6%	7%	6%
Unclassified Roads	15%	20%	17%

Table 1: Road Condition Comparison, 2015/16

- 2.4 In each case, the measure is 'Percentage of the network where maintenance should be considered' so a lower number is better and the measure can broadly be thought of as the percentage of the network in 'poor' condition.
- 2.5 As Table 1 shows, by these national measures, Hertfordshire's A road network is in average condition, both nationally and regionally. Our B&C roads are better than the regional average and, as with the A roads, on the national average. Our unclassified roads are better than average compared to both regional and national numbers.

3 Local Condition Targets

- 3.1 We have a locally-set condition target of keeping our road condition in steady state based on the 2010/11 values.
- 3.2 The Hertfordshire County Council results for 15/16 show U Roads returning to within target and A, B &C Roads remaining within target as Table 2, below, illustrates. This is the first time since the current targets were set in 10/11 that roads of all categories have been at or below their target values.

	Historic Data			Actual	Targ	jets	
	11/12	12/13	13/14	14/15	15/16	15/16	16/17
A Road Condition	6% (5%)	8% (5%)	4% (4%)	4% (4%)	3% (3%)	8%	8%
B&C Road Condition	15% (10%)	17% (9%)	14% (8%)	8% (7%)	6% (6%)	11%	11%
U Road Condition	13% (17%)	11% (18%)	17% (18%)	19% (18%)	15% (17%)	17%	17%

Table 2: HertCC Historic Road Condition Comparison (Numbers in brackets are National Average figures for comparison)

- 3.3 This improvement has been achieved by following our asset management-based maintenance strategy to get the best value from the sustained levels of investment made available over the period.
- 3.4 The maintenance strategy, which was agreed by members following the 2011 scrutiny of the highway maintenance service, focuses on getting the best value for the available money by applying the 'Right Treatment, Right Time' principle as far as possible. This frequently means intervening early with a cheaper, preventative treatment before a road has deteriorated too far rather than simply focusing on fixing the worst roads.

4 Future Updates

- 4.1 We have completed the 2016/17 surveys and are currently processing the results. Final results should be available for presentation to members in the TAMP APR in June.
- 4.2 National statistics are collected by DfT and published once a year, usually in late March so the next national update will be next Spring.

HERTFORDSHIRE COUNTY COUNCIL

CABINET MONDAY 10 JULY 2017 AT 2.00PM

Agenda Item No.

10

FAMILY CENTRE SERVICES COMMISSIONING: STATUTORY CONSULTATION PROCESS

Joint Report of the Director of Children's Services and the Director of Public Health

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Executive Member/s: - Teresa Heritage (Children's Services)

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1. Purpose of report

1.1 To inform Cabinet of the work undertaken to date for the commissioning of the Family Centre Service and seek agreement to the consultations referred to in this report.

2. Summary

- 2.1. The Council is responsible for a range of services for families, children and young people including Children's Centres. Some of these services, like Health Visitors and School Nursing, were formerly provided by the NHS. Many of these services, while working together in many ways, could still be improved through greater integration and alignment of pathways and premises, in line with our ambition outlined below.
- 2.2. The Council will work to see how families can access a wider range of services from every person they see, making it quicker and easier for them while more easily accessing specialist professionals they need to.
- 2.3. To this end, Children Services and Public Health are working together to redesign how the services can look and operate to help make our ambition a reality. This means we will need to re-commission these services, starting our new model from 2018, when current contracts expire.

3. Recommendations

- The Children's Service's Cabinet Panel and the Public Health, Prevention and 3.1. Performance Cabinet Panel considered a report on this item of business at their joint meeting on 28 June 2017. The Panel commented upon the report and recommended that Cabinet agree;
 - the proposed approach of jointly commissioning a new service that offers a coterminous aligned service which is integrated at the point of delivery. The service aims to enable families from pre-birth (and the transition to parenting) through to 19 years (or 25 for young adults with Special Education Needs and Disability (SEND)) to access support from one place as much as possible.
 - that the proposed service will be delivered under one overarching offer: ii. Hertfordshire Family Centre Service. Each individual service within this will preserve an appropriate individual brand (i.e. Public Health Nursing and Family Support Work) for ease of access.
 - iii. the proposed efficiencies and scope of service delivery for Children's Centres increasing the age range from 5 to 11.
 - that the proposed tender be procured under a single contract number via five İ۷. separate lots to ensure there is the opportunity for local Voluntary and Community Sector (VCS) and Small and Medium Enterprises (SME) providers to tender:
 - 1 x Public Health Nursing (countywide) which is the lead responsibility of the Director of Public Health
 - 4 x Family Service Centre Family Support elements (split into geographical guadrants) which is the lead responsibility of the Director of Children's Services
 - that formal public consultations on both Family Service Centres Family Support and Public Health Nursing are launched.
 - that Cabinet note's the Director of Public Health's view that the proposed νi transformation priorities for Public Health Nursing are necessary in order to provide a more responsive and efficient service (including greater use of skill mix).

4. Vision and Ambition

- The Council's vision and ambition is that every Hertfordshire child has the best 4.1. possible start in life to give them the best opportunities throughout their education and working lives and enable them to become resilient adults. The Council want's children and their families to thrive, to achieve the best physical, psychological, emotional, social health and educational outcomes, and to be as independent as possible.
- 4.2. How services work to support children and families achieve this ambition is a priority for the County Council. As part of the ambition it is intended to transform services Agenda Pack 196 of 274

- that the Council are responsible for to make this ambition a reality; and advocate for other services to work with the council on the same journey.
- 4.3. As an early step towards this, officers from the Council worked with a range of service users including children and young people, providers and services across the continuum of need, from universal provision through to specialist and statutory support, and identified the 6 Bees outcome framework for children and young people. The Hertfordshire Bees will help us monitor how we are progressing towards our ambition.



- 4.4. It follows from the ambition and desired outcomes, the more integrated the Council's services, the easier they will be to access and therefore the support offered to children and their families will be improved. The service offer to families should be clear, integrated, easy to access and joined up so that families can get the support they need.
- 4.5. While services for children already work closely together, officers consider that in order to achieve the ambition, improvements need to be made through organising services where families can find them easier to access in one place as much as possible. Officers believe a strategic approach to service configuration is needed to make this happen. This includes co-location, development of joint working and co-working with children and families, developing stronger understanding between and across services of what each service's role and contribution is.
- 4.6. The principle that every person who works with a child or family has a duty to support as much as they are professionally able to and passport onwards for other work would also be implemented.
- 4.7. Officers believe this way of working will improve outcomes for children, give families timely access to advice and support and efficiencies in service provision.
- 4.8. The vision for the new Family Centre Service is:

To deliver a needs led family service from pre-birth to 19 years (25 years for young adults with SEND) which is universally available but responsive across the continuum of need, intervening as soon as problems arise in order to prevent escalation into more costly services which delivers good outcomes for children and young people, as represented by the 6 Bees outcome framework

- 4.9. The benefits to be derived from this work are:
 - A seamless service to families from antenatal (transition to parenting) though to 19 years (25 years for young adults with SEND) through collaboration and alignment between the services.
 - ii. A focus on doing most for those children and families who are at risk of not achieving positive outcomes, building on family strengths and providing help at the earliest point
 - iii. High quality delivery of both the Healthy Child Programme (<u>0-5</u> and <u>5-19</u> years) and the Children's Centre core purpose
 - iv. Reducing demand on high cost safeguarding and specialist services
 - v. Delivering early help services as part of the Families First approach
 - vi. Cost efficiencies whilst delivering core preventative and targeted services
- 4.10. To support this, Public Health and Children's Services have undertaken considerable preparatory work to seek to transform and align these services so that the Council can meet its ambition, as well as its statutory and mandated duties to support families, children and young people, and to address wider issues in the education, health and social care system.
- 4.11. As officers are of the view that the proposals constitute a significant change in the provisions of services through Children's Centres it is necessary under Section 5D of the Childcare Act 2006 to consult on these proposals.
- 4.12. Key changes for consultation are summarised as:
 - bringing Children's Centres, School Nurses and Health Visitors together to make them more joined up to enable families to access a range of integrated services through one overarching offer: Hertfordshire's Family Centre Service
 - proposed transformation priorities for Public Health Nursing service to provide a more responsive and efficient service (including greater use of skill mix)
 - proposed efficiencies and scope of service delivery for Children's Centres

5. Towards Family Centres: Making our ambition a reality

- 5.1. The Council's contracts for the Health Visiting service, the School Nursing service (Public Health Nursing Service) and Children's Centre programme, currently expire on 30 September 2018 and need to be re-procured.
- 5.2. Lead commissioners from Children's Services and Public Health have been exploring opportunities for the services to be more aligned in their delivery to support our ambition to enable every child to have the best possible start in life, giving them the best opportunities throughout their education and working lives.

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5.3. Children's Services and Public Health have undertaken considerable preparatory work to transform and align these services so that the Council can meet its statutory and mandated duties to support babies, children, young people and their families, and to address wider issues in the education, health and social care system.

6. National policy context

- 6.1. National research and longitudinal studies have emphasised the importance and long term benefits of supporting families from pre-birth through childhood and the transition into adulthood. Particular importance is given to early childhood, where the impact of providing effective, high quality provision and support for families is greatest.
- 6.2. The World Alternatives to ViolencE (WAVE) Trust report, (Conception to age 2 the age of opportunity 2014: www.wavetrust.org) sets out the evidence and economic case for investing in high quality services antenatal to the age of two years in order to 'optimise lifelong social, emotional and physical health, and educational and economic achievement'.

 The report also states that 'UK Social Return on Investment studies show returns of between £1.37 and £9.20 for every £1 invested in early years.' (Wave Trust, 2014)
- 6.3. Intervening early to promote health and wellbeing is well documented to improve health (Nice Quality Standard, Early years: promoting health and wellbeing in under 5s, 2016) both during childhood and with benefits going into adulthood and it delivers savings to the public purse. For example overweight and obese children are more likely to become obese adults and have a higher risk of illness, disability and premature death in adulthood. By promoting a healthy diet and lifestyle as early as possible and intervening as soon as problems emerge supports better outcomes. Nationally, the cost to the UK economy of overweight and obesity was estimated at £15.8 billion per year in 2007, including £4.2 billion in costs to the NHS (Public Health England (PHE) Obesity and Health)

7. Hertfordshire's context

- 7.1. As of mid-year 2015, Hertfordshire has a population of 1,166,300 with children and young people accounting for 24.8%. This breaks down as;
 - 77,172 being under 5 years old
 - 289,400 being 0-19 years old

There are on average 14,700 new births every year.

The projected population figures are:

	2015	2019	2024
New births	14,700	15,400	15,800
Under 5's	77,172	79,000	82,200
0-19	289,400	302,800	324,000

- 7.2. Whilst the population of Hertfordshire is increasing it is anticipated that early help and preventative services, including the Family Centre Service, will work to support families as early as possible to prevent escalation and enable children, young people and their families to thrive.
- 7.3. Hertfordshire's Health and Wellbeing Board is ambitious for children and young people in Hertfordshire. It recognises that, in order to achieve improved outcomes, there is a need to:
 - consider the holistic support needs of the child or young person
 - design and develop services around children and young people
 - make the best use of the resources across partners and avoid duplication
- 7.4. The services delivered through the current Children's Centre Programme, Health Visiting and School Nursing services contribute to improving the social determinants of health as well as preventing the demand for higher level services later in a child's life course, and enabling families to become effective, resilient and lead healthy lifestyles from an early age and throughout their lives.

8. Current service contracts and transformation priorities

- 8.1. Both Public Health and Children's Services have current service contexts comprising policy, regulations/mandates, service frameworks and contracts. A number of steps will need to be taken to transform from current service contexts to achieve the ambition outlined above. The following sections of the report outline the contract, service context, governance and programme management aspects of achieving our ambition.
- 8.2. Public Health Nursing: current scope
 - i. Public Health Nursing is the commissioning responsibility of the Director of Public Health. School Nursing services and Health Visiting services are currently provided by Hertfordshire Community NHS Trust (HCT). The responsibility for commissioning School Nursing and Health Visiting transferred from the NHS to the County Council via Public Health in 2013 and 2015 respectively.
 - ii. The contracts for both services were due to expire in March 2016 but were extended and changed to reflect changes to the service to achieve the necessary reduction in contract value. As a result, new ways of working have been developed across both services to maintain a quality service and work within in a smaller financial envelope. For example, School Nursing has introduced 'Chat Health', a confidential text service which enables young people (11-19) to seek

one to one advice and support from the school nursing service on a range of issues which matter to them, for example staying healthy, self-esteem, relationships and sexual health. To date there have been approx. 500 contacts through Chat Health in Hertfordshire.

8.3. Children's Centre programme: current scope

- The Hertfordshire children's centre programme is recognised nationally as high performing and it is recognised it has contributed to reducing the demand on higher cost safeguarding and specialist services both within Children's Services and across the public sector.
- ii. The current programme supports families from the antenatal period through to 5 years old on a range of interventions from universal through to targeted and intensive support. It delivers the core purpose of reducing inequalities between families in greatest need and their peers in:
 - Child development and school readiness
 - Parenting aspirations and parenting skills
 - Child and family health and life chances
- In the 5 years since the programme was fully designated, children's centres iii. have become valued and respected by parents, carers and professionals because of the flexible and responsive way the skilled and experienced staff address local and individual early childhood needs. Currently, 91% of families with a child under 5 are registered to a children's centre and as of April 2017
 - 68% under 1s reached at any centre
 - 49.4% under 5s reached at any centre
- İ۷. In March 2017 the service was awarded nationally recognised Unicef UK Baby Friendly accreditation, who also recognised an outstanding service in the community supporting mothers with feeding their babies however they choose to do so.
- Children's Centre Commissioning is the responsibility of the Director of Children's Services. There are currently 29 groups of Children's Centres contracted to 17 lead agency providers. 17 groups are contracted to Voluntary and Community Sector and 12 to schools/colleges.

9. Progress to date on transformation

9.1. Significant progress has been made over the last year to achieve the ambition outlined above. An Early Childhood Board has been established to provide governance for the overall procurement consisting of senior representatives from Public Health, Children's Services and Clinical Commissioning Groups. It should be noted that the Clinical Commissioning Groups while represented on the board are not commissioning parties to the current programme. They may wish to commission services to work through the Family Service Centres in future. This Board oversees an internal procurement group (previously a multi-agency steering group). A detailed project plan and procurement timescale/process are monitored fortnightly. Members are asked to note paragraph 11.1 which sets out the respective governance mechanisms for this intended programme. Agenda Pack 201 of 274

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- 9.2. Extensive pre-procurement work has also been undertaken over the last year, including:
 - A pre procurement market engagement event including Voluntary and Community Sector (VCS) and Small and Medium Enterprises (SME);
 - ii. The establishment of a number of work streams to review current processes and possible future delivery pathways, making recommendations and flagging risks to inform development of the new approach and service specification. This included safeguarding, premises, IT, integrated working and engagement;
 - iii. Piloting new ways of working in small areas of Hertfordshire, to inform the new approach;
 - iv. Financial modelling for Public Health Nursing and Children's Centres to assess the impact of efficiencies;
 - v. Research and information gathering from other local authorities and national sector organisations;
 - vi. Workshops held with service staff to explore service models;
 - vii. An engagement plan and communications plan agreed and on target

10. Proposed approach to transformation

- 10.1. Children's Services and Public Health are working together to commission new services with revised specifications. Opportunities for the services to be more aligned and to work closely together are being explored in order for the Council to make efficiencies whilst delivering its statutory duties to support babies, children, young people and their families, and so that the services address wider preventative issues in the education, health and social care system.
- 10.2. It is the intention that the Hertfordshire Family Centre Service will be aligned at the point of delivery and incorporate a whole system approach, enabling strong links, pathways and partnerships with schools, early years settings, early help services (Families First), social care and other health services so that services are delivered in an integrated manner with professionals working as a team to support babies, children, young people and their families to thrive.
- 10.3. The project aligns with:
 - The Hertfordshire Health and Wellbeing Strategy 2017-2020
 - Hertfordshire County Council's Corporate Plan
 - Children's Services Strategic Plan 2015 2018:



- The Hertfordshire Public Health Strategy 2017-2021
- East and North Herts CCG Operational Commissioning Plan 2014-16
- Herts Valley CCG Annual Operational Plan 2016/17

There are interdependencies with:

Maternal Health review

- CAMHS Transformation Plan
- <u>0-25 Special educational needs and disability (SEND) Strategy</u>
- Peri-natal mental health project
- Families First approach
- Family Safeguarding Teams

11. Project management and governance

- 11.1. The governance of the project is through Early Childhood Board which is co-chaired by the Director of Public Health, Jim McManus and the Director of Children's Services, Jenny Coles with Senior Managers from both departments and attended by the two Hertfordshire Clinical Commissioning Groups. The departmental Management Boards retain their budget and decision-making responsibilities and a Memorandum of Understanding setting out how this cross-departmental collaboration will continue into the procurement and contract monitoring and management phases has been developed.
- 11.2. The headline project timetable is below as table 1.

