

# Cabinet

**Date & time**

Tuesday, 18  
October 2016 at  
2.00 pm

**Place**

Ashcombe Suite,  
County Hall, Kingston  
upon Thames, Surrey  
KT1 2DN

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**Chief Executive**

David McNulty

**We're on Twitter:**

@SCCdemocracy

**Cabinet Members:** Mr David Hodge, Mr Peter Martin, Mrs Helyn Clack, Mrs Clare Curran, Mr Mel Few, Mr John Furey, Mr Mike Goodman, Mrs Linda Kemeny, Ms Denise Le Gal and Mr Richard Walsh

**Cabinet Associates:** Mr Tony Samuels, Mr Tim Evans, Mrs Kay Hammond and Mrs Mary Lewis

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**This meeting will be held in public. If you would like to attend and you have any special requirements, please contact Vicky Hibbert or Andrew Baird on 020 8541 9229 or 020 8541 7609**

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## **1 APOLOGIES FOR ABSENCE**

## **2 MINUTES OF PREVIOUS MEETING: 20 SEPTEMBER 2016**

The minutes will be available in the meeting room half an hour before the start of the meeting.

## **3 DECLARATIONS OF INTEREST**

To receive any declarations of disclosable pecuniary interests from Members in respect of any item to be considered at the meeting.

Notes:

- In line with the Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012, declarations may relate to the interest of the member, or the member's spouse or civil partner, or a person with whom the member is living as husband or wife, or a person with whom the member is living as if they were civil partners and the member is aware they have the interest.
- Members need only disclose interests not currently listed on the Register of Disclosable Pecuniary Interests.
- Members must notify the Monitoring Officer of any interests disclosed at the meeting so they may be added to the Register.
- Members are reminded that they must not participate in any item where they have a disclosable pecuniary interest.

## **4 PROCEDURAL MATTERS**

### **a Members' Questions**

The deadline for Member's questions is 12pm four working days before the meeting (*12 October 2016*).

### **b Public Questions**

The deadline for public questions is seven days before the meeting (*11 October 2016*).

### **c Petitions**

The deadline for petitions was 14 days before the meeting, and no petitions have been received.

### **d Representations received on reports to be considered in private**

To consider any representations received in relation why part of the meeting relating to a report circulated in Part 2 of the agenda should be open to the public.

## **5 REPORTS FROM SCRUTINY BOARDS, TASK GROUPS, LOCAL COMMITTEES AND OTHER COMMITTEES OF THE COUNCIL**

(Pages 1  
- 2)

A report has been received from the Economic Prosperity Environment and Highways Board.

## CORPORATE PRIORITIES: 1. WELLBEING

### 6 SURREY SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2015-2016 (Pages 3 - 80)

The Surrey Safeguarding Adults Board is a statutory Board. Its responsibilities are set out in the Care Act and is headed by an Independent Chairman.

Safeguarding Adults Boards nationally have a statutory duty to publish an annual report, the Surrey Safeguarding Adults Board Annual Report for 2015/16 is contained in Annex 1.

This report is presented to the Cabinet by the Independent Chairman and complies with the statutory requirements under the Care Act 2014.

The recommendation within this report supports the Council's strategic 'Wellbeing' priority.

*[The decisions on this item can be called in by the Social Care Services Scrutiny Board]*

### 7 SUSTAINABILITY AND TRANSFORMATION PLANS (Pages 81 - 100)

Surrey County Council is playing an important role in the development of the three Sustainability and Transformation Plans (STPs) across Surrey. These Plans will play a pivotal role in shaping the future health and care landscape across Surrey.

This report follows the Sustainability and Transformation Plans report presented to the Cabinet on 21 June 2016 – it provides an update on the emerging STPs and asks for delegated authority to sign off the STPs on behalf of the County Council.

*[The decisions on this item can be called in by the Social Care Services Board and/or the Wellbeing and Health Scrutiny Board]*

### 8 DELIVERY OF NEW SPEECH AND LANGUAGE THERAPY SERVICE AND JOINT COMMISSIONING ARRANGEMENTS FOR SPECIALIST SCHOOL NURSING SERVICE (Pages 101 - 110)

Consultation with families, schools and other stakeholders has identified a significant opportunity to improve the speech and language therapy service for children and young people in Surrey.

In response to this feedback, Cabinet agreed a joint commissioning strategy between Surrey County Council and Surrey Clinical Commissioning Groups in May 2015. Cabinet agreed that speech and language therapy services for mainstream schools would be delivered directly by Surrey County Council and services for specialist settings would be delivered by schools. New arrangements for this service would be implemented from September 2016.

This paper details the principles for TUPE arrangements as the service moves towards implementation. It also outlines the proposal to bring the service for specialist settings into Surrey County Council to sit alongside

the mainstream service and changes to joint commissioning arrangements between Surrey County Council and Surrey Clinical Commissioning Groups for the Special School Nursing Service provided to children and young people in Surrey special schools.

*[The decisions on this item can be called in by the Education and Skills Board]*

## **CORPORATE PRIORITIES: 2. ECONOMIC PROSPERITY**

### **9 LOCAL GOVERNMENT FINANCE SETTLEMENT - TECHNICAL CONSULTATION** (Pages 111 - 114)

On 15 September 2016 the Department for Communities and Local Government issued a technical consultation paper on the 2017/18 Local Government Finance Settlement.

The consultation covers a number of funding areas and seeks the views of local authorities and their representative bodies. The areas covered particularly affecting Surrey County Council include the four year offer; the methodology for distributing the improved Better Care Fund; council tax referendum principles, the business rates revaluation and more indirectly, the treatment of areas piloting 100% retention of business rates.

As a key part of its financial sustainability strategy, the council will respond to this consultation and input into other representative bodies' responses. The deadline for responses is 28 October 2016.

Annexes 1 and 2 to this report will be tabled at the meeting.

*[The decisions on this item can be called in by the Council Overview Board]*

### **10 FINANCE AND BUDGET MONITORING REPORT TO 30 SEPTEMBER 2016** (Pages 115 - 118)

The Council takes a multiyear approach to its budget planning and monitoring, recognising the two are inextricably linked. This report presents the Council's financial position as at 30 September 2016 (month six).

The annex to this report gives details of the Council's financial position and will be tabled at the meeting.

*[The decisions on this item can be called in by the Council Overview Board]*

### **11 LEADERSHIP RISK REGISTER** (Pages 119 - 130)

The Surrey County Council Leadership Risk Register is presented to Cabinet each quarter and this report presents the Leadership Risk Register as at 31 August 2016.

*[The decisions on this item can be called in by the Council Overview Board]*

*Board]*

**12 STREET LIGHTING - INTRODUCTION OF A PART NIGHT LIGHTING PROGRAMME** (Pages 131 - 144)

Surrey County Council's street lights consume nearly 25 million kilowatt hours of electricity and generate around 12,500 tonnes of CO2 each year which currently costs the Council £3 million per annum.

Increasing energy costs and the significant environmental impact of street lighting consumption places a responsibility on the Council to ensure it is using its infrastructure efficiently and cost effectively. This includes ensuring the lights are on full power when needed but that lighting is adapted when this is less so – for example, the vast majority of Street Lights are currently dimmed by up to 50% power from 2200 – 0530 hours each night.

Following a consultation, in which over 75% of respondents expressed support, this report proposes that some street lights in Surrey are turned off for part of the night. Turning off 44,000 street lights in residential areas would save the Council approximately £210,000 per annum along with reducing its CO2 “footprint”.

*[The decisions on this item can be called in by the Economic Prosperity, Environment and Highways Scrutiny Board]*

**13 INVESTMENT IN TRANSPORT AND HIGHWAYS INFRASTRUCTURE - ADDITIONAL SCHEMES IN THE THIRD TRANCHE OF THE LOCAL GROWTH FUND** (Pages 145 - 152)

In their Strategic Economic Plans (SEPs), the two Local Enterprise Partnerships (LEPs) covering Surrey, Enterprise M3 (EM3) and Coast to Capital (C2C), have set out their proposals for supporting economic development in their areas. Surrey County Council has worked with them to develop these plans which include improvements to transport infrastructure to provide economic benefits. Funding for the schemes included in the SEP comes from the Local Growth Fund (LGF), government funding through the LEPs. The arrangements require a local contribution to be made to the cost for these schemes and for this to be identified when business cases are submitted.