Table 1: Headline timetable

Activity	Timescale	Progress
Research, development and testing	Jan-Dec 2016	Completed
Pre procurement market engagement	Dec 2016	Completed
Stakeholder engagement	Jan – March 2017	Completed
Development of draft specification	April – May 2017	Completed
Tender preparation	May – September 2017	In preparation
*Statutory consultation	July – Sept 2017	To go to July Cabinet
*Delayed due to General Election PERF)	
Cabinet's decision on model	Sept 2017	
Tender process goes live	Oct – Dec 2017	
Tenders evaluated	Jan – Feb 2018	
Contract(s) awarded	March 2018	
Mobilisation period	April – Sept 2018	
New service commences	1st Oct 2018	

12. Public Health Nursing and Children Centre Staff and service user engagement

- 12.1. Officers engaged staff, parents, stakeholders and service users early on in this process. Events with staff were held in February 2017 alongside a stakeholder and service user online survey to gather views on what the revised specification should deliver.
- 12.2. Key messages from 300 staff engaged are summarised below:
 - Continue providing a universal service, with a focus on early help to support vulnerable families.

- Have an offer of services which is consistent across the county.
- Develop a joint vision for all staff.
- Deliver the five mandated health visiting contacts.
- Provide infant feeding support.
- Promote healthy lifestyles.
- Increase the provision of antenatal care and support.
- Deliver child and family activity sessions.
- Provide more mental health support across the age range.
- Offer information, advice, and outreach support to all families.
- Support families whose children have SEND.
- Use consistent assessment tools and systems.
- Provide face-to-face support.
- Provide a more visible service in schools.
- · Offer evening and weekend services.
- Improve and develop partnership working.
- Share data about families to ensure a more seamless service.
- Establish a 'hub' in the community for families.
- Offer a locally accessible service.
- Rationalise existing boundaries of services.
- 12.3. Over 1500 people completed the online survey. 73% of the respondents to the online survey were parents, carers or young people and their feedback is summarised:

Health visitors provide a great service, and it's important for service users to:

- Have face-to-face contact with a health visitor, and attend efficient baby clinics
- Receive support with feeding your baby and low mood
- See your health visitor for an antenatal visit, new birth visit, 6-8 week visit, 10-12 month check, and 2-2½ year check
- Have more staff and evening/weekend services
- See health visitors and children's centres working together

Children's centres are a vital resource, and it's important for service users to:

- Attend activity sessions and meet other people socially
- To have a local children's centre
- Get support and advice
- Attend parenting courses
- Have more evening/weekend sessions
- Receive outreach support
- To see other professionals at the centre e.g. health visitors and midwives

School nurses are valuable, and it's important for service users to:

- Get the **right support** for your child's needs
- Have a service that's easier to get in contact with
- Understand what the service can offer
- Receive information and support on healthy lifestyles
- 12.4. Comments already received from these engagement processes will inform the specification development.

13. Procurement strategy

- 13.1. The Strategic Procurement Group (SPG) has supported the lead commissioners to develop the procurement strategy. SPG is the team within the Council that provides the strategic procurement function, providing advice, guidance and commercial challenge to procurement activities across the Council. It is the recommendation to offer the tender as multiple contracts under a single contract number via Lots. This ensures there is the opportunity for local voluntary and community sector (VCS) and small and medium enterprises (SME) providers and encourages tenders from:
 - single organisations;
 - lead contractor: sub-contractor partnerships; and
 - consortia.
- 13.2. It is proposed that there be a maximum of 5 separate lots, with 5 contracts and a maximum of 5 lead providers/consortium/single organisations. The lots will be set as:
 - 1 x Public Health Nursing (countywide)
 - 4 x Family Centre Family Support Service (split into quadrants)

14. Service specifications

14.1. The feedback and learning from the engagement work and from the pre-procurement work has informed the development of the Family Centre Service specifications for the core offers to replace the current Health Visiting and School Nursing services and the Children's Centre programme specifications. In addition to the core service, the specifications will ensure the statutory duties and mandations are delivered and will include a requirement to develop skill mix across the workforces to ensure collaborative and aligned service delivery. In outline, the overarching Family Centre service specification comprises:

14.2 The Public Health Nursing Specification

- 14.2.1 This will encompass the 5 universal mandated reviews and core functions (both universal and targeted) currently delivered by the health visiting service (Public Health Regulations 2013).
- 14.2.2 Public Health Nurses deliver the Healthy Child Programme for 0-5 years (health visitors) and 5-19 years (school nursing). The programme describes a universal progressive service for children, young people and their families to improve health in the early years and throughout the school years. Early intervention and prevention are at the heart of the Healthy Child Programme.

Healthy Child Programme - pregnancy and the first 5 years of life

<u>Healthy Child Programme – 5-19 years old</u>

The specification will be outcome focussed and will include the following outcomes:

- Children and young people are healthy;
- Children and young people meet key health developmental milestones;
- Children and young people have a healthy weight;
- Children and young people have good emotional and mental health;
- Children and young people have good physical health (including dental health);
- Children and young people and their families lead a healthy lifestyle;
- Children and young people are safe; and
- Mothers and mothers to be have good mental health.

14.3 The Family Support Service specification

- 14.3.1 The current children's centre programme works to prevent escalation and reduce demand for safeguarding and specialist services, and to narrow the attainment gap. In order to support the wider system and provide a more rounded service for families and professionals it is proposed that the age range of the family support element of the service be extended from its current offer of pre-birth to 5 years to a wider range of pre-birth to the end of the primary school phase (0-11).
- 14.3.2 The specification will be outcomes focused and will include the following areas:
 - Reducing inequalities at Early Years Foundation Stage
 - Supporting healthy lives and healthy relationships
 - Raising family aspirations
 - Providing support for families whose children have SEND;
 - Identifying needs early
 - Providing information advice and guidance
 - Delivering early help interventions.

The full specifications will be part of the tender documentation.

15. Local delivery

- 15.1. The Family Centre Service will remain as a county-wide provision, delivered as flexibly and as locally as possible around the needs of families. To support this, officers have been developing a quadrant model for service delivery, comprising of hub, satellite and administration activity:
 - Hub bases will be able to deliver multi-disciplinary activity and services to families
 - Satellite activity will comprise a range of outreach and community based activities and will deliver services according to community need
 - There will need to be some administration bases for staff within the new service

15.2. Promoting localised delivery, existing children's centre bases will continue to be used as appropriate, as will the range of public and community resources utilised by public health nursing and children's centre staff to deliver services. The new Family Centre Service will offer a wide range of services and therefore current children's centre premises will be de-designated as children's centres. This will allow an innovative, responsive and creative model of integrated services to be provided in the community whilst retaining the use of local resources familiar to families.

16. Consultations

- 16.1. Following the engagement exercises described in section 12, in line with statutory requirements, it is proposed that formal consultations are undertaken.
- 16.2. It is necessary under Section 5D of the Childcare Act 2006 to consult on these proposals. The proposals for the Public Health Nursing Service also require formal consultation. There will be a consultation on each of these aspects of the service.
- 16.3. The formal consultation period for both of these aspects of the new aligned service is due to take place between July and September 2017. This formal consultation will inform families, providers and professionals of the intentions for the Family Centre Service and will be the opportunity for them to respond to those intentions. The Public Health and Family Services Commissioning team will be proactively promoting the consultations throughout the summer, with the intention of going out to speak with families and young people to gain their views on the proposals for the future model.

16.4. Consultation methods

In order to encourage wide participation in the consultation there will be a number of different methods utilised (see list below).

- 1. Consultation survey This will be undertaken in the following parts:
 - i. Digital questionnaire advertised to all stakeholders and identified groups.
 - ii. Digital questionnaire advertised to contacts at a series of local events where families are
 - iii. E-communication (i.e. newsletters etc.).
 - iv. Hard copies of questionnaires to be made available via local authority colleagues and partners as requested
 - v. Questionnaires to be promoted widely amongst all stakeholder groups electronically and publically available from Council website, Well-baby Clinics and Children's Centres.
- 2. Development and delivery of local presentations for stakeholders such as CCGs, GP's, district/parish/town councils, VCS, Head teachers, VCS etc.
- 3. Opportunity for young people, stakeholders and parents to meet in focus groups.
- 16.5. The consultation period is to run for 10 weeks from opening on 17 July 2017. Once the period is concluded results will be written up and used to inform the development of specifications for each of the aspects of the Family Centre Service.

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The results of the consultations will be available publically on the consultation page of the Council's website and to all stakeholders who have requested a copy of the results.

16.6. A consultation summary document has been produced to provide context to the consultation and an 'easy read' version has also been produced and will be available and advertised on the Council's website.

17. Financial implications

- 17.1. Children's Services children's centre programme
 Children's Services currently provide £10,843,657 of funding for the children's
 centre contracts. The Director of Public Health through the ring-fenced Public
 Health Grant commissions a further £1M to the contracts to deliver Public Health
 objectives. Continuation of the Public Health contribution to the children's centre
 programme post 2018 will depend on public health prioritisation due to potential loss
 of the ring fenced grant and is therefore not guaranteed.
- 17.2 Children's Services is undertaking a financial modelling exercise to determine the deliverables of the new Family Service Support Work service. The new service will seek to deliver financial efficiencies of 20% of the current budget. It is anticipated that this saving will not be realised in 2018/19 because of the mobilisation and transition costs that will be incurred.
- 17.3 The new service model for Family Service Support work will deliver the following priorities and aims as well as financial efficiencies:

1. Accessibility

- a) A countywide provision, delivered as flexibly and locally as possible ensuring children, young people and their families are at the heart of service delivery
- b) A flexible workforce that fits around the needs of families and ensures effective and efficient pathways to maximise the best outcomes and demonstrate a whole system approach

2. Impact

- a) Universal access to services with support for the most vulnerable, reducing long-term adverse outcomes for families through early identification of needs & early years development
- b) Evidence based, best value interventions, that deliver sustainable improved outcomes, are offered to support families who require additional support to enable their children to thrive

3. Information Sharing

- a) Information is shared appropriately and timely with professionals to ensure the right support is delivered
- b) Communication with families is appropriate, timely and in a format that is understood.

4. Digitalisation

a) To ensure the best use of digitalisation and web-based services for both professionals and families

17.4 Public Health Nursing service

The current funding for the Public Health Nursing service is £19.3 million. Public Health has undertaken detailed financial modelling to ensure that it continues to commission a safe and sustainable public health nursing service that delivers the universal mandated reviews and core functions for health visiting and school nursing.

- 17.5 The contract will include the requirement to develop the skills mix across the public health nursing workforce and the Family Centre workforce in order to realise efficiencies and develop integrated working. It is recognised that any efficiencies from the new service will need to be achieved over a number of years in order to ensure safety and universal coverage during the transition.
- 17.6 In addition, Public Health has developed 6 transformation priorities for Public Health Nursing. These will be included within the consultation and are summarised below:
 - 1. **Organisational development** to deliver a seamless partnership approach that reduces duplication.
 - 2. **Skill mix development** increase efficiency and improve consistency and quality, robust accountability and supervision.
 - IT and digital platforms consistent and more effective use of IT and digital platforms, e.g. use of E red book to provide a more responsive and accessible service.
 - 4. **Preventative and early intervention focus** (e.g. proactive approach to support healthy development (mental and physical health)
 - 5. **Intelligence for action** an evidence based service with consistent use of Health Needs Assessments and effective use of routine data to inform priorities, delivery of a responsive and consistent service to meet families' needs.
 - 6. **Communication within the system** ensuring that the roles within the Family Centre Service workforce are explicitly defined, with systems in place to ensure that families are directed to the appropriate level of support. Robust system wide plan to ensure this is shared with partners and that pathways reflect this.

18. Equalities Implications

- 18.1. The Family Centre service will continue to ensure equalities and diversity are a fundamental part of delivery and working with local communities to respond to local needs.
- 18.2. When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equality implications of the decision that they are making.
- 18.3. Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EQiA) produced by officers.
- 18.4. The Equality Act 2010 requires the County Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 18.5. The Equalities Impact Assessment is attached at Appendix 1.

Background Information

Health and Wellbeing Strategy 2017-2020

Hertfordshire County Council's Corporate Plan

Public Health Strategy 2017-2021

East and North Herts CCG Operational Commissioning Plan 2014-16

Herts Valley CCG Annual Operational Plan 2016/17

Maternal Health review

CAMHS Transformation Plan

0-25 Special educational needs and disability (SEND) Strategy

Peri-natal mental health project

Families First approach

Family Safeguarding Teams

Children's Services Strategic Plan 2015 – 2018:



Children's Services Strategic Plan 2015 -

STEP 1: Responsibility and involvement

Title of proposal/ project/strategy/	Family Centre Services	Head of Service or Business	Sue Beck, Public Health
procurement/policy	commissioning	Manager	Sally Orr, Children's Services
Names of those involved in completing the EqIA:	Mel Donnelly Sue Beck Jane Banbury Caroline Swindells Sally Orr	Lead officer contact details:	Jim McManus, Director of Public Health Jenny Coles, Director of Children's Services
Date completed:	30 May 2017	Review date:	15 September 2017

STEP 2: Objectives of proposal and scope of assessment – what do you want to achieve?

Objectives
The overarching objective of this programme of work is to procure a Family Centre Service comprising of high quality public health nursing services and children's centres services to improve outcomes for children, young people and their families across Hertfordshire.
 The programme objectives are to; focus on outcomes for children and families re-evaluate and agree what the core offer will be for Health Visitors, Children's Centres and School Nurses work towards creating better alignment of children centres, health visitors and school nursing to ensure a more cohesive approach to delivering services create an opportunity to integrate approaches to prevention and early help identify new ways of working establish a whole system approach to planning and commissioning, re-engineering existing business processes where appropriate reduce silo-working, duplication, and make best use of resources available identify efficiency savings and obtain best value for money create clear accountability for any new commissioning arrangements to meet the Public Health Outcomes Framework to deliver the Health Visiting mandated contacts to deliver the children centre core purpose to support the Families First programme for early help This document therefore provides an Equality Impacts Assessment (EQIA) on the commissioning of a Family Centre Service.
The Equality Act 2010 requires a public authority to have due



regard to the nine protected characteristic groups in its decision making and whether there is a disproportionate impact on such groups.

We anticipate mitigation of this impact through developing greater workforce skill mix, reduction in duplication, better use of the resources available leading to more aligned services and integrated point at delivery.

Background

The Childcare Act 2006 places Hertfordshire County Council under a duty, so far as reasonably practical, to provide sufficient children's centres to meet local need. A children's centre is defined as a place or group of places where, collectively, the early childhood services are provided alongside activities for young children. The early childhood services are:

- Early years provision (early education and childcare)
- Children's social care
- · Health services for children
- Assistance for employment and training opportunities for parents or prospective parents
- Provision of Information and assistance for parents

The Children Act 2006 places the following duties on local authorities;

Section 1: To improve the well-being of young children in their area and reduce inequalities between them

Section 3: To make arrangements to secure that early childhood services in their area are provided in an integrated manner in order to facilitate access and maximise the benefits of those services to young children and their parents.

Section 4: Duty on commissioners of local health services and Jobcentre Plus (as 'relevant partners') to work together with local authorities in their arrangements for improving the well-being of young children and securing integrated early childhood services

Section 5A: An obligation on local authorities to make the necessary arrangements so that there are sufficient children's centres, so far as reasonably practicable, to meet local need.

Section 5D: To ensure there is consultation before any significant changes are made to children's centre provision in their area

Section 5E: An obligation on local authorities, local commissioners of health services and Jobcentre Plus to consider whether the early childhood services they provide should be provided through children's centres in the area



Healthy Child Programme 0-19 years

The 0 – 19 Healthy Child Programme (HCP) is the Department of Health universal programme for improving the health and wellbeing of children and young people. The programme is divided into two parts 0-5 years and 5-19 years. The programme is commissioned by local authorities with some elements being mandatory. The programme is mainly delivered through public health nursing services (health visitors and school nurses) working in partnership with other services/agencies Health Visiting Service is a universal service i.e. it is offered to all families with children aged pre-birth to 5 years. There is additional targeted work with families with specific needs.

There are six high impact areas where health visitors make a significant contribution in terms of health and wellbeing and improving outcomes for children, families and communities:

- · Transition to parenthood and the early weeks
- Maternal mental health (perinatal depression)
- · Breastfeeding (initiation and duration)
- · Healthy weight, healthy nutrition and physical activity
- Managing minor illness and reducing hospital attendance and admission
- Health, wellbeing and development of the child age $2 2^{1/2}$ year old and support to be 'ready for school'.

There are five mandated contacts for families with new babies that form part of the Healthy Child Programme (HCP) – an antenatal health promoting contact; a new baby review; an assessment of the baby at 6-8 weeks old; an assessment at 1 year old and an assessment when the child is 2- 2 ½ years old.

The School Nursing service will work with other partner agencies who contribute to the HCP across a range of settings using the Healthy Child Programme as a progressive universal programme, i.e. it is a universal service offered to all with additional preventive services for those with specific needs and risks that have been identified and are recognised as having a potential impact on future health and well-being.

The School Nursing service delivers the Healthy Child Programme for those in mainstream schools aged 5 - 19 years. The universal prevention and early intervention programme for children and young people is designed to enhance a child's or young person's life chances and is a continuum of the programme that began in pregnancy; "The Healthy Child Programme - Pregnancy and the first five years of life".

The school nursing service is a county wide service and provides a service for all maintained schools and academies. There is a school nurse team for each school, and school nursing is a visible and flexible service. The service will continue to work with individuals, families and communities to promote the health of



children and young people within Hertfordshire. Thus the School Nursing Service will work in partnership with children, young people and their families in an integrated way across general practice, community health services, schools, youth services and third sector providers that support the delivery of the Healthy Child Programme.

All 3 services prioritise safeguarding of children and young people.

Outcomes

The key outcomes to be derived from this programme of work are set out below:

- Sustainable and effective Family Centre Services i.e. Health Visitor, School Nursing and Children's Centre Services
- 2. Collaborative commissioning approaches and alignment of Health Visitors and Children's Centres specifications
- 3. Delivery of these services within a reduced financial envelopes
- Achievement of the County Council's statutory responsibilities and ambitions for Children and Young People (responsibilities of both Director of Public Health and Director of Children's Services)
- Achievement of the Hertfordshire 6 Bs high level outcomes across Family Centre Services to ensure services are focused on delivering those outcomes for children and young people, known as the 6 Bees
- 6. To ensure a consistent quality of service for all children in Hertfordshire

There is a commitment amongst commissioners from both the Public Health and Children Services within the County Council to work together to transform and align services for children and young people where this delivers better outcomes for children, young people and their families.

The Early Childhood Board will be responsible for overseeing the procurement of an aligned family centre service. The Board meets regularly to review progress and to ensure that timescales are met.

A new contract will be in place for October 2018 for a 6 year period with the option to extend the contract by 2 years.

Stakeholders:

Who will be affected: the public, partners, staff, service users, local Member etc Stakeholder groups have been identified as;

 Families/carers with children and young people from pre-birth up to the age of 19 years (25 yrs for young people with SEND)



- · Maternity services
- Families First workforce
- Health Watch
- Maintained Schools and Academies
- Local Schools Partnerships
- Carers groups
- · Parents groups
- Schools
- Acute trusts
- Children's Social Care teams
- Early education and childcare providers
- Citizens Advice Bureau
- Food banks
- GPs
- Community NHS Trusts
- Voluntary and Community Sector groups
- Clinical Commissioning Groups
- District/Borough Councils
- Elected members
- Staff groups (children's centres, school nurses and health visitors)
- Small and medium enterprises

STEP 3: Available data and monitoring information

Relevant equality	What the data tell us about equalities
information	
For example: Community profiles /	



service user demographics, data and monitoring information (local and national), similar or previous EqIAs, complaints, audits or inspections, local knowledge and consultations.

Health Related Behaviour Questionnaire / Joint Strategic Needs Assessment

https://www.hertshealthevide nce.org/data/catalogue/topicmcyp/ The Health Related Behaviour Questionnaire is a survey that is carried out in Hertfordshire on a bi-annual basis. In the most recent 2016 survey a total of 8531 pupils from 65 primary schools and 22 secondary schools took part across Herts. In primary schools the age group surveyed was 9-11 years and in secondary schools the age group surveyed was 12-15 year olds.

2% of primary school pupils who were surveyed and 9% of secondary school pupils said that they had nothing to drink or eat for breakfast on the day of the survey.

33% of primary school pupils and 23% of secondary school pupils had eaten the recommended portions of 5 fruit and vegetables per day. There is a decline in physical activity levels from primary to secondary school. Together with the childhood obesity and poor childhood dental health there is a case for more advice and support in healthy eating and healthy weight.

68% primary school pupils reported they would like their parents to talk to them about drugs. Parents may need support to do this.

84% of boys and 90% of girls in primary school wanted their parents to talk to them about puberty. Again, parents may need support in doing this.

Around 27% of Hertfordshire secondary pupils in the survey know where to get free condoms compared to 50% of pupils in the wider sample analysed by the School and Education Unit in Exeter.

Health Challenges for Herts

http://atlas.hertslis.org/IAS/Custom/Resources/HealthChallengesPDF.pdf

Overall Hertfordshire has a lower prevalence rate of childhood obesity than England.

However, higher levels of obesity are found in Stevenage, Watford and Broxbourne and lower rates in East Hertfordshire, North Hertfordshire and St. Albans.

There is a correlation between childhood deprivation and obesity. Therefore any changes to the level of support are more likely to affect those in areas of deprivation where they are more heavily reliant on support.



Needs Assessment of Teenage Pregnancy

http://atlas.hertslis.org/IAS/Custom/Resources/TeenagePregnancyDetailedPDF.pdf

- The rate of teenage pregnancy (under 18 conceptions) in Hertfordshire is significantly lower than the rate in England and in 2015 was at its lowest level since 1998.
- The most recent data which is from 2015 there were 315 conceptions to under 18 year olds in Hertfordshire, a rate of 15.3 per 1,000 females aged 15-17. This is a decrease of 14% from 2014 (17.7 per 1,000, 369 conceptions) and an overall decrease of 52% since 1998.
- The under 16 conception rate decreased by 29% between 2015 and 2014 to 2.7 per 1,000 females aged 13-15 (53 conceptions) compared to 3.8 per 1,000 (78 conceptions) in 2014 and is at its lowest rate since 2009.
- In 2015 the proportion of Hertfordshire's under 18 conceptions leading to abortions fell to 57%, compared to 63% the previous year and is the lowest since 2008, although it is still significantly higher than the national average (51% in 2015).
- The proportion of Hertfordshire's under 16 conceptions leading to abortions fell to 60% in 2015, compared to 73% the previous year and is the lowest since 2009, and is now similar to England (60% in 2015) whereas previously it was higher.
- In 2015, district level data showed that Stevenage had the highest rates of teenage conception.

Child Health Profile 2017

The health profile showed that the health of children and young people in Hertfordshire is generally better than in the East of England and the national average.

Children's Centre profiles http://www.hertslis.org/homef eat/ccprofiles/

In Hertfordshire there are 77,711 children aged 0-4 years. 90.4% of these children are currently registered with a children's centre and of these 43.7% of children and their families have accessed children's centre services in the past twelve months

Children's centres offer services to all children aged 0-4 years and their families. Centres are expected to target resources to those children and families who fall into the following categories where a need for support is identified:

- Lone parents, teenage mothers and pregnant teenagers
- Children from low income backgrounds
- Children living with domestic abuse, adult mental



Equality Impact Assessment (EqIA) Final June 2017 health issues and substance misuse Children "in need" or with a child protection plan Children of offenders and/or those in custody Fathers (particularly those with an identified need e.g. teenage fathers) Those with protected characteristics as defined by the Equality Act 2010 Adopted children and adopter families Children who are in the care of the local authority (looked after children) Children who are being cared for by a member of their extended family Families identified by the local authority as "troubled families" who have children under five Transient families such as asylum seekers, armed forces personnel etc. Any other vulnerable groups Children's Centre user The annual children's centre user satisfaction survey in satisfaction survey 2016 October 2016 showed that 98% of respondents were satisfied/very satisfied with the services at their local children's centre, and 98% would recommend their children's centre to other parents/carers.

STEP 4: Impact Assessment – Service Users, communities and partners (where relevant)

Protected characteristic	Potential for differential impact (positive or negative)	What reasonable mitigations can you propose?
Age	Currently, Children's Centres offer services to families with children aged 0-5 years. The new Family Support element of the Family Centre Services will offer services to families from pre-birth to the end of primary school (usually 11 years). Health Visitors will continue to provide a universal offer to families with children aged 0-5 years who live in the county. School nurse service will	It is not currently envisaged that any mitigations are required but the situation will continue to be monitored.
	School hurse service Will	



Equality Impact Assessment (EqIA) Final June 2017		
Protected	Potential for differential	What reasonable mitigations
characteristic	impact (positive or negative) continue to offer a service to	can you propose?
	children and young people aged 5-19) who attend mainstream schools in the county.	
Disability Including Learning Disability	Children with disabilities are at specific and increased risk of needing safeguarding services	There will continue to be close working with Children's social care as needed and other NHS services
	Health Visitors will continue to offer support to families with children with disabilities.	Staff will attend appropriate training.
	The School Nurse service for special schools is commissioned by the Herts Valley CCG and East & North Hertfordshire Clinical commissioning and is therefore not part of this procurement.	
	Children with disabilities and special needs in mainstream schools will continue to be able to access the School Nurse Service	All buildings that are provided by the service will be Disability Discrimination Act (DDA) compliant.
	Children and/or parents with disabilities and special needs, are a target user group for children's centres and will continue to access services as they do at present.	
Race	BME children including Gypsy and Traveller Children, whose school attendance is affected.	Where it is appropriate Health Visitors will offer outreach to Gypsy and Traveller families including immunisations where traditionally there has been low take up.
		These children will be considered as part of the school profile assessment that school nurses will carry out for each school.
	Children and families who do not have English as a first language and who may not understand the information being relayed to them.	An interpreting and translation service is available for schools and children's centres to access on a traded basis. The health provider for health visiting and school nursing should also have access to interpreting services.
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	Page 9 of 20	Hertfordshire



Equality Impact Assessment (EqIA) Final June 2017		
Protected characteristic	Potential for differential impact (positive or negative)	What reasonable mitigations can you propose?
	Children/young people from some cultures are more at risk of Female Genital Mutilation, than others.	School Nurses, Children's Centres and Health Visitors must be trained to be aware of these practises and the legal mitigation that is in place to support anyone adversely affected by cultural practises.
	Access to children's centre services on the basis of race would be unlikely to change as a result of the proposed changes.	Children's centres actively collaborate with local partners across the reach area to develop local knowledge of the families within the area. Many children's centres provide groups and services for particular minority ethnic groups. Parents from minority ethnic groups are encouraged to offer peer support to other parents.
Gender reassignment	Data is limited however we are aware of the emotional impact of this. No disproportionate impact is anticipated.	None have been identified but will be kept under review
Pregnancy and maternity	Pregnant women, women and their families with young children under the age of five will continue to be a target group for the family centre, health visitors and family support workers.	A reduction in funding will require greater effort to ensure resources are targeted at those most in need. This should mean that those with protected characteristics are among the targeted services users experiencing earlier identification, and response to need. Required savings may impact upon the service's ability to deliver the full healthy child programme. In particular those who are not amongst the targeted service users may experience reduced services. We will work with the service provider to look at options to mitigate risks to vulnerable families and those with protected characteristics.
		Safeguarding will continue to remain a priority. We will develop more integrated approaches across Early Years settings to deliver services differently through the current
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Protected	Potential for differential	What reasonable mitigations	
characteristic	impact (positive or negative)	can you propose?	
		Health Visitor and Children's Centres to reduce impact of these	
		changes to the service.	
		changes to the service.	
	Perinatal mental health risk -	Both Health Visitors and GPs	
	Between 10% and 20% of	undertake a mental health	
	women are affected by mental	assessment 6-8 weeks after the	
	health problems at some point during pregnancy or the first year	birth. Health Visitors provide evidence based support for those	
	after childbirth. Evidence	identified to have a mental health	
	highlights low identification of	problem.	
	need.	•	
		There is a risk of mental health	
		problems developing after this	
		period so the specification would need to ensure this was routinely	
		monitored both by Health Visitors	
		during other contacts with the	
		family. County Council staff will	
		also have sufficient training to identify parents who may be at risk.	
		dentity parents who may be at risk.	
	Teenage pregnancy may result		
	in young people missing school.	Support and signposting will be	
		available through the school nurse.	
	Teenage parents may need more	An enhanced offer by Health	
	support.	Visitors will be in place for young	
		parents who need additional	
		support and Children Centres will	
		also prioritise this group through offering additional contacts by staff.	
Religion or belief	We are aware that there may be	onering additional contacts by stan.	
Trongion of Sonoi	conflicting views with some	Parents can choose to opt out of	
	religions around health issues.	any service that a school nurse	
		service offers e.g. National Child	
		Measurement Programme.	
		Parents will be kept informed of	
		activities that may be culturally	
		sensitive.	
		Sandoos' staff tagms now attention	
	Parents may be unable to access	Services' staff teams pay attention to the religious calendars of faith	
	services due to commitments of	groups in their locality and make	
	their faith.	appropriate adjustments e.g.	
		recognising periods of fasting.	
		Premises used for service delivery	
		will be accessible to those with	
		differing faiths.	
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E	Equality Impact Assessment (EqIA) Final June 2017	
Protected	Potential for differential	What reasona
characteristic	impact (positive or negative)	can you prop

Sex

impact (positive or negative) Data is limited however we are

aware that there may be gender differences.

More users of children's centres are women and more lone parents are women. The way in which services are marketed may contribute to a lack of male awareness because the main channels for referral are from GPs, Midwives and Health Visitors. Males may perceive the children's centre to be for mothers only and be unwilling to access services. Low numbers of male workers within the children's centres can lead to environments being classed 'too female'. Working fathers may find the services more difficult to access owing to their working pattern.

able mitigations can you propose?

Children's centres provide specific groups to encourage the participation of fathers and male carers. Many centres offer sessions aimed at dads and male carers particularly on Saturdays

Positive images of fathers and male carers are used by children's centres in their publicity materials and websites.

Where appropriate/requested Health Visitors will provide support to male parents and carers.

School nurses provide an open access service which will be available for all young people to attend regardless of their gender. We will also roll out digital platforms through social media to ensure that young people have access to the service— a texting service where the pupil will remain anonymous (except for safeguarding concerns).

Sexual orientation

Data is limited however we are aware that there may be gender differences around this subject.

children's centres provide an open access service which will be available for all children and young people to attend regardless of their gender.

Health visitors, school nurses and

We will also roll out digital platforms through social media to ensure that all young people have access to services and know how to contact them. For example, a texting service for secondary school pupils where the pupil can choose to remain anonymous (except for safeguarding concerns).

Lesbian, Gay, Bisexual and Transgender (LGBT) parents are welcomed by children's centres. A centre in central Hertfordshire hosts a monthly LGBT parent group.

No disproportionate impact is anticipated.