On 23 September 2014, the Cabinet approved arrangements for local contribution for the first tranche of three schemes of the 2015-16 SEP programme. On 14 December 2014 approval was given for local contribution for the second tranche of seven schemes of the same programme and, on 15 December 2015 the Cabinet approved further local contribution for the third tranche of four schemes of the same 2015-16 SEP programme.

Approval is now sought for the development and submission of business cases for a further four schemes; namely Wider Staines STP (phase 1), A30 London Road Camberley, Greater Leatherhead STP and A24 Epsom town centre Resilience, to be added to the third tranche of the 2016/17 SEP programme. The total estimated cost for these four schemes is £16.533m with a potential LGF contribution from the LEPs of £12.570m.

Approval is sought for a County Council contribution of approximately £1.789m for these schemes to be match funded from the existing Surrey County Council Local Growth Deal and Project Horizon capital budgets.

Partner and S106 developer committed contributions are currently £2.174m which could increase as discussions are still in progress with partners.

The business cases for these four schemes are planned to be submitted during the autumn /winter of 2016/17. Detailed design could commence on some of these schemes during Q4 of 2016/17.

The Council has been in discussions with the relevant borough councils to secure their share of the local contribution. It is a requirement that the County Council confirms that the specified local contribution is available when it submits the business cases.

*[The decisions on this item can be called in by the Economic Prosperity Environment and Highways Board]*

#### **14 RIVER THAMES SCHEME FUNDING CONTRIBUTION**

(Pages  
153 -  
158)

Serious flooding from the River Thames causes severe hardship and suffering to many Surrey residents and damage to the County's economy. Many are yet to fully recover from the last major flood event in 2013/14 and the risk of future flooding is significant.

The Environment Agency (EA) is responsible for flood risk management of the Thames and is developing a major flood alleviation scheme that would benefit the Surrey stretch of the Thames. It is called the River Thames Scheme (RTS) and is estimated to cost a total of £461m. The Government and other national bodies do not fully fund such flood alleviation schemes and therefore large contributions from other sources are required if schemes are to be successfully developed and built. There is currently a £213.6m funding gap for the RTS and the County Council is supporting work to secure further contributions.

Although there is a risk, at this stage, that the scheme may not receive the necessary funding, consents and Government approval to facilitate completion, it is proposed that the County Council contribute a total of £2.5m towards its development costs because of the importance of Thames flood protection to Surrey residents and businesses. The total cost of the development phase of the RTS is estimated at £55.7m and in the absence of further financial support from the Government at this stage, this "pump priming" investment by the County Council will help to get the scheme fully developed to a "shovel ready" state and this will increase its prospect of achieving full funding.

Further flood events of the scale of 2013/14 or greater would incur significant costs for the County Council in fulfilling its statutory duties and this risk would be reduced if the scheme is built.

*[The decisions on this item can be called in by the Economic Prosperity, Environment and Highways Scrutiny Board]*

## **CORPORATE PRIORITIES: 3. RESIDENT EXPERIENCE**

- 15 APPROVAL FOR THE SURREY FIRE AND RESCUE SERVICE TO TRIAL THE USE OF INITIAL RESPONSE VEHICLES AND AWARD A CONTRACT FOR THE PROVISION** (Pages 159 - 174)

Surrey Fire Rescue Service (SFRS) wishes to conduct a trial of a new type of vehicle for responding to incidents with an option to roll-out the concept across the Service, where relevant, on completion of a successful trial.

An 'Initial Response Vehicle' (IRV) is a van sized vehicle (see Annex B) normally to be crewed by two firefighters, in comparison to the traditional LGV sized fire engine crewed by four firefighters. It has the capability and will be appropriately equipped and crewed to attend a defined range of routine incidents (see Annex C) and to provide support at more complex situations. This vehicle will also deliver a range of community safety activities and could play an important role in SFRS's fleet, leading to both capital and revenue savings.

Subject to the results of the trial, the intention would be to recommend purchase of additional IRVs to replace/assist part of the current fleet.

This report, detailed in part two, also seeks approval to award a contract for an IRV concept for SFRS to commence on the 4 November 2016

N.B. an annex containing exempt information is contained in Part 2 of the agenda – item 18.

*[The decisions on this item can be called in by the Council Overview Board and/or the Resident Experience Board]*

- 16 LEADER / DEPUTY LEADER / CABINET MEMBER DECISIONS TAKEN SINCE THE LAST CABINET MEETING** (Pages 175 - 176)

To note any delegated decisions taken by the Leader, Deputy Leader and Cabinet Members since the last meeting of the Cabinet.

Please note that the annex to this report will be circulated separately prior to the Cabinet meeting.

- 17 EXCLUSION OF THE PUBLIC**

That under Section 100(A) of the Local Government Act 1972, the public be excluded from the meeting during consideration of the following items of business on the grounds that they involve the likely disclosure of exempt information under the relevant paragraphs of Part 1 of Schedule 12A of the Act.

## **PART TWO - IN PRIVATE**

- 18 AWARD A CONTRACT FOR SFRS INITIAL RESPONSE VEHICLE CONCEPT FROM 4 NOVEMBER 2016.** (Pages 177 - 180)

This is a part 2 annex relating to item 16.

**Exempt: Not for publication under Paragraph 3**

*[The decisions on this item can be called in by the Council Overview Board and/or the Resident Experience Board]*

- 19**      **PROPERTY TRANSACTION 1**      (Pages  
181 -  
208)
- Property Acquisition

**Exempt: Not for publication under Paragraph 3**

Information relating to the financial or business affairs of any particular person (including the authority holding that information)

*[The decision on this item may be called in by the Council Overview Board]*

- 20**      **PROPERTY TRANSACTION 2**      (Pages  
209 -  
236)
- Property Acquisition

**Exempt: Not for publication under Paragraph 3**

Information relating to the financial or business affairs of any particular person (including the authority holding that information)

*[The decision on this item may be called in by the Council Overview Board]*

- 21**      **PROPERTY TRANSACTION 3**      (Pages  
237 -  
266)
- Property Acquisition

**Exempt: Not for publication under Paragraph 3**

Information relating to the financial or business affairs of any particular person (including the authority holding that information)

*[The decision on this item may be called in by the Council Overview Board]*

- 22**      **PUBLICITY FOR PART 2 ITEMS**

To consider whether the item considered under Part 2 of the agenda should be made available to the Press and public.

**David McNulty**  
**Chief Executive**  
Monday, 10 October 2016



## QUESTIONS, PETITIONS AND PROCEDURAL MATTERS

The Cabinet will consider questions submitted by Members of the Council, members of the public who are electors of the Surrey County Council area and petitions containing 100 or more signatures relating to a matter within its terms of reference, in line with the procedures set out in Surrey County Council's Constitution.

**Please note:**

1. Members of the public can submit one written question to the meeting. Questions should relate to general policy and not to detail. Questions are asked and answered in public and so cannot relate to "confidential" or "exempt" matters (for example, personal or financial details of an individual – for further advice please contact the committee manager listed on the front page of this agenda).
2. The number of public questions which can be asked at a meeting may not exceed six. Questions which are received after the first six will be held over to the following meeting or dealt with in writing at the Chairman's discretion.
3. Questions will be taken in the order in which they are received.
4. Questions will be asked and answered without discussion. The Chairman or Cabinet Members may decline to answer a question, provide a written reply or nominate another Member to answer the question.
5. Following the initial reply, one supplementary question may be asked by the questioner. The Chairman or Cabinet Members may decline to answer a supplementary question.

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It is requested that if you are not using your mobile device for any of the activities outlined above, it be switched off or placed in silent mode during the meeting to prevent interruptions and interference with PA and Induction Loop systems.

*Thank you for your co-operation*

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**ECONOMIC PROSPERITY, ENVIRONMENT AND HIGHWAYS BOARD****Item under consideration: Winter Maintenance Saving Cost Recommendation****Date Considered: 8 September 2016****Key points raised during the discussion:**

- The Board discussed the merits and demerits of the eight proposals for savings against the Winter Service budget. In response, the board supported the thermal mapping option and indicated that the other options were incompatible with the corporate priorities, therefore unable to deliver and achieve the £340k saving proposal.