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Equality Impact Assessment (EqIA) Final June 2017		
Protected characteristic	Potential for differential impact (positive or negative)	What reasonable mitigations can you propose?
Marriage & civil partnership	Services are provided to parents regardless of relationship status.	It is not currently envisaged that any mitigations are required but the situation will continue to be monitored
Carers (by association with any of the above)	Young Carers often miss more school than their peers.	Under the Children and Families Act and Care Act 2014, local authorities have a responsibility to meet their duty to identify, assess
	Caring responsibilities can have an emotional and educational impact.	and support young carers, young adult carers and their families. The school needs assessment will identify any requirements.
	Carers of children can access all children's centre services. No disproportionate impact is anticipated.	We envisage a lead school nurse role with subject specialism for vulnerable children including young carers
		This will be monitored and reviewed throughout the re-commissioning process.
Carers and CARE ACT 2014	From April 2015, carers will be entitled to an assessment of their own needs in the same way as those they care for. If the focus of your EqIA relates to care and support, consider carers new rights and see the Care Act pages on Compass for more guidance	

Opportunity to advance equality of opportunity and/or foster good relations (Please refer to the <u>quidance</u> for more information on the public sector duties)

Improving outcomes, modernising and making the service more visible and accountable.

Text messaging service/website and being accessed by groups that otherwise would not have accessed the service.



Impact Assessment – Staff (where relevant)

Protected	Potential for differential impact	What reasonable mitigation
characteristic	(positive or negative)	can you propose?
Age	If the age range is increased to deal with older children's ages. New training requirements may be required for children centres None have been identified	Staff training and awareness will be required in order to deal with any arising issues None have been identified but will be kept under review
Disability Including Learning Disability	None have been identified	None have been identified but will be kept under review
Race	None have been identified	None have been identified but will be kept under review
Gender reassignment	None have been identified	None have been identified but will be kept under review
Pregnancy and maternity	As this is a predominantly female workforce and a significant proportion of staff are younger there could be many instances where maternity cover is required.	Good HR policies and procedures need to be put in place to support pregnant staff. Policies will be in place to ensure a resilient and sustainable workforce.
Religion or belief	None have been identified	None have been identified but will be kept under review
Sex	None have been identified	None have been identified but will be kept under review
Sexual orientation	None have been identified	None have been identified but will be kept under review
Marriage & civil partnership	None have been identified	None have been identified but will be kept under review
Carers (by association with any of the above)	Staff who have caring responsibilities	Services will offer flexible approaches to working time as long as the service is able to be delivered

Opportunity to advance equality of opportunity and/or foster good relations (Please refer to the <u>guidance</u> for more information on the public sector duties)

The County Council does not directly employ School Nurses, Health Visitors or Children's Centre staff members as the services are provided by third party commissioned organisations.

HR advice has been sought and TUPE arrangements will be adhered to if required.



STEP 5: Gaps identified

Gaps identified

Do you need to collect more data/information or carry out consultation? (A 'How to engage' consultation guide is on Compass). How will you make sure your consultation is accessible to those affected?

Arrangements in colleges and independent schools will continue as they do currently.

Specific issues will be addressed as and when they are identified and strategies will be put in to place to ensure the best outcomes in each given scenario.

STEP 6: Other impacts

Consider if your proposal has the potential (positive and negative) to impact on areas such as health and wellbeing, crime and disorder and community relations. There is more information in the guidance.

- Health outcomes tend to be worse in more deprived areas so service provision will take this into consideration.
- Community impact if Children's Centres in the community close. Parents may have to travel further to access services.
- Some aspects of the Family Centre Services may be delivered on a targeted basis i.e. where there is increased need so that families receive the help they need early before problems escalate.
- If the current health provider is not successful in being awarded the new contract then
 this may impact on the Rapid Response Team in place. This service is provided by the
 current provider and is commissioned by the Clinical Commissioning Groups.
- New provider/s may not understand the size and geography of Hertfordshire. There will
 be a ix month mobilisation period which should provide them with them time to
 familiarise themselves with the county and to put key operational processes in place.



STEP 7: Conclusion of your analysis

Sele	ct one conclusion of your analysis	Give details
	No equality impacts identified	
Ш	 No change required to proposal. 	
	Minimal equality impacts identified Adverse impacts have been identified, but have been objectively justified (provided you do not unlawfully discriminate). Ensure decision makers consider the cumulative effect of how a number of decisions impact on equality.	
×	Potential equality impacts identified Take 'mitigating action' to remove barriers or better advance equality. Complete the action plan in the next section.	As the service has been reviewed and changes will be made in terms of service delivery, this process has identified groups that may be adversely affected. Please see Step 8, below, for mitigating actions.
	 Major equality impacts identified Stop and remove the policy The adverse effects are not justified, cannot be mitigated or show unlawful discrimination. Ensure decision makers understand the equality impact. 	

STEP 8: Action plan

Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date
Protected Characteristic – Age College pupils will not be covered.	Existing arrangements will continue to be applied.	Sue Beck September
Disability Including Learning Disability Children with emotional behavioural difficulties (EBD) and	Health Visitor service and Children's Centres will continue to provide a service to these children and young people.	Sue Beck Sally Orr



	Final June 2017	
Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date
moderate learning disabilities (MLD)	Children in mainstream schools will continue to access the school nursing service. (Note: School Nursing in special schools are commissioned by CCGS in Hertfordshire).	September 2017
Race BME children including Gypsy and Traveller Children.	Health Visitors will continue to undertake outreach as required. These children and young people will be considered as part of the needs assessment that school nurses will carry out in each school. CC have outreach workers who support vulnerable and hard to reach families	Sue Beck Sally Orr September 2017
Race Children and families who do not have English as a first language.	Health visitors have access to translation services An interpreting and translation service is available for schools to access on a traded basis.	Sue Beck September 2017
Gender Reassignment Data is limited however we are aware of the emotional impact of this.	Data is not available however our intention is that the service is accessible to all. If a child requires support in this area who are school age, the school nurse will offer support and signpost to the relevant organisation that can help the child/family.	Sue Beck Sally Orr September 2017
Pregnancy and maternity Teenage pregnancy	Support and signposting will be available through the school nurse to pregnant young women in school. All families will be offered the 5 mandated health visitor contacts. Vulnerable young parents will have additional support offered to them by health visitors. New ways of working/skill mix will be developed with health visitors and children centres to minimise any current	Sue Beck Sally Orr September 2017



Equality Impact Assessment (EqIA) Final June 2017			
Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date	
	duplication and maximise access to families within the service budget that is available		
Pregnancy and maternity Perinatal mental health	Robust pathway between antenatal to postnatal handover (midwifery and health visiting).	Sue Beck	
	All families will be offered the 5 mandated contact. The 6-8 week contact specifically includes a mental health assessment.	Sally Orr September 2017	
	Parents in known risk groups will have additional support offered to them by health visitors.	2017	
	New ways of working/skill mix will be developed with health visitors and children centres to ensure that all staff have relevant training on mental health awareness within the budget that is available.		
	Services will network with other agencies in the county that also offer support on perinatal mental health		
Religion or belief We are aware that there may be conflicting views with some religions around some health issues.	Parents can opt of out National Child Measurement Programme. We will work closely with the schools and faith leaders on these issues. Parents will be kept informed of activities that may be culturally sensitive. The school needs assessment will identify any requirements based on the school and catchment area.	Sue Beck September 2017	
Sex Data is limited however we are aware that there may be gender differences around this subject.	All services are open access for all children, young people and families to attend regardless of their gender.	Sue Beck Sally Orr	
	The school nursing service will have a text service such as Chathealth (or equivalent) in where the pupil will remain approximately approximat	September 2017	



anonymous (except for safeguarding concerns) as many young people value

Equality Impact Assessment (EqIA) Final June 2017		
Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date
	this anonymity when discussing health issues such as mental health, sexual health.	
Sexual orientation Data is limited however we are aware that there may be gender differences around this subject.	We provide an open access service which will be available for all young people to attend regardless of their gender. We will also ensure that the school nursing service has a text service such as Chathealth (or equivalent) in place where the pupil will remain anonymous (except for safeguarding concerns).	Sue Beck Sally Orr September 2017
Carers (by association with any of the above)	We envisage a lead school nurse role with subject specialism for vunerable children including young carers The school needs assessment will identify any requirements based on the child and their needs.	Sue Beck September 2017
At Risk Groups • Young people at college • Young people in independent schools	Arrangements in colleges and independent schools will continue as they do currently. Specific issues will be addressed as and when they are identified and strategies will be put in to place to ensure the best outcomes in each given scenario.	Sue Beck September 2017



This EqIA has been reviewed and signed off by:

Head of Service or Business Manager:

Sue Beck
Sally Orr

Date:

HCC's Diversity Board requires the Equality team to compile a central list of EqIAs so a random sample can be quality assured. Each Equality Action Group is encouraged to keep a forward plan of key service decisions that may require an EqIA, but <u>please can you ensure</u> the Equality team is made aware of any EqIAs completed so we can add them to our list. (email: <u>equalities@hertfordshire.gov.uk</u>). Thank you.



HERTFORDSHIRE COUNTY COUNCIL

CABINET MONDAY 10 JULY 2017 AT 2.00PM

Agenda Item No:

11

ADDITIONAL SCHOOL PLACES

Report of the Director of Children's Services

Report Author: Pauline Davis, Head of School Planning

(Tel: 01992 555865)

Executive Member: Terry Douris, Education, Libraries & Localism

Local Members: Jeff Jones; Tim Hutchings; Colin Woodward.

1. Purpose of report

1.1 To update Cabinet on proposals for the enlargement of the premises of Millfields First School, Buntingford; St. Catherine's Primary School, Hoddesdon; and St. Joseph's Primary School, Bishop's Stortford; and seek approval to the use of S106 funds.

2. Summary

- 2.1 On 10 April 2017, Cabinet authorised the publication of statutory proposals to enlarge the premises of three first and primary schools to enable additional places to meet a rising demand. The statutory notice period ended on 14 June 2017 after a 4 week notice period.
- 2.2 No objections have been received to the proposals for the enlargement of Millfields First; St. Catherine's; and St. Joseph's schools and so the Director of Children's Services has determined the proposals, taking into account any comments made, using delegated authority. The implementation of the proposals is conditional on the receipt of town planning permission.
- 2.3 Approval is sought to the use of S106 of the Town and Country Planning Act 1990 as amended funds for school expansions schemes as set out in appendix A.

3. Recommendations

3.1 That Cabinet agrees to the use of S106 funds as identified in Appendix A.

4. Background

Primary Expansion Programme (PEP7)

4.1 On 25 January the then Education, Enterprise and Skills Panel
http://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/560/Committee/10/Default.aspx
considered and recommended a fifth programme of primary school expansions for 2018/19 to Cabinet, which approved the programme on 20 February 2017

http://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/508/Committee/8/Default.aspx

Panel endorsed the Director of Children's Services initiating consultation on the proposals. Cabinet on 10 April 2017

http://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmeetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/510/Committee/8/Default.aspx considered the outcome of the consultation and approved the publication of statutory proposals for the following schools

School name	Area	expansion by form of entry (FE)				
Millfields			0.5 f.e			
	Buntingford	01.09.2018	(to 2 f.e.)	15		
St. Catherine's			0.5f.e.			
	Hoddesdon	01.09.2018	(to 2 f.e.)	15		
St. Joseph's	Bishop's		0.5 f.e.			
	Stortford	01.09.2018	(to 2 f.e.)	15		

- 4.2 The statutory notice period for those proposals ended on 14 June 2017. No objections were received to the proposals to enlarge the premises of Millfields First; St. Catherine's; and St. Joseph's schools. The Director of Children's Services has determined those proposals under delegated authority, taking into account any other comments made from supporters of the proposals and having also considered the EQIAs, referenced in section 6, which have been updated.
- 4.3 Additional funds are available to support the provision of new school places in relation to the pupil yield from new housing, via developers' contributions under S106 of the Town and Country Planning Act 1990 as amended. It is possible to use appropriate S106 funds for school expansion projects, as identified in appendix A, to a value of c £3.87m.

5. Financial Implications

Revenue funding

5.1 As previously reported, revenue funding has been made available to support the feasibility work for the school expansion programme.

Capital funding

- 5.2 Cabinet on 10 April 2017 approved the capital funding for the PEP7 schemes.
- 5.3 Approval is therefore sought only to the use of S106 funds towards school expansion schemes. Details of the district council area, the individual developments and related funding, and the schemes to which they are to be applied, to a total of c£3.87m, are contained in Appendix A.

6. Equalities

- When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the Equality implications of the decision that they are making.
- Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EIA) produced by officers.
- 6.3 The Equality Act 2010 requires the County Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 6.4 Equality Impact Assessments (EIAs) have been carried out and updated where necessary on all proposed school expansions contained within this report. They will be made available in the Members' Lounge prior to, and at the Cabinet meeting in order that Members are fully aware of any equality issues arising from the proposals. Consideration has been given to the likely impact of the proposals, and current assessments conclude that it is not anticipated that people with protected characteristics will be affected disproportionately. The EqIAs will continue to be reviewed and updated as necessary.

- 6.5 The Local Authority is bound by the Admissions Code and Regulations and this does not allow for any discrimination in this respect.
- 6.6 The expansion of school premises will enable additional school places to be made available as close as possible to the demand for them. In that way they will improve access to school places to all sectors of the communities in which they are located, and avoid very young children having to travel longer distances to access education.
- 6.7 The expansion of existing schools provides for enhanced education opportunities and an enriched curriculum offer which has a positive impact on the whole school community.
- 6.8 School expansion schemes provide positive impacts, offering the opportunity for improved facilities for disabled access in new buildings.

Background Information

As per the hyperlinks contained in the report. EqlAs

Appendix A

District	Development address	Recommended school	Primary	Secondary	Grand Total
Dacorum					
Borough					
Council	Farm Place	Ashlyns		£25,961.38	
	Land at junction of Durrants Lane &				
	Shootersway	Ashlyns		£194,164.04	
	New Lodge	Ashlyns		£136,820.80	
	Perbrook, Kingshill Way	Ashlyns		£12,153.57	
	8 Feacey Down	Galley Hill	£4,346.20		
	10-12 QUEENSWAY	Hammond	£2,004.00	64 076 00	
	10-12 QUEENSWAY 27 Box Lane	Hemel Hempstead School		£1,076.00	
	Block H	Hemel Hempstead School		£20,794.80 £4,917.84	
		Hemel Hempstead School			
	Bovingdon Service Station	Hemel Hempstead School		£3,964.28	
	Land at NE Hemel Hempstead (adj Nickey Line)	Hemel Hempstead School		£126,719.32	
	Land between Westwick Row and Pancake Lane	Hemel Hempstead School		£47,241.52	
	27 Box Lane	South Hill Primary	£17,260.80		
	Block H	South Hill Primary	£9,106.56		
	The Leinster Public House, Beechfield				
	Road	South Hill Primary	£13,445.49		
	Land behind garages Nunfield	St Clement Danes		£3,474.00	
	Land r/o 37-69 Watford Road	St Clement Danes		£99,015.07	
	Phase 3, Jubilee Walk	St Clement Danes		£13,449.00	
	Phase 3A, Jubilee Walk	St Clement Danes		£9,048.19	
	8 Chestnut Drive	Swing Gate	£1,784.16		
	New Lodge	Swing Gate	£8,126.81		
	Farm Place	Victoria C OF E	£28,182.75		
	The Pines	Victoria C OF E	£16,038.63		
Dacorum Borough Council Total			£100,295.40	£698,799.81	£799,095.21
East Herts			1100,293.40	1038,733.81	1733,033.21
District					
Council	Sanville Gardens	Forres Primary	£16,979.81		
	Land junction of Mill Road/Mead Lane	Simon Balle Primary	£97,637.03		
	Former Trinity Centre	St Catherines Primary (Ware)	£208,968.52		
	15-17 North Street	St Joseph's RC Primary	£11,078.95		
	86-124 Plaw Hatch Close	St Joseph's RC Primary	£24,682.00		
	Atkins & Cripps Ltd	St Joseph's RC Primary	£31,140.49		
	Herts & Essex Hospital	St Joseph's RC Primary	£71,530.54		
	Jackson Square, Adderley Road	St Joseph's RC Primary	£21,582.94		
	Pearse House, Parsonage Lane	St Joseph's RC Primary	£58,026.29		
East Herts District Council Total			£541,626.57	£0.00	£541,626.57
Hertsmere Borough					
Council	41-51 Oundle Avenue	Bushey Meads		£29,227.06	
	56a & 56b Harcourt Road	Bushey Meads		£11,324.00	
	Elder Court, Magpie Hall Road	Bushey Meads		£12,191.06	
	Franshams, 105 High Road/Hartsbourne Road	Bushey Meads		£12,500.02	
	Haydon Dell Farm	Bushey Meads		£46,000.00	
	Heath End, Common Road	Bushey Meads		£3,507.33	
	Herne House	Bushey Meads		£18,084.75	

Stevenage Borough					
Council					
Borough Council	Archer Road Neighbourhood Centre	Martinswood	£42,991.28		
Stevenage					
and District Council Total			£0.00	£124,548.40	£124,548.40
St Albans City					
	Wheathampstead Social Club, 1 Lower Luton Road	Sandringham		£33,531.02	
	Offas Way Garages, Offas Way	Sandringham		£2,720.06	
	Chester Nursery, 42 Oaklands Lane	Beaumont		£86,623.92	
	26-32 Fish Street	Beaumont		£1,122.20	
Council	139 London Road	Beaumont		£551.20	
St Albans City and District					
North Hertfordshire District Council Total			£663,020.35	£168,713.25	£831,733.60
	Bulwer Lytton House	Woolmer Green Primary	£50,484.80		
	Garden Square Shopping Centre, Commerce Way	Wilbury Junior	£25,870.27		
	Former Factory Site	Wilbury Junior	£510,889.28		
	Beechridge Lodge, Woodland Way	Lordship Farm Primary Wilhury Junior	£75,776.00		
	Former Convent of Providence	Hitchin Girls/Hitchin boys		£45,130.21	
	Beechridge Lodge, Woodland Way	Hitchin Girls/Hitchin boys		£42,290.00	
	Land adjacent to Pollards Way	Hitchin Girls		£20,567.21	
District Council	16A The Paddock	Hitchin Girls		£60,725.83	
North Hertfordshire					
Hertsmere Borough Council Total			£323,419.83	£934,696.86	£1,258,116.69
Horteman	The Sid Bail y Stierney Fairk	. aritime community	22,300.00		
	The Old Dairy Shenley Park	Parkside Community Parkside Community	£2,368.00		
	Land Adj 25 London Road	Parkside Community Parkside Community	£1,036.00 £5,684.02		
	1 Wilton Farm Cottages	Parkside Community	£1,036.00	10,/3/.9/	
	8 Kenilworth Close Land Adj 25 London Road	Hertswood Academy Hertswood Academy		£3,146.37 £6,737.97	
	Land adjoining 1 Napier Drive	Central Primary	£2,624.19	£2 14£ 27	
	Land ADJ to 5 Grange Road	Central Primary	£4,507.73		
	Blackwell House, Aldenham Road	Central Primary	£289,828.64		
	3 London Road and 54-64 Vale Road	Central Primary	£1,384.66		
	128 Aldenham Road	Central Primary	£11,478.86		
	11 Grange Road	Central Primary	£4,507.73		
	Windmill Nursing Home, Everett Close	Bushey Meads		£94,597.30	
	The Royal British Legion, 43 Melbourne Road	Bushey Meads		£3,754.97	
	The Red House, 74-76 High Street	Bushey Meads		£8,490.00	
	The Otter Public House	Bushey Meads		£15,081.56	
	The Harlequins, Sandy Lane	Bushey Meads		£31,634.49	
	Rossway Industrial Estate	Bushey Meads		£405,270.94	
	Land to the rear of 55-67 and 61 Oundle Avenue	Bushey Meads		£33,490.29	
	Land Rear Of 26 Park Road	Bushey Meads		£545.00	
	Land between 53 and 55 Harcourt Road	Bushey Meads		£2,561.00	
	International University Site	Bushey Meads		£192,706.90	
	Ice Cream Depot	Bushey Meads		£3,845.85	

Total			£1,736,803.21	£2,142,161.85	£3,878,965.06
Council Total			£65,449.78	£161,566.88	£227,016.66
Watford	Ecopatic Cumpus	watioid Graiiiiiai school for Boys		130,344.88	
	Leggatts Campus	Watford Grammar school for Boys Watford Grammar school for Boys		136,344.88	
	Land rear of 123-129 Gammons Lane	Watford Grammar school for Boys		2,408.00	
	Land Rear of 115 St Albans Rd Land to rear 263-267 Gammons Lane	Orchard Primary	£286.44	2.408.00	
	275-277 St. Albans Road	Orchard Primary	£14,384.00		
	47 Ross Crescent	Leavesden Green	£1,116.77		
	2 Fern Way	Leavesden Green	£2,005.03		
	6-10 Whippendell Road	Holywell Primary	£231.70		
	2 Green Lane	Holywell Primary	£4,614.04		
	19 Southsea Avenue	Holywell Primary	£4,159.44		
	Rear of 12 Holywell Road	Central Primary	£1,255.04		
	Land At Junction of Vicarage Road	Central Primary	£6,673.17		
	Garage compound between 73 and Farne House	Central Primary	£4,477.20		
	Cherry Lodge, Eastbury Road	Central Primary	£93.00		
	77-83 Lower Paddock Road	Central Primary	£4,333.44		
	36 Clarendon Road	Central Primary	£16,396.25		
	35-37 Marlborough Road	Central Primary	£579.26		
Watford Council	Former Bus Garage at Corner of Copsewood Road and Leavesden Road	Beechfield	£4,845.00		
Three Rivers District Council Total			£0.00	£53,836.65	£53,836.65
	HMS Wildfire	Bushey Meads		£10,666.31	
	132 Gosforth Lane	Bushey Meads		£2,561.00	
	HMS Wildfire	Bushey Meads		£5,662.00	
	Bracken Hill House	Bushey Meads		£21,531.34	
Three Rivers District Council	28 Eastbury Avenue	Bushey Meads		£13,416.00	

REVISED Appendix A

District	Development address	Recommended school	Primary	Secondary
D				
Dacorum Borough Council	Farm Place	A alah ma		C2F 0C1 20
Council	Farin Place	Ashlyns		£25,961.38
	Land at junction of Durrants Lane & Shootersway	Ashlyns		£194,164.04
	New Lodge	Ashlyns		£136,820.80
	Perbrook, Kingshill Way	Ashlyns		£12,153.57
	8 Feacey Down	Galley Hill	£4,346.20	
	10-12 QUEENSWAY	Hammond	£2,004.00	
	10-12 QUEENSWAY	Hemel Hempstead School		£1,076.00
	27 Box Lane	Hemel Hempstead School		£20,794.80
	Block H	Hemel Hempstead School		£4,917.84
	Bovingdon Service Station	Hemel Hempstead School		£3,964.28
	Land at NE Hemel Hempstead (adj Nickey Line)	Hemel Hempstead School		£126,719.32
	Land between Westwick Row and Pancake Lane	Hamal Hampetand School		£47 241 E2
	27 Box Lane	Hemel Hempstead School South Hill Primary	£17,260.80	£47,241.52
	Block H	South Hill Primary	£9,106.56	
	DIOCK II	South Till Tillially	19,100.30	
	The Leinster Public House, Beechfield Road	South Hill Primary	£13,445.49	
	Land behind garages Nunfield	St Clement Danes	,	£3,474.00
	Land r/o 37-69 Watford Road	St Clement Danes		£99,015.07
	Phase 3, Jubilee Walk	St Clement Danes		£13,449.00
	Phase 3A, Jubilee Walk	St Clement Danes		£9,048.19
	8 Chestnut Drive	Swing Gate	£1,784.16	
	New Lodge	Swing Gate	£8,126.81	
	Farm Place	Victoria C OF E	£28,182.75	
	The Pines	Victoria C OF E	£16,038.63	
Dacorum Borough				
Council Total			£100,295.40	£698,799.81
East Herts District				
Council	Sanville Gardens	Forres Primary	£16,979.81	
	Land junction of Mill Road/Mead Lane	Simon Balle Primary	£97,637.03	
	Former Trinity Centre	St Catherines Primary (Ware)	£208,968.52	
	15-17 North Street	St Joseph's RC Primary	£11,078.95	
	86-124 Plaw Hatch Close	St Joseph's RC Primary	£24,682.00	
	Atkins & Cripps Ltd	St Joseph's RC Primary	£31,140.49	
	Herts & Essex Hospital	St Joseph's RC Primary	£71,530.54	
	Jackson Square, Adderley Road	St Joseph's RC Primary	£21,582.94	
	Pearse House, Parsonage Lane	St Joseph's RC Primary	£58,026.29	
	r carse riouse) r arsonage zame			
	carse risasse, raisonage zame			
East Herts District	rease rease, raisenage suite			
East Herts District Council Total	. caree mease, ransmage sume		£541,626.57	£0.00
Council Total	Tourist House, I was made summer		£541,626.57	£0.00
Council Total Hertsmere		Rushey Meads	£541,626.57	
Council Total	41-51 Oundle Avenue	Bushey Meads	£541,626.57	£29,227.06
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road	Bushey Meads	£541,626.57	£29,227.06 £11,324.00
Council Total Hertsmere	41-51 Oundle Avenue		£541,626.57	£29,227.06
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road	Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road Franshams, 105 High Road/Hartsbourne Road	Bushey Meads Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road Franshams, 105 High Road/Hartsbourne Road Haydon Dell Farm	Bushey Meads Bushey Meads Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06 £12,500.02 £46,000.00
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road Franshams, 105 High Road/Hartsbourne Road Haydon Dell Farm Heath End, Common Road	Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06 £12,500.02 £46,000.00 £3,507.33
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road Franshams, 105 High Road/Hartsbourne Road Haydon Dell Farm Heath End, Common Road Herne House	Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06 £12,500.02 £46,000.00 £3,507.33 £18,084.75
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road Franshams, 105 High Road/Hartsbourne Road Haydon Dell Farm Heath End, Common Road Herne House Ice Cream Depot	Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06 £12,500.02 £46,000.00 £3,507.33 £18,084.75 £3,845.85
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road Franshams, 105 High Road/Hartsbourne Road Haydon Dell Farm Heath End, Common Road Herne House Ice Cream Depot International University Site	Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06 £12,500.02 £46,000.00 £3,507.33 £18,084.75 £3,845.85 £192,706.90
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road Franshams, 105 High Road/Hartsbourne Road Haydon Dell Farm Heath End, Common Road Herne House Ice Cream Depot International University Site Land between 53 and 55 Harcourt Road	Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06 £12,500.02 £46,000.00 £3,507.33 £18,084.75 £3,845.85 £192,706.90 £2,561.00
Council Total Hertsmere	41-51 Oundle Avenue 56a & 56b Harcourt Road Elder Court, Magpie Hall Road Franshams, 105 High Road/Hartsbourne Road Haydon Dell Farm Heath End, Common Road Herne House Ice Cream Depot International University Site	Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads Bushey Meads	£541,626.57	£29,227.06 £11,324.00 £12,191.06 £12,500.02 £46,000.00 £3,507.33 £18,084.75 £3,845.85 £192,706.90

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Watford Council	35-37 Marlborough Road 36 Clarendon Road 77-83 Lower Paddock Road Cherry Lodge, Eastbury Road	Central Primary Central Primary Central Primary Central Primary	£16,396.25 £4,333.44 £93.00	
Watford Council	36 Clarendon Road	Central Primary	£16,396.25	
Watford Council		·		
Watford Council	35-37 Marlhorough Road			
Watford Council			£579.26	
	Former Bus Garage at Corner of Copsewood Road and Leavesden Road	Beechfield	£4,845.00	
Three Rivers District Council Total			£0.00	£53,836.65
Throa Pivore	HMS Wildfire	Bushey Meads		£10,666.31
	132 Gosforth Lane	Bushey Meads		£2,561.00
	HMS Wildfire	Bushey Meads		£5,662.00
	Bracken Hill House	Bushey Meads		£21,531.34
District Council	28 Eastbury Avenue	Bushey Meads		£13,416.00
Three Rivers				
Stevenage Borough Council Total			£42,991.28	£0.00
Stevenage Borough Council	Archer Road Neighbourhood Centre	Martinswood	£42,991.28	
St Albans City and District Council Total		_	£0.00	£124,548.40
	Wheathampstead Social Club, 1 Lower Luton Road	Sandringham		£33,531.02
	Offas Way Garages, Offas Way	Sandringham		£2,720.06
	Chester Nursery, 42 Oaklands Lane	Beaumont		£86,623.92
	26-32 Fish Street	Beaumont		£1,122.20
St Albans City and District Council	139 London Road	Beaumont		£551.20
Hertfordshire District Council Total			£663,020.35	£107,987.42
North	Same Lytton House	Wooming Green Filmary	130,404.00	
	Garden Square Shopping Centre, Commerce Way Bulwer Lytton House	Wilbury Junior Woolmer Green Primary	£25,870.27 £50,484.80	
		·		
	Former Factory Site	Wilbury Junior	£510,889.28	
	Beechridge Lodge, Woodland Way	Lordship Farm Primary	£75,776.00	-,
	Former Convent of Providence	Hitchin Girls/Hitchin boys		£45,130.21
	Beechridge Lodge, Woodland Way	Hitchin Girls/Hitchin boys		£42,290.00
Borough Council Total	Land adjacent to Pollards Way	Hitchin Girls	£327,595.85	£934,696.86 £20,567.21
Hertsmere		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	The Old Dairy Shenley Park	Parkside Community Parkside Community	£2,368.00	
	1 Wilton Farm Cottages Land Adj 25 London Road	Parkside Community Parkside Community	£1,036.00 £5,684.02	
	Land Adj 25 London Road	Hertswood Academy	£1 026 00	£6,737.97
	8 Kenilworth Close	Hertswood Academy		£3,146.37
	Land adjoining 1 Napier Drive	Central Primary	£2,624.19	
	Land ADJ to 5 Grange Road	Central Primary	£4,507.73	
	Blackwell House, Aldenham Road	Central Primary	£294,004.66	
	3 London Road and 54-64 Vale Road	Central Primary	£1,384.66	
	128 Aldenham Road	Central Primary	£11,478.86	
	11 Grange Road	Central Primary	£4,507.73	
	The Royal British Legion, 43 Melbourne Road Windmill Nursing Home, Everett Close	Bushey Meads Bushey Meads		£3,754.97 £94,597.30
	The Red House, 74-76 High Street	Bushey Meads		£8,490.00
	The Otter Public House	Bushey Meads		£15,081.56
	The Harlequins, Sandy Lane	Bushey Meads		£31,634.49
	Rossway Industrial Estate	Bushey Meads		£405,270.94

		£65,449.78	£161,566.88
Leggatts Campus	Watford Grammar school for Boys		136,344.88
Land rear of 123-129 Gammons Lane	Watford Grammar school for Boys		22,814.00
Land to rear 263-267 Gammons Lane	Watford Grammar school for Boys		2,408.00
Land Rear of 115 St Albans Rd	Orchard Primary	£286.44	
275-277 St. Albans Road	Orchard Primary	£14,384.00	
47 Ross Crescent	Leavesden Green	£1,116.77	
2 Fern Way	Leavesden Green	£2,005.03	
6-10 Whippendell Road	Holywell Primary	£231.70	
2 Green Lane	Holywell Primary	£4,614.04	
19 Southsea Avenue	Holywell Primary	£4,159.44	
Rear of 12 Holywell Road	Central Primary	£1,255.04	
Land At Junction of Vicarage Road	Central Primary	£6,673.17	
Garage compound between 73 and Farne House	Central Primary	£4,477.20	
	Land At Junction of Vicarage Road Rear of 12 Holywell Road 19 Southsea Avenue 2 Green Lane 6-10 Whippendell Road 2 Fern Way 47 Ross Crescent 275-277 St. Albans Road Land Rear of 115 St Albans Rd Land to rear 263-267 Gammons Lane Land rear of 123-129 Gammons Lane	Land At Junction of Vicarage Road Rear of 12 Holywell Road 19 Southsea Avenue 2 Green Lane 6-10 Whippendell Road 2 Fern Way 47 Ross Crescent 275-277 St. Albans Road Land Rear of 115 St Albans Rd Land to rear 263-267 Gammons Lane Watford Grammar school for Boys Land rear of 123-129 Gammons Lane Central Primary Lendrary Holywell Primary Leavesden Green 47 Ross Crescent Leavesden Green Orchard Primary Watford Grammar school for Boys	Land At Junction of Vicarage Road Central Primary £6,673.17 Rear of 12 Holywell Road Central Primary £1,255.04 19 Southsea Avenue Holywell Primary £4,159.44 2 Green Lane Holywell Primary £4,614.04 6-10 Whippendell Road Holywell Primary £231.70 2 Fern Way Leavesden Green £2,005.03 47 Ross Crescent Leavesden Green £1,116.77 275-277 St. Albans Road Orchard Primary £14,384.00 Land Rear of 115 St Albans Rd Orchard Primary £286.44 Land to rear 263-267 Gammons Lane Watford Grammar school for Boys Leggatts Campus Watford Grammar school for Boys

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Grand Total	WBS code	WBS code2
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HERTFORDSHIRE COUNTY COUNCIL

Agenda Item No.