**Recommendations:**

The Economic Prosperity, Environment and Highways board recommends;

- a. That Officers continue to develop a financial plan for the Thermal Mapping proposal, to ensure a significant saving is returned against the initial revenue expenditure, albeit in future financial years.
- b. That Cabinet considers more acceptable means for generating savings from the Environment and Infrastructure budget in order to obtain the £340,000 target for this financial year.

**David Harmer**

Chairman of the Economic Prosperity, Environment and Highways Board

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**SURREY COUNTY COUNCIL****CABINET****DATE: 18 OCTOBER 2016****REPORT OF: MEL FEW, CABINET MEMBER FOR ADULT SOCIAL CARE, WELLBEING AND INDEPENDENCE****LEAD OFFICER: HELEN ATKINSON, STRATEGIC DIRECTOR ADULT SOCIAL CARE AND PUBLIC HEALTH****SUBJECT: SURREY SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2015-2016****SUMMARY OF ISSUE:**

The Surrey Safeguarding Adults Board is a statutory Board. Its responsibilities are set out in the Care Act and is headed by an Independent Chairman.

Safeguarding Adults Boards nationally have a statutory duty to publish an annual report, the Surrey Safeguarding Adults Board Annual Report for 2015/16 is contained in Annex 1.

This report is presented to the Cabinet by the Independent Chairman and complies with the statutory requirements under the Care Act 2014.

The recommendation within this report supports the Council's strategic 'Wellbeing' priority.

**RECOMMENDATIONS:**

It is recommended that the Cabinet Considers and notes the attached Surrey Safeguarding Adults Board Annual Report prior to it being published.

**REASON FOR RECOMMENDATIONS:**

This annual report highlights the achievements of the Surrey Safeguarding Adults Board during the year and provides the Cabinet with an opportunity to understand the issues within the Adult Social Care directorate in respect of safeguarding over the past year.

**DETAILS:**

1. Surrey County Council (SCC) has had a Safeguarding Adults Board in place for over a decade. The Board was originally set up under the Department of Health guidance: 'No Secrets' (March 2000). It has had an independent chair whose primary duty is to ensure that the main statutory agencies work together to improve practices which protect and promote the safety of adults at risk of abuse and neglect in Surrey.
2. Surrey Safeguarding Adults Board (SSAB) has presented its Annual Report to Cabinet for the last six years. It is a statutory requirement under the Care Act for the Annual Report to be sent to the Chief Executive and Leader of the

Local Authority, the Police and Crime Commissioner, the Chief Constable, Healthwatch and the Chair of the Health and Wellbeing Board.

3. The Board would like to support Elected Members to have a good understanding of the range of abuse and neglect issues that can affect adults and of the importance of balancing safeguarding with empowerment, as required by the Care Act (Section 14.193 of the statutory guidance). It is anticipated the Annual Report will increase that understanding.

### **Safeguarding children and adults**

4. Surrey has had a statutory Safeguarding Children's Board in place since 2004. The legislative framework for safeguarding children is different from that of safeguarding adults. However, one of the aims of the Safeguarding Adults Board is to ensure Elected Members and the public are as well informed on safeguarding adults as safeguarding children. This will increase confidence that people living in Surrey are safeguarded irrespective of their age.

### **Care Act 2014**

5. The Care Act states each Local Authority must establish a Safeguarding Adults Board (a 'SAB') for its area. The objective of a SAB is to help and protect adults in its area in cases of the kind described in section 42(1) of the legislation (this is set out in paragraph 14 below). The way in which a SAB must seek to achieve its objective is by co-ordinating and ensuring the effectiveness of what each of its members does. A SAB may do anything which appears to it to be necessary or desirable for the purpose of achieving its objective.
6. Section 42(1) of the Care Act describes the adults that must be protected by safeguarding as: an adult in the Local Authority area (whether or not ordinarily resident there who has needs for care and support (whether or not the authority is meeting any of those needs) and is experiencing, or is at risk of, abuse or neglect, and as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

### **CONSULTATION:**

7. The Annual Report is a description of the Board's activities and challenges faced during the year. It will be shared with all partner members of the Board and made available to the public.

### **RISK MANAGEMENT AND IMPLICATIONS:**

8. There are no implications within this report.

### **Financial and Value for Money Implications**

9. The cost of running the Board is budgeted at £290,000 per year which covers the costs of the Independent Chair, support staff, Safeguarding Adults Reviews (previously called Serious Case Reviews), training, conferences etc.
10. This is a pooled budget with financial contributions from Police, health services, district and borough councils. SCC's share of the costs amounts to £117,450 (40.5%).

### **Section 151 Officer Commentary**

11. No significant financial issues arise from this report.

### **Legal Implications – Monitoring Officer**

12. The production and publication of the Annual Report is a statutory duty under the Care Act 2014.

### **Equalities and Diversity**

13. The recommendations will have a positive impact on residents with different protected characteristics by making the activities of the Board more transparent. This is particularly important as safeguarding affects many people with protected characteristics.

14. An Equality Impact Assessment (EIA) is not required for this Report.

### **Safeguarding responsibilities for vulnerable children and adult's implications**

15. The Annual Report will support the safeguarding of vulnerable adults as it provides information on the performance of this activity in Surrey.

### **WHAT HAPPENS NEXT:**

16. The Board's Annual Report will be:

- presented to the Social Care Services Board;
- placed on the Surrey County Council website;
- signposted in the Surrey Safeguarding Adults newsletter;
- sent electronically to all Board members for them to cascade within their own agencies;
- sent electronically to the Police and Crime Commissioner;
- sent electronically to the Chief Constable;
- sent electronically to Healthwatch; and
- presented to the Health and Wellbeing Board.

#### **Contact Officer:**

Liz Butcher, Surrey Safeguarding Adults Board Manager; Tel: 07772 901 984

#### **Consulted:**

This is the Annual Report from the Independent Chair of the Surrey Safeguarding Adults Board, therefore other parties are not consulted on its content.

#### **Annexes:**

Annex 1: Surrey Safeguarding Adults Board Annual Report 2015 - 2016.

#### **Sources/background papers:**

- Care Act 2014
- Care and Support Statutory Guidance Issued under the Care Act 2014 by the Department of Health
- Association of Directors of Social Services: Safeguarding Adults: Advice and Guidance to Directors of Adult Social Services, March 2013
- Surrey Safeguarding Adults Board Strategic and Annual Plan

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## **Surrey Safeguarding Adults Board**

# **Annual Report 2015 – 2016**

We will all work together to enable people in Surrey to live a life free from fear,  
harm and abuse

# Surrey Safeguarding Adults Board

## Annual Report 2015 – 2016

### Foreword by the chair of the Board



*Simon Turpitt  
Independent Chair, Surrey Safeguarding Adults Board*

This has been an exciting yet challenging year for the Board.

In April we became statutory which was really significant, not only as it gave us a stronger remit to protect adults at risk of harm and abuse. It also meant that all agencies had to comply with the Care Act including re training their staff, re writing procedures and ensuring capacity and capability to deliver a robust programme around Safeguarding Adults at risk of harm and abuse.

Keeping safeguarding personal is key to ensuring the person is at the centre of what we do and we have worked and continue to work with partners to ensure they focus on that.

A lot of effort was put in by all to ensure the new processes were in place on time and that they worked. This was a big task for the Board and its member agencies. The expectation was for the Board to have a team in place to support this by April 1<sup>st</sup>. The reality was that it took the best part of the year to get people into the appropriate roles (Board Manager, Quality Assurance, and Board Administrator) and this had an impact especially around ensuring compliance with the Act.

However, with good support from all Board agencies we met the timescales for implementation, though there has been a learning curve in understanding the new processes around enquiries and their escalation. It has not been possible to report evidence to the required level. This is primarily due to the limitations within the Adult Social Care (ASC) IT system. This will be addressed through the implementation of the new ASC IT system in September 2016.

We have put a lot of work into building a better data base to assure ourselves that the programmes we are implementing are making Surrey safer for adults at risk of harm and abuse. The foundation for this is to have data from all major providers. From this we can evidence what is happening and ensure they are taking appropriate actions where issues occur or need to strengthen prevention. This still has some way to go but each reporting cycle gets better.