12

CABINET MONDAY 10 JULY 2017 AT 2.00PM

TO CONSIDER THE ACQUISITION OF LAND FOR A NEW FIRST SCHOOL AT LONDON ROAD BUNTINGFORD

<u>Joint Report of the Director of Resources and the Director of Children's</u> Services

Author:- Peter Oddy, Senior Estates Officer

(Tel: 01992 555221)

Samantha Young, School Planning Officer

(Tel: 01992 555754)

Executive Members:- David Williams Resources, Property & the Economy

Terry Douris, Education, Libraries and Localism

Local Member:- Jeff Jones

1. Purpose of report

- 1.1 To seek Cabinet authorisation to acquire two areas of land at London Road, Buntingford for the purposes of securing a new 2fe first school site, to ensure there is sufficient capacity to meet future demand in the area.
- 1.2 This report should be read in conjunction with the accompanying Part II report.

2. Summary

- 2.1 The County Council has been seeking a site for a new 2FE first school to ensure sufficient capacity to meet the future education needs arising from both the existing community and the pupil yield from new housing in the town. After conducting a thorough site search officers have concluded that two adjoining areas of land at London Road, Buntingford ("the Site") is the preferred location.
- 2.2 The site is strategically placed to meet future identified need and will ensure sufficient first school capacity in the town for the future to meet the anticipated demand in the Buntingford area.

2.3 The employment land:

Fairview Ventures Ltd ("Fairview") is the owner of land at the former Sainsbury's Distribution Depot. It has obtained planning permission for residential development of the majority of the land with the remainder being reserved for employment or institutional use. The employment land is currently being marketed for that use but Fairview is willing to sell that land to the County Council for a potential new 2fe first school to ensure sufficient first school capacity in the town.

- 2.4 The employment land in isolation is of insufficient size to accommodate the proposed 2FE first school buildings and its associated playing field.
- 2.5 Land occupied by The Bury Football Club:

Fairview is also the freeholder of a site occupied by the Bury Football Club which lies immediately adjacent to the employment land and there is an opportunity for the land at the football club to be made available for use by both the proposed school and the club through the terms of a joint use agreement. Fairview has indicated that it is willing to include the freehold of this land in the transfer to the County Council and discussions with The Bury concerning a potential future joint use of the club's facilities by a new school have, to date, been positive.

- 2.6 A plan showing the combined site of the employment land and The Bury Football Club is attached at Appendix 3.
- 2.7 A non-binding conditional offer, subject to contract, has been made on behalf of the County Council for the two pieces of land, following detailed discussions between Fairview, The Bury Football Club and the County Council's consultant. The County Council has been advised that the vendor is minded to accept the offer.
- 2.8 A plan and a full list of other sites considered and assessed in the site search can be found at Appendices 1 and 2.
- 2.9 Following publication of the report for the Resources, Property & the Economy Cabinet Panel on 15 June 2017, a letter was received from Moult Walker, Chartered Surveyors, attached at Appendix 5. The response from the County Council is attached at Appendix 6.

3. Recommendation

- 3.1 The Resources, Property & the Economy Cabinet Panel considered a report on this item of business at its meeting on 23 June 2017. The Panel recommended to Cabinet that the County Council:
 - (i) Acquires the freehold title of both the Employment Land and the site of the Bury Football Club, at London Road, Buntingford as

- shown edged red on the plan at Appendix 3 to this report, for the purposes of securing a new 2FE first school site to serve the future needs of Buntingford.
- (ii) Grants a lease to, and enters into a joint use agreement with, The Bury Football Club.
- (iii) That the terms of the transactions referred to at (i) and (ii) above be approved by the Director of Resources in consultation with the Executive Members for Resources, Property and the Economy and Education, Libraries and Localism.
- (iv) Approves a capital allocation for the acquisition and associated costs.

4. Background

4.1 The educational need case

- 4.1.1 Buntingford is one of two areas within Hertfordshire which operates a three tier education system; offering first, middle and upper school education to the local community. There are two first schools in Buntingford Millfield First School (1.5fe) and Layston First School (1fe) between them currently offering 75 reception places.
- 4.1.2 Both first schools are currently full in all year groups and in recent years a small number of pupils have been unable to secure a place in the town and have been allocated a first school place in surrounding villages at a cost to the County Council for transportation
- 4.1.3 As part of the Primary Expansion Programme Phase 7, the County Council is currently consulting on a proposal to permanently enlarge Millfield First School by 0.5fe to 2fe from 2018 in order to meet immediate demand.
- 4.1.4 In addition to the demand from the existing population, significant housing growth is proposed in the town, much of which is being built out currently. The total pupil yield arising from this new housing is anticipated to reach between 2fe and 3fe.
- 4.1.5 Property feasibility work has concluded that, assuming Millfield is expanded to 2fe in line with current proposals, the only remaining expansion capacity available would be a potential 1fe at Layston First School. This would be insufficient to meet all of the potential anticipated yield from the new housing proposed in Buntingford.
- 4.1.6 The County Council's strategy is therefore to secure a new 2fe first school site in the town to ensure that there are sufficient first school places for Buntingford for the future.

4.2 The Site

- 4.2.1 The site is well located on the eastern side of London Road to meet demand and a new school in this location offers a good spread of first school places across the town. It is flat and, through the joint use of the playing fields with The Bury Football Club, the site is of sufficient size to accommodate a 2FE first school.
- 4.2.2 There are a number of identified risks which are currently being explored through detailed feasibility, including access and possible contamination issues.
- 4.2.3 Whilst this site is not without its challenges it does currently represent the preferred option.

5. Town Planning

- 5.1 On 16 March 2015 (relating to an Outline Planning Application reference 3/13/1925/OP) and 3 March 2016 (relating to a Hybrid Application reference 3/15/0300/OUT) East Herts District Council granted planning permission for the demolition of the former Sainsbury's depot and development of Phases 1 4 of a mixed use scheme comprising 316 dwellings of mixed size and tenure with ancillary parking, public open space and landscaping including new access from London Road [Detailed Application] and 2ha of land for employment purposes including development within B1(c)(light industry), B1 (a) (offices) and/or D1 (non-residential institution) [outline application with all matters reserved] and retention of club house and sports pitches.
- 5.2 School use falls under the category of D1 in the Use Class Order and thus the use of the employment land for a new school does not require a further application for outline permission to establish that it is suitable for school use.

6. Property Implications

- 6.1 The County Council would be acquiring a total land holding extending to approximately 4.44 hectares (10.975acres). This is in excess of the requirements for a 2fe first school as a result of the part of the site subject to the lease to The Bury Football Club which cannot be subdivided and leave a viable football club facility.
- As is currently the case, the lease to The Bury FC will make the club responsible for the day to day management and maintenance of the facilities. The proposed joint use agreement with the County Council will regulate the hours of use of those facilities.

7. Statutory Power to Transact

7.1 Land acquisition would be under s120 Local Government Act 1972.

8. Financial Implications

- 8.1 The funding for the acquisition will be met from Basic Need funding.
- 8.2 This report should be read in conjunction with the accompanying Part II report which sets out the acquisition strategy.

9. Equality Implications

- 9.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.
- 9.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.
- 9.3 The Equality Act 2010 requires the Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 9.4 No major equalities issues have been identified with the proposals outlined in this report at this stage. Securing a school site at this location would ensure that there are sufficient local school places for children in Buntingford for the future. A school at this location would also ensure that there is a good spread of provision across the town reducing the distance that families need to travel to get to school. An EqIA is attached at Appendix 4.

10. Risks

- 10.1 There are a number of identified risks associated with this proposal.
- 10.2 The vendor has indicated that if the County Council cannot proceed to completion of a conditional contract in what he considers to be a timely

- manner then he will withdraw from the proposed transaction and continue to market the site for employment use. The County Council may therefore lose the opportunity to acquire the site.
- 10.3 As identified in 4.2.2, there are also a number of identified delivery risks, including access issues and contamination which are currently being investigated through detailed feasibility.
- 10.4 The issue of access is a matter of concern. In essence when the site was in the ownership of Sainsbury the Department of Transport acquired a piece of land from Sainsbury to adjust the access onto the new A10 roundabout. That land remains in the ownership of the Secretary of State and forms the principal access to the proposed school site. The extent of the rights to pass over that land is uncertain and detailed legal advice is being sought to clarify the position of a purchaser of the proposed school site.

11. Conclusion

11.1 Notwithstanding the risks highlighted above, in light of the future anticipated demand for first school places in Buntingford arising from the significant new housing development in the town, it is recommended that the County Council should proceed with the acquisition to ensure sufficient first school capacity can be secured for the long term.

11.2

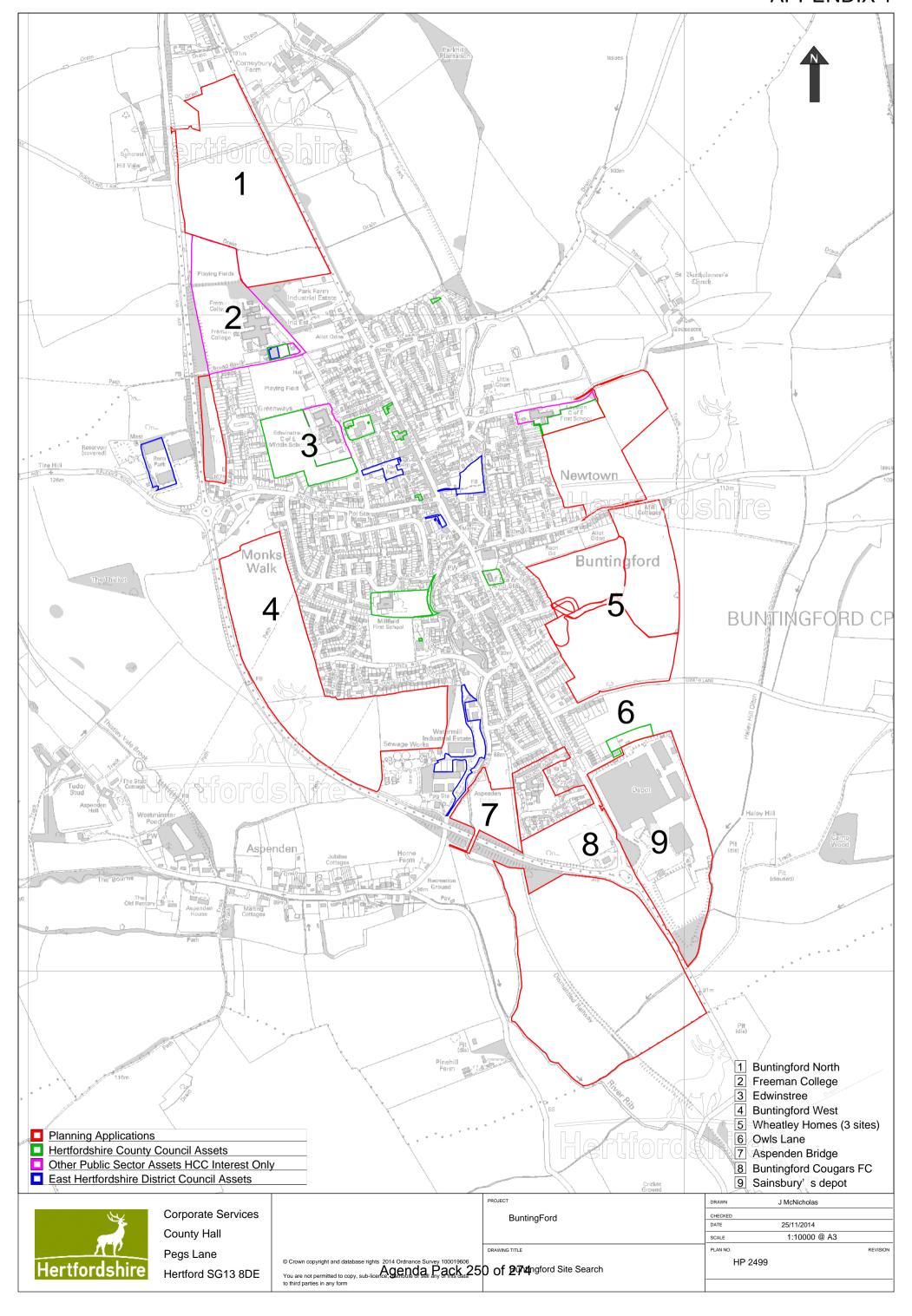
Background Information

Appendices 1-3 – Plans

Appendix 4 - EqIA

<u>Appendix 5 – Letter from Moult Walker, Chartered Surveyors</u>

Appendix 6 – Response to Moult Walker, Chartered Surveyors



APPENDIX 2 - RAG Table of Nine Sites for Buntingford First School Site Search

			s	ite acces	sibility						Site	constr	aints						
	Site size (ha)	Detached playing field within Adjoining land	Highways Impact	Vehicular	Pedestrian	Archaeological site (known)	Buildings or uses to be relocated	Conservation area	Ecology	Floodplain	Landscape impact	Listed buildings	RABGB	Noise	Protected open space	Trees	Rights of way	Topography	
Site 1 Buntingford North	16.27	14000					ated O			0	}	0		8					Other comments Includes land for Freman College Need for expansion of Freman College & first/upper school together
2 Freman College 3 Edwinstree Middle School 4 Buntingford West 5 Wheatley Homes (3 Sites)	7.9 5 20.5							86)))			Impact upon Middle School places Consider further Difficult topography
6 Owles Lane 7 Aspenden Road	2.5 2.93				8		8	8	3	88	3	8	8	8	88))	8	8	Access would need to be via sites 5 or 9 Poor access
8 Buntingford Cougars FC 9 Sainsbury's Depot	3.1 14.3							8	}	8	}			8	88))	8	8	Consider further Consider further

A total of 9 sites were assessed within the site search. Of these, 3 were identified for further exploration around their suitability for a 2fe first school.