Since the start of the Care Act, agencies have been more committed to working together and ensuring that they support the programme of the Board. Better representation on committees, input to plans and training, have all improved. We recognise though, that with financial and human resources under pressure, there are still some challenges.

There was a Serious Case Review which started in the previous year but reported in the period covered by this report. It highlighted some recommendations for agencies and the Board which were cascaded and followed up by the Business Management Group (a subcommittee of the Board). This group oversees the implementation and impact of recommendations and holds members to account for delivery of the changes.

We have improved our ability to share best practice and learning not just within our own area but also from reports across the country and from working with other Boards.

We held a learning seminar on the Mental Capacity Act and Deprivation of Liberty Safeguards, as this had been highlighted as an area of development for most agencies. The seminar included speakers from National Agencies and local experts. It was well attended with over 100 delegates from across the county. The feedback was really positive and showed that attendees felt better equipped to manage these areas.

Towards the end of the year we had one and half days where we developed our strategy and plan for the coming year. There was a real multi agency input and robust discussions ensured we had a good plan.

The Board was fully funded this year across agencies and this helped gain stronger commitment from all. This allowed us to have three permanent staff to support the Board. Although recruitment took a long time, it has really helped us be more effective in our plans.

It is clear that the current financial restraints are challenging. However, the Board is committed to deliver more on the prevention agenda rather than managing the after effects of safeguarding enquires. This means being efficient in the use of our, and our partner's resources, looking at ways of working with other agencies to avoid duplication, focussing more on what works and improving that.

Have we kept people safer in Surrey? - The answer is yes, but qualified by the fact that our ability to measure that, though improved still has a way to go. Improving information, better accountability, more focus on the person and a stronger prevention agenda are part of the continuing programme the Board drives.

*Simon Turpitt  
Independent Chair, Surrey Safeguarding Adults Board*

# Keeping your loved ones safe

from abuse and neglect

Everyone deserves to  
be treated with care  
and respect.

If you think someone  
is being abused  
report it now.

Call this free and  
confidential helpline

**0300 200 1005**

In an emergency  
**DIAL 999**

For further information visit  
[surreycc.gov.uk/protectingadults](http://surreycc.gov.uk/protectingadults)



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## What is safeguarding

Most people in Surrey live safely, free from harm, abuse and neglect. However, some people have care and support needs that make it difficult for them to protect themselves. In these circumstances, if they are experiencing or are at risk of abuse and neglect, then they need to be safeguarded to keep them safe.

The Care Act sets out the circumstances when safeguarding duties apply. The Act says safeguarding applies to adults who

- has needs for care and support (whether or not the local authority is meeting any of those needs) and
- is experiencing, or at risk of, abuse or neglect and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

## The six key principles that underpin all adult safeguarding work

There are six key principles that underpin all adult safeguarding work. These are set out below.

### Empowerment

People being supported and encouraged to make their own decisions and informed consent.

'I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens'.

### Prevention

It is better to take action before harm occurs.

'I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help'.

### Proportionality

The least intrusive response appropriate to the risk presented.

'I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed'.

## Protection

Support and representation for those in greatest need.

'I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want'.

## Partnership

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

'I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me'.

## Accountability

Accountability and transparency in delivering safeguarding.

'I understand the role of everyone involved in my life and so do they'.

## Types of abuse and neglect

There are types of abuse and neglect that will always require a safeguarding response when an adult at risk experiences them. These are set out below.

<p><b>Physical abuse including:</b></p>	<ul style="list-style-type: none"> <li>• Assault</li> <li>• hitting</li> <li>• slapping</li> <li>• pushing</li> <li>• misuse of medication</li> <li>• restraint</li> <li>• inappropriate physical sanctions</li> </ul>
<p><b>Domestic violence including:</b></p>	<ul style="list-style-type: none"> <li>• psychological</li> <li>• physical</li> <li>• sexual</li> <li>• financial</li> <li>• emotional abuse</li> <li>• so called 'honour' based violence</li> </ul>



<p><b>Sexual abuse including:</b></p>	<ul style="list-style-type: none"> <li>• rape</li> <li>• indecent exposure</li> <li>• sexual harassment</li> <li>• inappropriate looking or touching</li> <li>• sexual teasing or innuendo</li> <li>• sexual photography</li> <li>• subjection to pornography or witnessing sexual acts</li> <li>• indecent exposure</li> <li>• sexual assault</li> <li>• sexual acts to which the adult has not consented or was pressured into consenting</li> </ul>
<p><b>Psychological abuse including:</b></p>	<ul style="list-style-type: none"> <li>• emotional abuse</li> <li>• threats of harm or abandonment</li> <li>• deprivation of contact</li> <li>• humiliation</li> <li>• blaming</li> <li>• controlling</li> <li>• intimidation</li> <li>• coercion</li> <li>• harassment</li> <li>• verbal abuse</li> <li>• cyber bullying</li> <li>• isolation</li> <li>• unreasonable and unjustified withdrawal of services or supportive networks.</li> </ul>
<p><b>Financial or material abuse including:</b></p>	<ul style="list-style-type: none"> <li>• theft</li> <li>• fraud</li> <li>• internet scamming</li> <li>• coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions</li> <li>• the misuse or misappropriation of property, possessions or benefits</li> </ul>
<p><b>Modern slavery encompasses:</b></p>	<ul style="list-style-type: none"> <li>• slavery</li> <li>• human trafficking</li> <li>• forced labour and domestic servitude.</li> <li>• traffickers and slave masters using whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment</li> </ul>



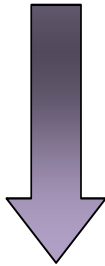



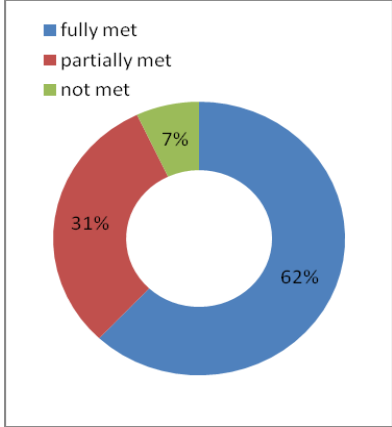

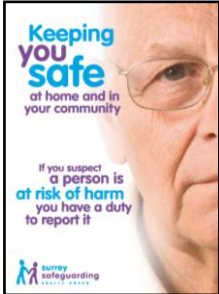


<p><b>Discriminatory abuse</b></p>	<p>including forms of:</p> <ul style="list-style-type: none"> <li>• harassment</li> <li>• slurs or similar treatment because of: race, gender and gender identity, age, disability, sexual orientation, religion.</li> </ul>
<p><b>Organisational abuse</b></p>	<p>Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.</p>
<p><b>Neglect and acts of omission including:</b></p>	<ul style="list-style-type: none"> <li>• ignoring medical</li> <li>• emotional or physical care needs</li> <li>• failure to provide access to appropriate health, care and support or educational services</li> <li>• the withholding of the necessities of life, such as medication, adequate nutrition and heating.</li> </ul>
<p><b>Self-neglect</b></p>	<p>This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.</p>

Keeping your  
**loved ones**  
**safe**  
 from abuse and neglect

Everyone deserves to be treated with care and respect. If you think someone is being abused report it now.  
 For further information visit  
[surreycc.gov.uk/protectingadults](http://surreycc.gov.uk/protectingadults)  
 Text 07527 182861



## A Snapshot of Safeguarding adults in Surrey

 <p>We received <b>7,561</b> concerns that an adult was experiencing or at risk of abuse or neglect</p>	 <p><b>1,144</b> safeguarding concerns required an enquiry to establish what had occurred</p>	<p>There were <b>422</b> fewer new safeguarding enquiries this year compared to last year</p> 								
 <p><b>47%</b> of safeguarding enquiries involved people had physical support needs</p>	<p><b>Safeguarding outcomes</b></p> <p><b>62%</b> said their desired outcomes were fully met  <b>31%</b> said they were partially met  <b>7%</b> said their desired outcomes had not been achieved</p>	 <p><b>43%</b> of enquiries related to neglect</p>								
<p><b>30%</b> of people who had a safeguarding enquiry lacked mental capacity</p> 	 <table border="1"> <caption>Safeguarding Outcomes</caption> <thead> <tr> <th>Outcome</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Fully met</td> <td>62%</td> </tr> <tr> <td>Partially met</td> <td>31%</td> </tr> <tr> <td>Not met</td> <td>7%</td> </tr> </tbody> </table>	Outcome	Percentage	Fully met	62%	Partially met	31%	Not met	7%	 <p><b>21%</b> of enquiries related to physical abuse</p>
Outcome	Percentage									
Fully met	62%									
Partially met	31%									
Not met	7%									
<p>There were <b>5,435</b> leaflets and other safeguarding publicity material distributed</p> 	 <p>We ran a radio advert to raise awareness of safeguarding on <b>3</b> main Surrey radio stations for <b>2</b> weeks</p>	<p>We completed <b>706</b> home fire safety checks for vulnerable adults.</p> 								

## What is a Safeguarding Adults Board

There has been a Safeguarding Adults Board in place in Surrey for over a decade. Until April 2015, it was a voluntary partnership where agencies came together to ensure vulnerable adults, who were at risk of harm, are kept safe. It ensures partners work together in a collaborative way, agreeing policies and procedures and undertaking activities to raise awareness of safeguarding.