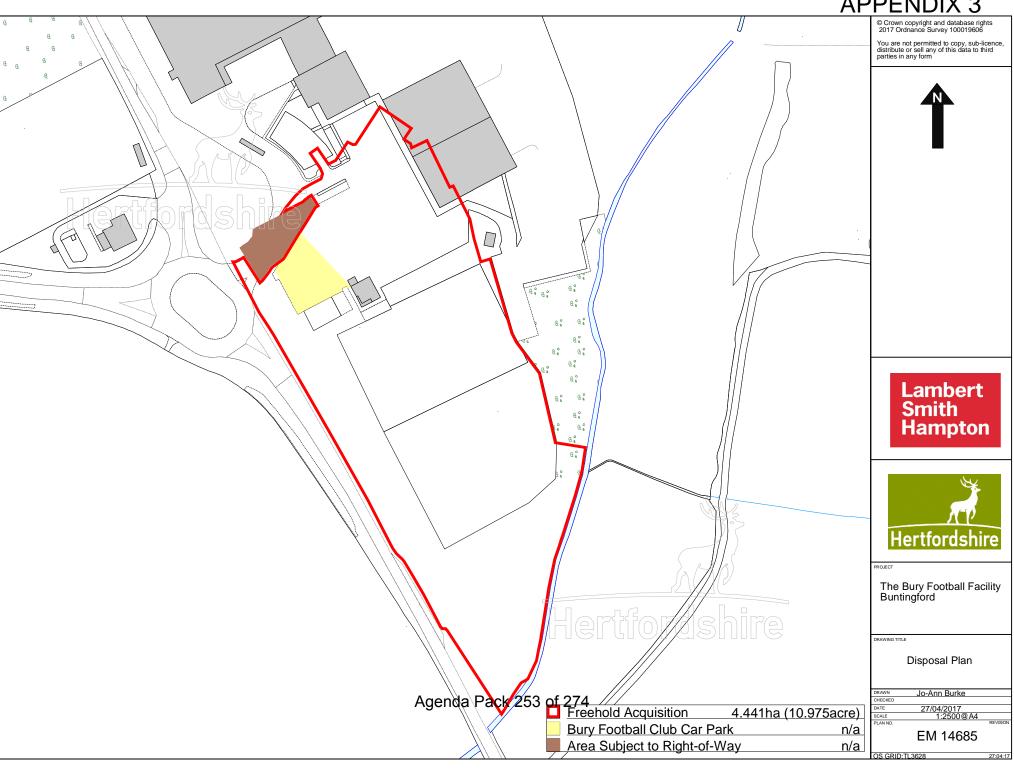
Site 4: Buntingford West

- Bovis has submitted a planning application to East Herts District Council (EHDC) for residential development on this site which includes a site for a 1FE first school, in close proximity to the main Buntingford sewage treatment works.
- If planning permission was forthcoming this site would be transferred to the County Council free of charge. In order to expand the site to a size suitable for a 2FE first school the County Council would need to purchase additional land at residential land value
- The site is not located in the prime search area lying to the south west of the town, in the vicinity of the Millfield First School site.
- Planning consent has not been granted by EHDC to date.
- Bovis has advised that, should the site come forward for development, the proposed school site is located on the last
 phase of development and thus it is uncertain when an operational school could be delivered on this site using
 infrastructure provided by Bovis. There is a risk therefore that if the County Council was to proceed to acquire this
 site for the new first school it would have to fund the construction of the purpose built access road in advance of
 commencement of the Bovis development.
- For these reasons the site off Luynes Rise is not assessed as a preferred site for a new first school.

Site 8: Buntingford Cougars Football Club

- This site is well located to provide a good pattern of first school provision across the town.
- The site is flat and has direct frontage to the highway lying on the western side of London Road..
- It's size is insufficient for a 2fe first school and associated playing field and therefore additional land would be needed.
- It is in close proximity to the A10 roundabout. There are substantial and costly highways issues to overcome before a school could be delivered on this site.
- There are complex ownership issues which make this site challenging to acquire.
- For these reasons the Buntingford Cougars site is not assessed as a preferred site for a new first school.

APPENDIX 3



STEP 1: Responsibility and involvement

Title of proposal/ project/strategy/ procurement/policy	Acquisition of land at London Road, Buntingford for a 2fe first school site	Head of Service or Business Manager	Mike Evans, Head of Estate & Asset, Management Pauline Davis, Head of School Planning
Names of those involved in completing the EqIA:	Tom Stacey Samantha Young	Lead officer contact details:	Peter Oddy Tel: 01992 555221 Samantha Young Tel: 01992 555754
Date completed:	01/06/2017	Review date:	01/09/2017

STEP 2: Objectives of proposal and scope of assessment – what do you want to achieve?

Proposal objectives: -what you want to achieve -intended outcomes -purpose and need	To identify the impact of the proposed acquisition of land at London Road, Buntingford for the purposes of securing a new 2fe first school site to ensure sufficient capacity can be made to meet future demand in the area. This assessment considers the Equality Impact Assessments ("EQiA")s undertaken to seek to identify whether any equality issues can be identified as a consequence of the acquisition of land, and any potential new first school on the site in the future, and how any issues may be addressed.
Stakeholders: Who will be affected: the public, partners, staff, service users, local Member etc.	Local schools, Pre-Schools & Nursery schools; MPs, County Councillors, District Councillors, Parish and Town Councils and Local Authority Chief Executives; Trade Union representatives; Church Diocese representatives; NHS representatives; Parent Governor representatives on the Overview and Scrutiny Committee at Hertfordshire County Council; Pre-schools, playgroups, Children's Centres, toddler groups and day nurseries; Libraries and Citizen's Advice Bureaux; Senior officers in Hertfordshire County Council's Children's Services department and in Herts Property Services



STEP 3: Available data and monitoring information

Relevant equality information

For example: Community profiles / service user demographics, data and monitoring information (local and national), similar or previous EqIAs, complaints, audits or inspections, local knowledge and consultations.

In order to produce an EqIA for the purchase of the land for a school, data from the pupils at the two existing first schools in Buntingford has been used to give a representation of the potential demographics of a new school on the site. The schools listed are Layston Church of England First School and Millfield First & Nursery School.

January 2017 school census data on gender split, English as an additional language (EAL), ethnicity, free school meal (FSM) eligibility, number of children with SEN statements, SEN Provision or who have Education & Health Care Plans.

Data excludes special schools and PRU's.

January 2017 school census data

	Millfield First School (9192386)	Layston First School (9193011)	Schools countywide
Number of Students	230	148	N/A
% Minority Ethnic Students (not White British and excluding Refused and Not Obtained)	6.52%	6.08%	30.43%
% EAL (English as an alternative Language) (First language Not English or believed not to be English)	3.48%	2.03%	16.68%
% with Statement (s) OR Education & Health Care Plan ('e)	0.87%	0.68%	0.92%
% SEN Support (K)	9.13%	10.14%	11.98%
% Total SEN Provision	10.00%	10.82%	12.90%
% FSM (Free School Meals) (at date of Census)	3.91%	4.05%	8.58%
% of Male Students	46.52%	47.30%	51.01%
% of Female Students	53.48%	52.70%	48.99%

The data indicates that the first schools in Buntingford have a very low percentage of pupils with English as an alternative language and likewise the percentage of minority ethnic students to also low, as are the number of pupils receiving free school meals.

STEP 4: Impact Assessment – Service Users, communities and partners (where relevant)

Guidance on groups of service users to consider within each protected group can be found here



Protected characteristic	Potential for differential impact (positive or negative)	What reasonable mitigations can you propose?
Age	Any future school on the site would provide additional school places as close as possible to local demand, improving access to school places for very young children and reducing the distances that families will need to travel to access first school education. It is not currently anticipated that the proposal will affect people disproportionately because of their age.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Disability Including Learning Disability	It is not anticipated that the proposals will affect people disproportionately because of their disability.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Race	It is not anticipated that the proposals will affect people disproportionately because of their race.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Gender reassignment	It is not anticipated that the proposals will affect people with this characteristic disproportionately.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Pregnancy and maternity	It is not anticipated that the proposals will affect people with this characteristic disproportionately.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Religion or belief	It is not anticipated that the proposals will affect people disproportionately because of their religion or belief.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Sex	It is not anticipated that the	The position will continue to be



Protected characteristic	Potential for differential impact (positive or negative)	What reasonable mitigations can you propose?
	proposals will affect people disproportionately because of issues around sex.	monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Sexual orientation	It is not anticipated that the proposals will affect people disproportionately because of issues around sexual orientation.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Marriage & civil partnership	It is not anticipated that the proposals will affect people disproportionately because of issues around marriage and civil partnership.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Carers (by association with any of the above)	It is not anticipated that the proposals will affect people disproportionately because of issues around caring responsibilities.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.

Opportunity to advance equality of opportunity and/or foster good relations (Please refer to the guidance for more information on the public sector duties)

The acquisition of land at London Road, Buntingford will ensure that there can be sufficient local school places for Buntingford in the future. Any future school on this site would ensure that there is a good spread of places for children in Buntingford and reduce the distances that families will need to travel to school.

We will ensure that any new school brought forward on the site will be fully accessible to disabled pupils and staff. Any building scheme will be compliant with the Disability Discrimination Act (DDA) regulations.

Impact Assessment – Staff (where relevant)

Protected	Potential for differential impact	What reasonable mitigation
characteristic	(positive or negative)	can you propose?
Age	It is not anticipated that the	The position will continue to be
	proposals will negatively affect	monitored and if any issues in
	people disproportionately because	respect of the protected
	of their age.	characteristic are identified
		then the Action Plan will be



Protected	Potential for differential impact	What reasonable mitigation
characteristic	(positive or negative)	can you propose?
	,	amended accordingly.
Disability Including Learning Disability	It is not anticipated that the proposals will affect people disproportionately because of their disability.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Race	It is not anticipated that the proposals will affect people disproportionately because of their race.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Gender reassignment	It is not anticipated that the proposals will affect people disproportionately because of their gender reassignment.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Pregnancy and maternity	It is not anticipated that the proposals will affect people disproportionately because of their pregnancy and maternity.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Religion or belief	It is not anticipated that the proposals will affect people disproportionately because of their religion/belief.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Sex	It is not anticipated that the proposals will affect people disproportionately because of issues around sex.	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Sexual orientation	It is not anticipated that the proposals will affect people disproportionately because of issues around sexual orientation	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.
Marriage & civil partnership	It is not anticipated that the proposals will affect people disproportionately because of issues around marriage and civil	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified



Protected characteristic	Potential for differential impact (positive or negative)	What reasonable mitigation can you propose?
	partnership	then the Action Plan will be amended accordingly.
Carers (by association with any of the above)	It is not anticipated that the proposals will affect people disproportionately because of issues around carers	The position will continue to be monitored and if any issues in respect of the protected characteristic are identified then the Action Plan will be amended accordingly.

Opportunity to advance equality of opportunity and/or foster good relations (Please refer to the guidance for more information on the public sector duties)

A school would offer new employment opportunities in the area and we will ensure that any new school brought forward on the site will be fully accessible to disabled staff. Any building scheme will be compliant with DDA regulations.

STEP 5: Gaps identified

Gaps identified	Any decision to acquire the land at London Road,
Do you need to collect	Buntingford is subject to Cabinet approval on 10 th July 2017.
more data/information	
or carry out	There will be no impact on protected groups initially as the
consultation? (A 'How	current proposal is simply to seek land to ensure that
to engage'	sufficient school places can be made available in the future.
consultation guide is	
on Compass). How	Should proposals for a new school come forward this EqIA
will you make sure	and Action Plan will be reviewed and updated at regular
your consultation is	intervals.
accessible to those	
affected?	

STEP 6: Other impacts

Consider if your proposal has the potential (positive and negative) to impact on areas such as health and wellbeing, crime and disorder and community relations. There is more information in the guidance.

STEP 7: Conclusion of your analysis

Select one conclusion of your analysis	Give details
No equality impacts identified No change required to proposal.	It is noted that the proposal is to acquire a school site to ensure sufficient places could be made available in the future. At this time no issues affecting protected groups have been identified.



Sele	ect one conclusion of your analysis	Give details
		However the County Council will
		continue to monitor the position and if
		any issues in respect of the protected
		characteristics are identified the Action
		Plan will be amended accordingly.
	Minimal equality impacts	
	identified	
	 Adverse impacts have been 	
	identified, but have been	
	objectively justified (provided you	
	do not unlawfully discriminate).	
	- Ensure decision makers consider	
	the cumulative effect of how a	
	number of decisions impact on	
	equality.	
l —	Potential equality impacts identified	
	 Take 'mitigating action' to remove barriers or better advance 	
	equality.	
	 Complete the action plan in the next section. 	
	Major equality impacts identified	
	 Stop and remove the policy. 	
	 Stop and remove the policy. The adverse effects are not 	
	justified, cannot be mitigated or show unlawful discrimination.	
	Ensure decision makers	
	understand the equality impact.	

STEP 8: Action Plan

Issue or opportunity identified relating to: - Mitigation measures - Further research - Consultation proposal - Monitor and review	Action proposed	Officer Responsible and target date
Monitor and review	Monitor the decision the county council takes	Mike Evans 01/09/2017



This EqIA has been reviewed and signed off by:

Head of Service or Business Manager: Mike Evans Date: 06/06/2017

Equality Action Group Chair: Date:

HCC's Diversity Board requires the Equality team to compile a central list of EqIAs so a random sample can be quality assured. Each Equality Action Group is encouraged to keep a forward plan of key service decisions that may require an EqIA, but <u>please can you ensure</u> the Equality team is made aware of any EqIAs completed so we can add them to our list. (email: <u>equalities@hertfordshire.gov.uk</u>). Thank you.





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Tuesday, 20 June 2017

Owen Mapley
Director of Resources
Hertfordshire County Council

Pegs Lane Hertford SG13 8DQ Jenny Coles Director of Children's Services Hertfordshire County Council

Pegs Lane Hertford SG13 8DQ

Dear Sir and Madam

Re: Acquisition of Land for a New First School at London Road, Buntingford Our Client – Bovis Homes Limited

With regards to the above, we refer to part 1 agenda item 9 and part II agenda item 2 of the report to the meeting of the resources, property and the economy cabinet panel on Friday 23rd June 2017.

We request that this letter should to be considered by the Cabinet Panel to correct some inaccuracies in the report, as set out below.

Bovis Homes have an option to acquire land at Buntingford West and submitted a planning application in December 2014 (East Herts reference 3/14/2304/OP) for upto 400 dwellings and a 2FE first school site. The latter land was offered to the County Council (via a draft section 106 agreement) for development of a new first school to serve the town. This offer has since been turned down by the County Council in preference for allocated employment land as part of the Fairview scheme (to which this Friday's cabinet will consider).

Bovis Homes considers there are relevant and material considerations in the report to cabinet that should be highlighted and bought to the County Council's attention before a decision is made at Friday's meeting.

The report refers at paragraph 5.2 to the proposed school use as not requiring a further application for outline permission to establish a school use. This is not agreed and not accepted based on conflict with the District Plan, Neighbourhood Plan, Sport England and the background to the current Fairview planning permission. Any school use on the Fairview employment land should be properly tested via the planning process.

These matters are summarised below:

- 1. The East Herts submission District Plan identifies another site west of London Road for a proposed new First School. The proposal at the Fairview site is contrary to the District Plan as submitted for independent examination and needs to be properly considered through the planning application process.
- 2. The District Plan designates as the London Road Employment Area (Policy BUNT3) 2 hectares of employment land at the Fairview (former Sainsbury's distribution warehouse) site. This reserves the land for B1(a), B1(c) and/or D1 uses.



- 3. The Buntingford Neighbourhood Plan dated January 2017 repeats the District Plan identification of a new first school site west of London Road. This proposal at the Fairview site is contrary to the 'made' Neighbourhood Plan and needs to be properly considered by the planning application process.
- 4. Fairview acquired the former Sainsburys distribution warehouse unconditionally and then sought to secure a residential planning permission. The initial outline planning application was for 328 new homes plus a 65-bed residential care home and small business units totalling 2,000 m².
- 5. The application was then revised to reduce the scheme to 327 homes and the employment floorspace was reduced to 1,700 m². The application was further amended to the current 316 homes, the care home element was deleted and the employment provision expanded to 2 hectares.
- 6. The 2 hectares of employment land was stated as being available for B1(c) light industry, B1(a) office **and** D1 non-residential institution uses. The East Herts Officer's Report to Committee (dated 17th September 2014, copy attached) refers at paragraphs 7.2 7.32 in some detail the employment position in the town and the considerations arising from the loss of the Sainsbury's distribution warehouse and the Fairview proposal.