In April 2015, the Care Act came into effect and this made it mandatory for all areas in England to have a Safeguarding Adults Board. The core objective of a Board is to reassure itself of the effectiveness of safeguarding in its area.

The Safeguarding Adults Board has 3 core duties to ensure it meets its objective. It must:

- publish a strategic plan for each financial year that sets how it will meet its main objective and what the members will do to achieve this. The plan must be developed with local community involvement, and the Safeguarding Adults Board must consult the local Healthwatch organisation. The plan should be evidence based and make use of all available evidence and intelligence from partners to form and develop its plan
- publish an annual report detailing what the Safeguarding Adults Board has done during the year to achieve its main objective and implement its strategic plan, and what each member has done to implement the strategy as well as detailing the findings of any safeguarding adults reviews and subsequent action
- conduct any safeguarding adults review in accordance with Section 44 of the Care Act.

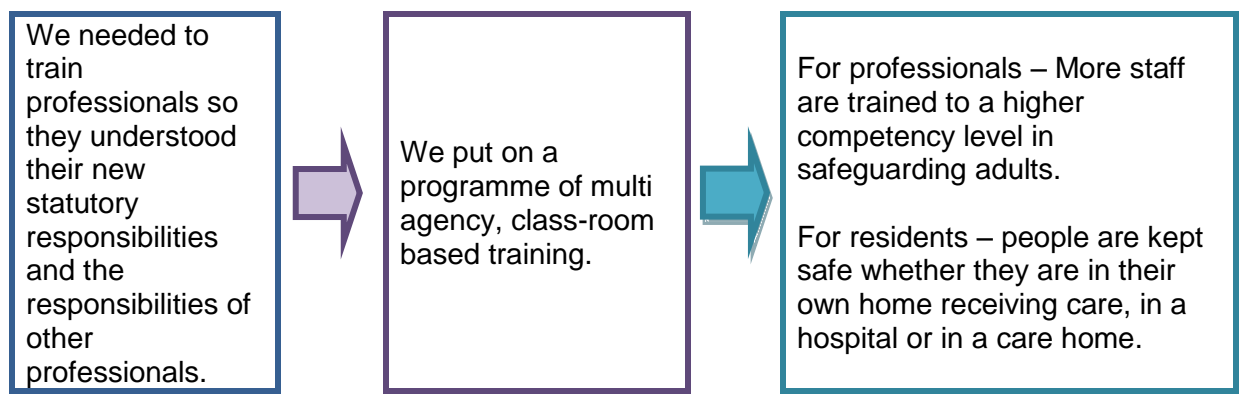
For more information on the Surrey Safeguarding Adults Board, please see Appendix A.

## How are people in Surrey safer?

The Surrey Safeguarding Adults Board undertook many activities during the year to ensure people in Surrey were protected from abuse and neglect. Below are some examples of the work we did.



- Examples:**
- Multi Agency Procedures – Sections 1 & 2
  - Self Neglect Policy



- Examples:**
- Making Safeguarding Personal
  - Managing Safely
  - Supporting the Process
  - Provider led Enquiries
  - Internal Management Reviews

### Why did we need to take action

We needed to learn lessons when adults have not been properly safeguarded so we can better protect adults at risk.



### What did we do

We completed a Serious Case Review (SCR) and implemented an Action Plan with relevant agencies. We published the Executive Summary to support other areas to learn lessons.

We looked at Safeguarding Adults Reviews and Serious Case Reviews from other areas to help us learn lessons.



### What difference have we made

For professionals – staff have been able to change practices to prevent abuse and neglect before it happens.

For residents – people are less likely to experience abuse or neglect.

#### Examples:

- Surrey SCR Mr J & Mr Y

- Camden SCR on self neglect

We needed to raise awareness of adult safeguarding so more people understood their responsibilities to raise a safeguarding concern when an adult at risk is abused or neglected



We built awareness of safeguarding to ensure concerns are raised appropriately. This was done through different mechanisms such as: radio, posters, newsletters



For professionals – staff are better informed of safeguarding news and changes in practices.

For residents – people know how to raise a safeguarding concern and professionals are working to keep them safe.

#### Examples:

- Radio adverts on 3 stations

- Posters at Surrey bus stops

- 4 Newsletters

**Why did we need to take action**

We needed to know what is working well and what needed to be improved when people have been safeguarded in Surrey



**What did we do**

We agreed a programme of quality assurance of safeguarding practice through examining past safeguarding case files.



**What difference have we made**

For professionals – when the audits are completed, staff will be able to learn what is working well and improve practices that could be better.  
  
For residents – people will be able to experience an improved safeguarding service.

**Example:**

- Case File audits

## Living in Surrey

Surrey has a total population of just over 1.1 million people and covers a large area (166,250 hectares). The population density of Surrey is greater than that in most parts of England. The proportion of households in Surrey which are owner occupied (78%) is greater than in the South East (74%) and England (69%)<sup>1</sup>. It is generally an affluent area with pockets of deprivation.

Information on the current and future health and social care needs of the community in Surrey are set out in the Joint Strategic Needs Assessment (JSNA). The JSNA is produced by Surrey County Council and the Clinical Commissioning Groups. The JSNA tells us:

- ❖ **Surrey people generally enjoy good health and wellbeing. They expect to live a long and healthy life. Life expectancy is high: 84 years for women and 81 years for men. That's almost two years longer than the average for England.**
- ❖ **Seven out of Surrey's eleven boroughs are in the highest ten nationally for the percentage of adults engaging in 'increasing risk' drinking of alcohol. This means that one in four adults drink above the daily recommended sensible drinking levels. Rates of alcohol-related hospital admissions have almost doubled since 2002.**
- ❖ **The number of people with conditions such as diabetes, Coronary Heart Disease and chronic obstructive pulmonary disease is expected to increase over the next five to ten years.**
- ❖ **In Surrey, an estimated 15,100 people have dementia: that's one in 15 people aged over 65. Fewer than half of them would have been diagnosed formally. Numbers are predicted to rise to 19,000 by 2020 and 25,000 by 2030.**

These statistics help us when we build our strategic plans as it gives context to ensuring our focus is in the right place. For example, raising awareness with agencies around the effective use of the Mental Capacity Act, ensuring carers voices are heard and responded to.

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<sup>1</sup> Information from Joint Strategic Needs Assessment - <https://www.surreyi.gov.uk/>



There are an estimated 65,800 people over 65 years, living alone in Surrey. Other key data on the population of Surrey:

Age of population	England	Surrey
Age 18-24	9.4%	8.7%
Age 18-64	62.3%	61.3%
Age 65+	16.3%	17.2%
Age 85+	2.2%	2.5%
<b>Disability</b>		
All people with day to day activities limited by long term illness or disability	17.6%	15.7%
People with day to day activities limited a lot by long term illness or disability	8.3%	6.9%
<b>Carers</b>		
All people providing unpaid care	10.2%	9.8%
People providing 1-19 hours of unpaid care per week	6.5%	6.7%
People providing 20-49 hours of unpaid care per week	1.4%	1.1%
People providing 50 hours or more of unpaid care per week	2.4%	2.0%
<b>Health and Well-being</b>		
People with bad or very bad health	4.2%	3.4%
<b>Ethnicity</b>		
Selected ethnic groups: White British	79.8%	85.2%
Selected ethnic groups: All other white ethnicities	5.7%	5.4%
Selected ethnic groups: All mixed/multiple ethnicities	2.3%	1.9%
Selected ethnic groups: All black/african/caribbean/black british	3.5%	1.6%
Selected ethnic groups: Asian/Asian British: Indian	2.6%	1.8%
Selected ethnic groups: Asian/Asian British: Pakistani	2.1%	1.1%
All non-white ethnic groups	14.6%	9.3%
All non white British ethnic groups	20.2%	14.8%

The population statistics help us when we are interpreting data, for example, looking at our age profiles especially over 65 it tells us that the number of concerns raised with this age group were over 65% but that would be expected that this group would be more at risk to have care and support needs and be at risk of abuse and neglect therefore more concerns raised.

## Impact of the Care Act

At the beginning of this reporting year, the Care Act became law. There were many positive consequences from this. Safeguarding Adults Boards became statutory and adults at risk of abuse and neglect received the same protection in all parts of England. A new definition was introduced to describe when adults need to be protected from abuse or neglect. Previously, safeguarding was applied to all adults who were considered 'vulnerable' without considering their ability to protect themselves. The new definition is an adult who has care and support needs and because of those needs are unable to protect themselves from abuse / neglect or the risk of it. This new definition is helpful in that adults only receive safeguarding intervention when they are unable to stay safe without activity from agencies.

In recent years, there has been increasing focus on ensuring safeguarding achieves what the person wants from the process and not what professionals want. This means the safeguarding actions will be different depending on who the person is and what outcome they want to achieve. Sometimes the person will want a robust response to the harm, whereas other times the person will want less or sometimes no intervention. This is called 'making safeguarding personal'. The Care Act has introduced a new requirement on Adult Social Care to ensure their safeguarding activities are targeted towards achieving this.

Often when changes are introduced, there are extra pressures placed on agencies and this has been no exception. Board members have worked to respond to these pressures, in particular, by training staff, ensuring vacancies are filled as quickly as possible, changing procedures and participating in multi agency activities to work better together.

Board members agreed a more robust framework for reporting in to the Board and being held accountable for the way they safeguarding adults. They agreed to a Constitution that sets out responsibilities, a process of providing reports on their own agencies each quarter, a set of data that will give the Board information on safeguarding trends and to participate in a development day to identify future priorities. This has supported members to fulfil their obligations to safeguard adults in a strategic way that is visible to partners on the Board.

The Act has had more impact on Adult Social Care than other agencies because they have the lead responsibility in responding to safeguarding concerns and conducting (or ensuring another agency conducts) a safeguarding enquiry. The IT system that is used by Social Workers in Adult Social Care was installed long before the Care Act came into effect and not suitable for the new requirements. For this reason Adult Social Care decided a new system would be introduced. This work has been done throughout the reporting year, with staff being trained, records prepared for electronic transfer to the new system and the new system adapted to ensure it

meets the needs of users. However, the new system will not be fully operational until autumn 2016 and this has had an impact on the Board's effectiveness, for example, in relation to the availability of timely data on safeguarding. There is more detail on this later in this report and what will be in place when the new IT system is introduced.

## Safeguarding adults in Surrey - what the data tells us

### Definitions

The following words are used to describe different types of safeguarding activity. Knowing what these mean, helps to understand the information that is available:

**Safeguarding Concern** - This is when a concern is raised where an adult at risk may have been, is, or might be, a victim of abuse. This is normally the first contact between the person raising the concern and the council about the alleged abuse. For example, if an individual phoned a council and expressed a concern that their elderly neighbour was being physically abused, this would be counted as a concern.

**Safeguarding Enquiry** - A safeguarding enquiry is where a concern is assessed by the council as meeting the local safeguarding threshold and a full safeguarding investigation is deemed necessary.

### Brief guide to what happens when someone raises a safeguarding concern with Adult Social Care

Anyone can make a safeguarding concern by contacting Adult Social Care and saying they are concerned an adult at risk is experiencing abuse or neglect

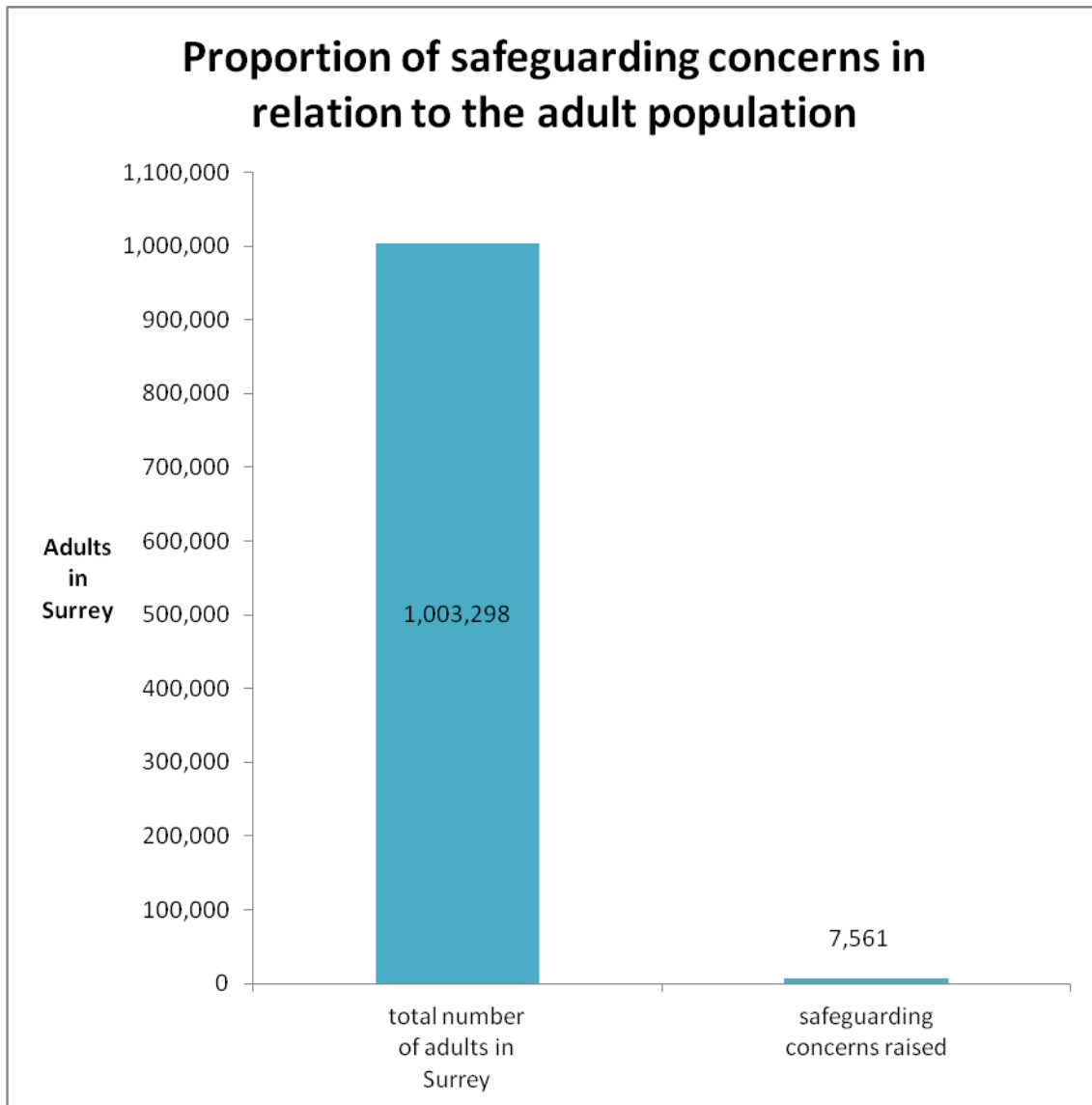


A safeguarding advisor in Adult Social Care ensures the person is safe, they gather information and decide if there has been abuse or neglect.