7. In particular:

- Para 7.19 2 hectares of land for employment uses can potentially offer up to 8,550 m² of floorspace. Using employee ratios that are compatible with those of the Council's consultant, this could realise between 288 and 400 jobs in total (full and part time).
- Para 7.20 The Council's consultant recommended that between 2 hectares and 3 hectares of land be safeguarded for employment purposes, with the potential to create between 300 and 515 jobs in total (full and part time). The recommendation with regard to the safeguarding of land is not met in full, but it is considered that there is significant potential to implement here employment generating development which will impact beneficially on the sustainability of the town.
- Para 7.22 The commitment currently is to safeguard this land and to market it for employment uses. Please see below regarding the Section 106 agreement requirement to comply with the Employment Marketing Strategy.
- Para 8.9 With regard to employment provision, the proposals are considered to represent a scheme with significant potential to bring forward some employment benefit as part of the redevelopment of the site. This is assigned significant weight.
- 8. As such, 'significant weight' was attached at outline planning stage to the safeguarded employment land, with the potential to create between 300 and 515 jobs in total (full and part time).

- 9. The Fairview outline planning permission is subject to a Section 106 agreement which requires the submission of a Business and Employment Strategy to include delivery timescales, type of units, marketing plan and implementation plan. This was included on the basis of requiring a full and proper exploration of the potential for business and employment provision. This planning obligation has not yet been discharged and approved.
- 10. The Fairview outline permission relates to: Outline permission for the demolition of former distribution warehouse and development of mixed use scheme comprising 316 dwellings of mixed size and tenure (all matters reserved with the exception of access, layout and scale dwellings), 2 ha. of land for employment purposes including development within B1(c) (light industry), B1(a) (offices) and/or D1 (non-residential institutions).
- 11. We have highlighted in bold the 'and/or' as this seems to be the cause of confusion given the County Council are interpreting the outline permission as being all D1 with no B1 use class employment. This 'and/or' was originally requested by Fairview as 'and'.
- 12. To be clear, the outline planning permission is for 2 hectares of land for employment purposes. This is against the background of the District Plan policy requirement, and the loss of the Sainsbury's distribution warehouse as evidenced in the employment study. The Section 106 requires submission and approval of a Business and Employment Strategy for the employment land.
- 13. The planning permission then further sets out the sub-uses that could be contained within the employment land uses: light industrial, offices and/or non-residential institutions. To consider that there should be no light industrial and/or office use given the employment purpose is incorrect. This is contrary to the employment allocation and requirement for B use class employment.
- 14. Part of the 2-hectare employment land has already been granted planning permission (and sold for development) as a 66-bed elderly care home. This is a C2 use and was granted permission as an exception given this would employ 50 full-time jobs.
- 15. As item 8 above, 'significant weight' was given to the safeguarded employment land, with the potential to create between 300 and 515 jobs in total (full and part time). Given 50 full time jobs are created from the care home, this gives a residual requirement of 250 465 jobs to be created from a new 2FE first school.
- 16. Given the new 2FE first school will only have a maximum 240 pupils (with 14 classrooms), the staffing number is likely to be only 26 full time jobs of the residual jobs requirement for the town. This job figure is extracted from East Herts's own economic assessment based on 1 staff per 11.6 pupils.
- 17. East Herts have recently refused residential development at Park Farm Industrial Estate, Buntingford because the site is currently allocated in the Local Plan for employment purposes. Provision of employment land for job creation is stated to be critical to the sustainability of the town. The refusal has been appealed and the inquiry is due to start next Tuesday (27th June 2017). The East Herts proof of evidence for this appeal confirms East Herts has to plan for the long-term and it would be rash to release sites in Buntingford that are well suited to B class development.

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- 18. Highways impact and transport issues associated with a first school have not been properly reviewed and tested at the planning stage. The transport assessment submitted at outline planning was based on trip generation figures for 6,900 m² of B1(c) use and 1,650 m² of B1(a)/D1 flexible space (reference Vectos technical note dated July 2014). This shows 69 morning peak arrivals/departures for the employment land.
- 19. A transport assessment by WSP for the Buntingford West 2FE school (as submitted to East Herts Council and agreed with the County Council as highway authority) confirmed a morning peak on-site trips of 112 arrivals/departures for the school site. This is circa double the Fairview modelling.
- 20. The London Road-A10 roundabout that accesses the Fairview scheme has known capacity problems. As such, the transport modelling for a 2FE school as part of the Fairview scheme needs to be properly assessed via the planning application process.
- 21. Whilst part 1 of the report does not set out the commercial terms of the acquisition, it is assumed that this will be on commercial terms given Fairview had secured considerable interest in the employment part of their scheme (as evidenced by Coke Gearing).
- 22. This raises the issue of best value to the County Council, given the land offered by Bovis Homes for a first school at Buntingford West was on the basis of free land for the 1 ha school requirement and at education use value for the small area in excess of that requirement.
- The report refers to discussions with the football club (presumably both Buntingford Town Football Club and Buntingford Cougars Youth Football Club) concerning potential future joint use of the football club's facilities by the new school. Sport England (in the consultation response on the proposed Pigeon/Redrow scheme to the north of the town, adjacent to Freman College) are critical of shared school and community use of sports pitches and the acceptability in principle of such an arrangement is questioned.
- 24. Consultation is required with Sport England over any shared use and the future of both Football Clubs and this formal process is required by way of the planning process. Buntingford Town Football Club is affiliated to the Hertfordshire Football Association and again consultation and approval is required.
- 25. It is understood the Football Clubs have only a short term lease of the clubhouse, car park and pitches. The report refers to the grant of a new lease and joint use agreement, but details are not known at this stage. The future of the valuable community sports use should be protected and this is best dealt with by a Section 106 agreement attached to the grant of planning permission for a new first school. The County Council should consult, via the planning process, with key stakeholders and the public on the future arrangements for both Football Clubs. Both Sport England and the Football Association will necessarily need be a key part of this which can only be properly achieved via the planning application process.

Based on the above, the County Council must secure planning permission for the proposed education use and not rely on the incorrect interpretation of a poorly worded planning permission. This is best dealt with by submission of either an outline application or a full planning application, but in either case not pursuant to the current Fairview outline permission.

The key planning issues that need to be identified are the loss of clearly identified employment land, conflict with both District and Neighbourhood Plans, transport impact on the highway network from increased trip generation, potential for questions to be raised by the Football Association and the likelihood of conflict with Sport England advice.

As a further comment, Appendix 9b to the report refers to the Buntingford West site as including a site for a 1 FE school. This is incorrect as the application and proposal on offer to the County Council is for a 2 FE school.

Appendix 9b also refers to the need to acquire part of the school land at Buntingford West at residential land value. Again, this is incorrect as the Section 106 heads of terms refer to the small additional land area being on an open book basis as education land.

Appendix 9b further states that because the Buntingford West school is the last phase of development there is uncertainty regarding delivery and funding the upfront road access. Again, the Section 106 heads of terms makes provision for early delivery of the Buntingford West school as soon as planning permission is granted and repayment of the accelerated access road costs.

Accordingly, the information and advice that forms the basis of the report and recommendation to Cabinet at para. 3.1 is inaccurate and flawed for the reasons set out in our letter, and therefore cannot be relied upon.

Yours faithfully

Duncan Murdoch

Resources & Property



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Contact:

Peter Oddv

My ref: Your ref:

Date

22 June 2017

Dear Mr Murdoch

Acquisition of Land for a New First School at London Road, Buntingford.

Thank you for your letter dated 20 June 2017 addressed to Owen Mapley (Director of Resources) and Jenny Coles (Director of Children's Services). Owen has asked me to reply to you on his behalf.

We note the contents of the letter in which you suggest that the report to the forthcoming Resources, Property and the Economy Cabinet Panel contains inaccuracies and you are seeking to correct those inaccuracies. Your letter and this response will be presented to the Panel for review.

We do not accept that the report is inaccurate.

Your principal concern seems to be the interpretation of the wording of the East Hertfordshire District Council's Decision Notice relating to the Fairview application for planning permission for the development of the former Sainsbury distribution depot site off London Road, Buntingford (ref 3/13/1925/OP).

Rather than look at the passage of the application through the planning process at East Hertfordshire, what is most important is the outcome from that process which was the Decision Notice dated 16 September 2015, from which you have quoted in your letter.

Resources & Property



You correctly point out that the Decision Notice confirms the grant of planning permission for, amongst other things, the development of a 2 hectare section of the former depot site for uses within Use Classes B1(c) B1(a) and/or D1. You suggest that confusion has arisen because the County Council has assumed that the whole 2 hectares may be used for D1 purposes and you believe that that assumption is incorrect. However, that is not the case as no such assumption was made.

East Hertfordshire District Council has been aware of, and supported, the County Council's discussions with Fairview concerning the acquisition of the employment land for the purposes of securing a first school site to ensure sufficient first school places are available to meet the future needs of the expanding town of Buntingford. During that process no objection from the District was received despite the fact that in the emerging local plan an alternative site was potentially to be allocated for a first school and no representations were received from the District Council seeking to safeguard the use of the Fairview land for employment use.

Nevertheless, before the report to the Cabinet Panel was finalised the District Council was specifically asked to clarify its position on the use of the whole of the 2 hectare site for school purposes bearing in mind the wording contained in the Decision Notice. In response, the District Council confirmed that there is no impediment to the whole of the 2 hectare site being used for the proposed school.

Accordingly the County Council is of the opinion that appropriate outline planning permission for its proposed use as a school, which is a Use Class D1 use, already exists.

With regard to the collaboration with The Bury Football Club it is true that the current arrangement with Fairview is based on a short term lease that is due to expire next month. However principal terms for a new 30 year lease at a peppercorn rent have been proposed enabling the club to apply for funding from the FA to extend and enhance the facilities that it offers into the future. Thus the club's use of the site is safeguarded rather than being placed in jeopardy as you appear to suggest.

As far as the site offered by Bovis is concerned, we can assure you that this site was considered very carefully by the County Council, but for a variety of reasons it was considered to not be the preferred location for a new 2FE first school site. One of the main factors for discounting the Bovis site from an education perspective is location, and not being in the right place to serve the Buntingford community. As you know, it is near the existing Millfield School and thus does not provide a balanced spread of provision across the town. Factors such as deliverability and a proposed school site within a wider housing planning application which is yet to be determined and site specific constraints were also considered as part of the wider options appraisal.

Resources & Property



In addition, other factors taken into account during the selection of the preferred Fairview site included the proposed phasing of the Bovis development and the potential liabilities related to infrastructure and services necessary to enable the delivery of a new school.

For these reasons the County Council does not consider that the site offered by Bovis to be its preferred option for a new first school to serve Buntingford.

As the authority responsible for school place planning, it is the County Council's role to select an optimal site for the delivery of those places.

I trust that this letter clarifies the issues that you have raised.

Yours sincerely

Peter Oddy

Senor Estates Officer

HERTFORDSHIRE COUNTY COUNCIL

CABINET MONDAY 10 JULY 2017 AT 2.00PM

Agenda Item No.

13

BUSINESS CASE FOR CREATION OF A LOCAL AUTHORTY OWNED COMPANY TO DEVELOP LAND AND BUILDING ASSETS

Report of the Director of Resources

Author: Mark Handford-Jones, AD Property

(Tel: 01992 556397)

Executive Member: David Williams, Executive Member for Resources,

Property and the Economy

1. Purpose of report

1.1 To seek Cabinet's approval to the business case attached to the Part II agenda for this meeting for the establishment of a local authority company to develop land and building assets.

2. Summary

- 2.1 At its meeting on 13 March 2017, Cabinet considered a paper relating to a Property Development Programme and approved the creation of a new subsidiary company wholly owned by the County Council to work directly with the selected property joint venture partner and other providers as appropriate subject to the appropriate business case and associated papers being presented to Cabinet to approve the setting up of the company.
- 2.2 The business case supporting the establishment of a local authority company to work with the joint venture partner and other providers to develop land and building assets is contained in the separate paper accompanying this report which is exempt under Part 1 of Schedule 12A Local Government Act 1972.
- 2.3 As the structure of the company may develop as the procurement of the property joint venture partner proceeds, it is proposed that the finalisation of all documentation associated with the establishment of the company is delegated to the Director of Resources in consultation with the Executive Member Resources, Property and the Economy.
- 2.4 The Panel's recommendations to Cabinet are set out below.

3. Recommendations

- 3.1 The Resources, Property & the Economy Cabinet Panel considered a report on this item of business at its meeting on 23 June 2017. The Panel recommended to Cabinet that Cabinet:
 - (i) approves the business case for and the establishment of the wholly owned subsidiary company as referred to in the Part 2 Report;
 - (ii) delegates to the Director of Resources in consultation with the Executive Member Resources, Property & the Economy and the Chief Legal Officer the authority to agree such documents and arrangements and to take such other actions as are appropriate to establish the company;
 - (iii) authorises the Chief Legal Officer, in consultation with the Director of Resources, to appoint officers as directors of the company;
 - (iv) agrees to provide indemnities (or equivalent insurance) under the Local Authorities (Indemnities for Members and Officers) Order 2004 to Officers appointed as directors of the company and delegates to the Chief Legal Officer the power to finalise and issue the indemnities;
 - (v) delegates authority to the Director of Resources to exercise the rights of the County Council as shareholder including attending and voting at meetings, and requesting the directors to take or refrain from taking action.

4. Background

- 4.1 In March 2017, Cabinet agreed that the Director of Resources should commence an OJEU process to seek a preferred partner for a joint venture vehicle by December 2017 to work with the Council to deliver a property development programme as outlined in the. The OJEU process has commenced and is on schedule.
- 4.2 In March 2017, Cabinet also agreed the Director of Resources should bring a Business Case and associated papers back to Cabinet to approve the setting up of a wholly owned subsidiary who will work directly with a joint venture partner and other providers to develop land and building assets. Annexed to the accompanying Part 2 Report is the Business Case for setting up the company. The structure of the company may well vary as a result of the OJEU procurement referred to in paragraph 4.1 and so approval is sought from members to delegate to the Director of Resources in consultation with the Executive Member for Resources, Property & the Economy to agree the final

- structure of the company, governance arrangements and associated documents.
- 4.3 In taking forward the proposal to set up a wholly owned subsidiary company the Council has engaged external legal, financial and other professional advisers.

5. Legal Considerations and Governance Arrangements

- 5.1 The provisions of s1 of the Localism Act 2011 and the Local Government Act 2003 allow the County Council to establish a wholly owned subsidiary company. The same legislation allows a wholly owned subsidiary to undertake commercial activities with a view to making a profit. Whilst it is proposed that the primary purpose of the wholly owned subsidiary to be set up pursuant to this report and the accompany Part 2 Report is to be the partner in the proposed property joint venture, by adopting a company vehicle there will be the ability also to pursue separate trading opportunities.
- 5.2 A company limited by shares will be set up. This will be a wholly owned company of the Council. It is proposed that an independent director (effectively a managing director) will be appointed. The company's day to day governance will be managed by a board of directors. The Board of directors is likely to consist of council officers and independent directors who can bring commercial and other expertise to the company.
- 5.3 The County Council will be the sole shareholder of the company and would have the ability to direct the directors to take or refrain from taking specified action. This is likely to be achieved through arrangements with the company whereby certain key matters will be reserved for consideration by the Council/its nominated shareholder
- 5.4 The Local Government and Housing Act 1989 deals with companies under the control of local authorities and as such will be likely to comply with the relevant provisions of the Local Authorities (Companies) Order 1995.
- 5.5 It is proposed that officers will be appointed as directors to the company and these appointments will be by the Chief Legal Officer this is in line with her general powers in relation to appointments to outside bodies. Such delegation is important to ensure that the Council's nomination can be changed at short notice, which might be necessary from time to time.
- 5.6 In order to manage the personal risk to those who are appointed as directors of the company it is proposed that the County Council provides an indemnity or equivalent insurance to those who are appointed as directors of the company.

6. Financial Implications

- 6.1 The financial implications relating to the Company are detailed in the business case attached to the Part II agenda for this meeting.
- 6.2 The set up costs and early operating costs for the company will be funded by the Council using the funds approved by the Cabinet at its meeting on 13 March 2017. The Director of Resources will ensure that any set up funding provided to the company is appropriately documented.

7. Equalities

- 7.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.
- 7.2 Rigorous consideration will ensure proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.
- 7.3 The Equality Act 2010 requires the County Council, when exercising its functions, to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief; sex and sexual orientation.
- 7.4 There are no equality issues specific to these proposals.

Background Information

Cabinet documents: Cabinet - 13 March 2017