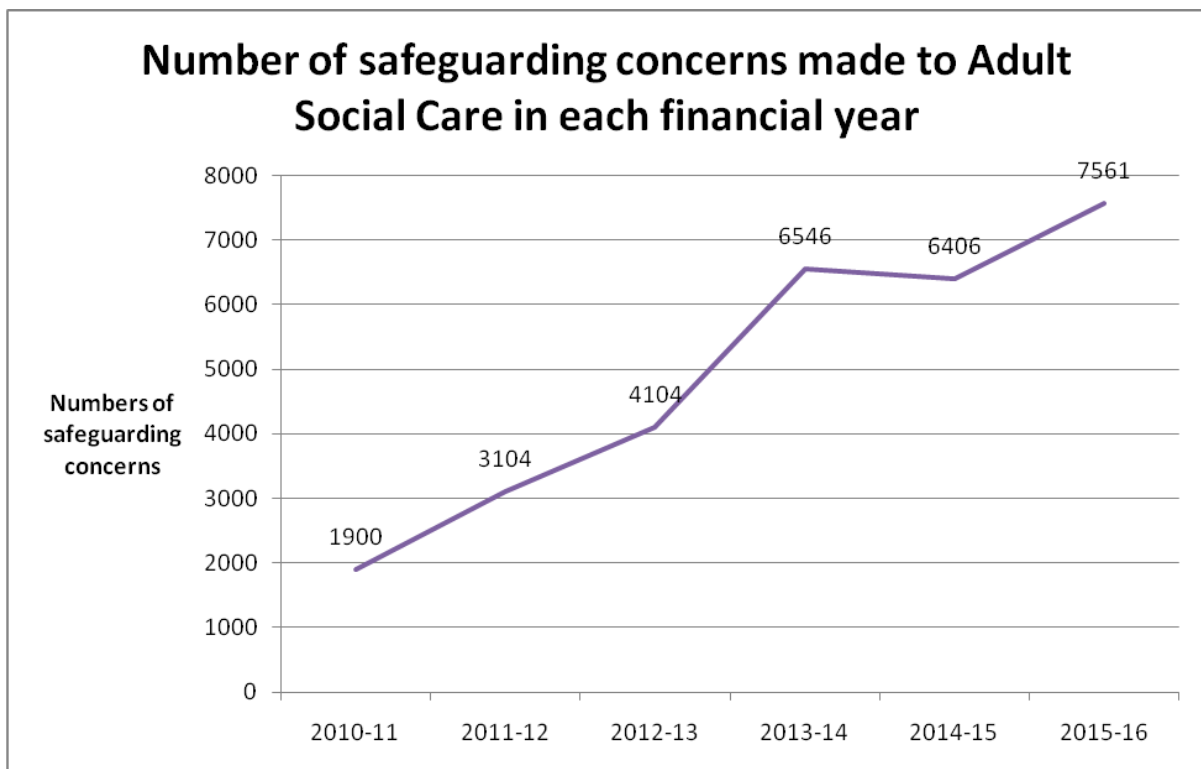


If there has been abuse or neglect, they start a safeguarding enquiry, as set out in Section 42 of the Care Act. The adult who has experienced abuse or neglect is involved in the process throughout.

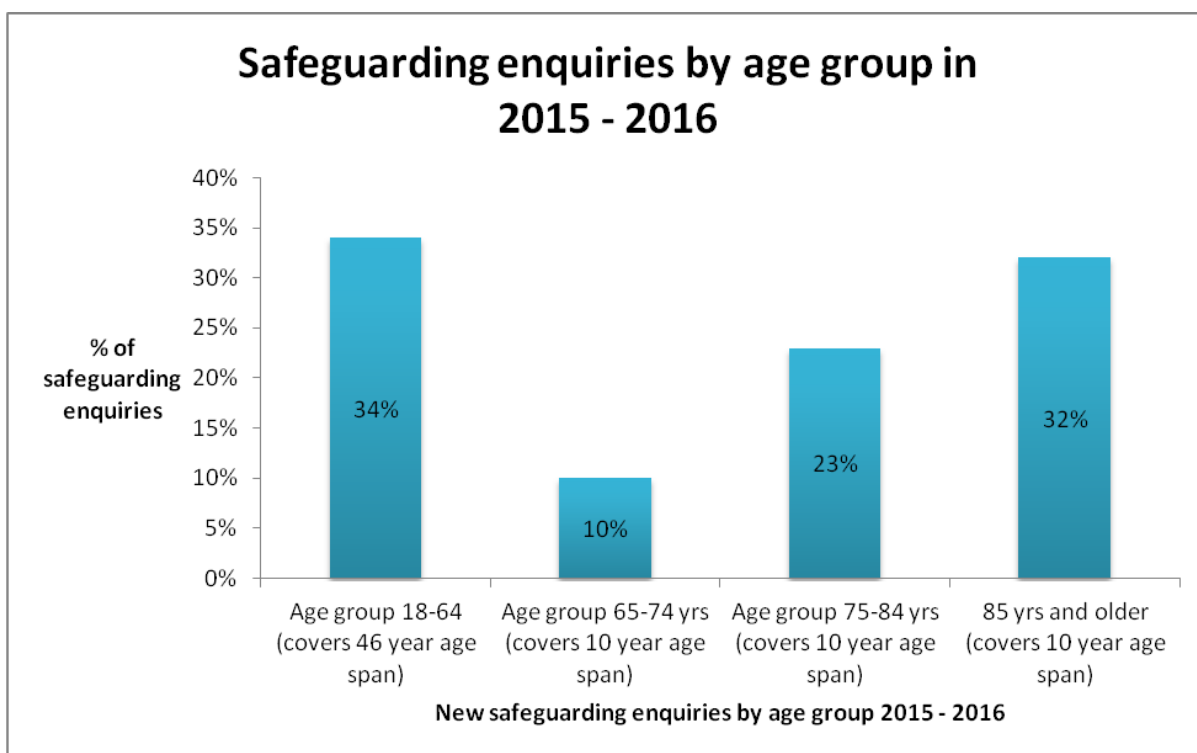
In 2015 – 2016 there were 7,561 safeguarding concerns made to Adult Social Care where someone thought an adult at risk may be being abused or neglected. That is just 0.75% of the total adult population. This tells us that Surrey is a very safe place for people to live. Please see chart below that illustrates this.



Over the last few years, there has been an increase in the number of times safeguarding concerns have been raised to Adult Social Care. This is shown in the graph below. The exact cause of the increasing number of reported concerns is not exactly known, however, there has been a significant investment in increasing awareness of the importance of safeguarding adults. This was expected to lead to an increasing knowledge of the need to report suspected abuse or neglect. It reflects a willingness to report concerns which is good, but it does also reflect the pressure this puts on services to respond to the larger demand at times of increased pressure on budgets.

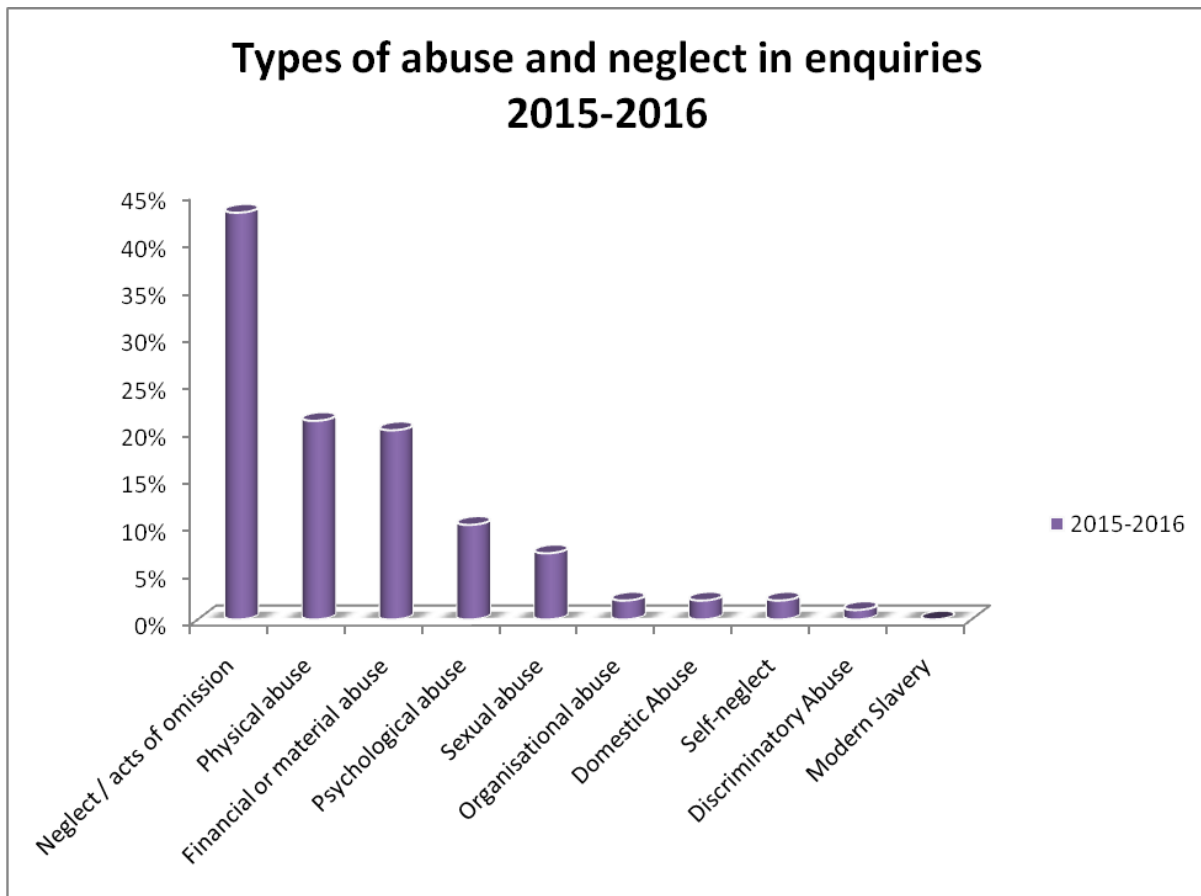


Data from Adult Social Care tells us that more safeguarding enquiries are made in relation to older adults than in relation to younger adults. More than half of all safeguarding enquiries in Surrey are for people over the age of 75 years. This is not surprising as the definition of an adult at risk of abuse or neglect is someone who is unable to protect themselves from harm because they have care and support needs. The older a person is, the more likely they are to have care and support needs and this may make it difficult for them to protect themselves. The safeguarding enquiries for each age group are shown on the chart below.



<b>New safeguarding enquiries in 2015-2016 for different age groups</b>				
	18-64 yrs	65-74 yrs	75-84 yrs	85+ yrs
2015 -2016	34%	10%	23%	32%

When an adult needs to be safeguarded, the type of harm they are most likely to have experienced is neglect. Of all the safeguarding enquiries in Surrey in 2015 – 2016, 43% were for neglect. In fact, neglect has been the most frequently reported type of abuse for the last 3 years. Physical abuse and financial abuse each account for about 20% of reported harm. The other types of abuse and neglect are much less frequently reported. This is illustrated in the chart below.



Type of abuse or neglect	Percentage of total enquiries
Neglect and acts of omission	43%
Physical abuse	21%
Financial or material abuse	20%
Psychological abuse	10%
Sexual abuse	7%
Organisational abuse	2%
Domestic Abuse	2%
Self-neglect	2%
Discriminatory Abuse	1%
Modern Slavery	0



## Data being developed

Agencies on the Safeguarding Adults Board have been working throughout the year to identify further sources of data that will support the Board to have a full picture of adult safeguarding. The Board's ambition is to do more than just copy existing data sets from individual agencies. Existing data sets from individual agencies have been developed for purposes other than supporting safeguarding activity and can be difficult to interpret and therefore unhelpful. Board members are working to create a tailored performance framework that enables members to identify and respond to trends. This will enable the Board to further improve targeted activity to address concerns.

The development of this data framework is being taken forward in the next reporting year. In particular, there is focussed work planned with the police in relation to adults at risk who are victims of crime or who come into contact with criminal justice agencies. In addition, health agencies are working together to produce a comprehensive safeguarding 'dashboard' that will provide information in a simple format that demonstrates both long term trends and short term changes in activity.



Image of 'Keeping you safe' poster at a Surrey bus stop. This is part of the raising awareness campaign undertaken by the Adult Social Care Communications team.

## What has SSAB the done to deliver the Annual Plan

At the start of the reporting year, Board members agreed a set of priorities to be taken forward in the next 12 months. Board members identified actions to ensure those priorities were met, put those actions into a plan and the Action Plan was then implemented and monitored. The Action Plan was made public on the Board's webpages in easy read format together with a more detailed version suitable for professionals who work in safeguarding.

<b>Priorities for Surrey Safeguarding Adults Board 2015 - 2016</b>
1 Achieving good outcomes for adults at risk and carers
2 Responding to reported abuse
3 Leadership
4 Safeguarding Adults Board
5 Safeguarding Adults Reviews and Reviews undertaken by other Boards and Partnerships
6 Making Safeguarding Personal
7 A Competent workforce

The following actions were successfully completed:

<b>Action</b>	<b>How this has protected adults from abuse and neglect</b>
The Board has implemented a new constitution, has reported on the Board's activities in its Annual Report and published its Annual Plan for the following year. (Actions 1 & 3)	These actions have improved the accountability of Board members for delivering safeguarding. Surrey residents can be assured that actions are being taken to safeguard adults at risk of abuse and neglect and can see whether those actions have been delivered. Residents can see how agencies in Surrey are working together to ensure adults are safeguarded and can see they will be kept safe in all health and social care settings.

Action	How this has protected adults from abuse and neglect
<p>Safeguarding materials such as leaflets and posters were made available to residents in a wide range of settings. The Adult Social Care Communications team led on a public campaign to raise awareness of how to contact Adult Social Care if there is a safeguarding concern. This is set out in detail in the relevant Appendix. The Board's website was revised to make it easier for residents and professionals to find the information they need and to make the pages more attractive so people are more likely to access information. (Action 9)</p>	<p>More residents will be aware that abuse or neglect of vulnerable adults is unacceptable and must be responded to. They will know what types of behaviour is abuse or neglect and will know how to contact Adult Social Care. This will help ensure that when someone is experiencing abuse or neglect someone will respond to put a stop to the abuse.</p>
<p>Board members have worked to raise awareness of adult safeguarding with residents who fund their own care directly (without support from Adult Social Care) and with residents who may be harder to reach. (Action 10)</p>	<p>Activities have included attending the Surrey Heath Muslim Association annual family day and working with the Surrey Minority Ethnic Forum to support their safeguarding training programme for minority groups. The Board has ensured information is available in easily accessible formats including other languages. These activities have complemented other activities such as the media campaign delivered by the Adult Social Care Communications team and the improvements to the Board's webpages. This has helped spread knowledge of safeguarding to people who may not access information through other methods.</p>

Action	How this has protected adults from abuse and neglect
<p>Board members have adopted a culture of learning from other reviews including Domestic Homicide Reviews, children's Serious Case Reviews and national reports. Board members have looked at the recommendations from reviews and reports from other areas. Members have considered whether those recommendations are relevant to the way services are delivered in Surrey and where appropriate have amended the way we do things.</p> <p>An example is from the Serious Case Review of JR that was undertaken in West Mercia. Board members reviewed this at their meeting in January and were reminded of the importance of sharing information across both children's and adult's services as well as across agencies.</p> <p>(Action 11)</p>	<p>By learning lessons from other areas, Board members are able to respond and prevent similar abuse and neglect happening here. Prevention of abuse and neglect is a key principle of adult safeguarding.</p>
<p>Board members reviewed the effectiveness of the Board's multi-agency Training Programme 2014-15 and prepared the Programme for 2015-16. This included setting up new courses in response to the Care Act and on how to respond to when people are experiencing self-neglect. The Board introduced an assessment process to better measure the quality of the course. In addition, people have been asked after attending training courses to identify how they have implemented what they learned.</p> <p>(Action 13)</p>	<p>By having an effective training programme in place, the Board is able to support agencies to further develop their workforce.</p>

Action	How this has protected adults from abuse and neglect
<p>Board members have considered how they can better share information and have raised awareness of how information can be shared securely and safely. Activities have included examining cases where information sharing has been less than effective and seeing how it could be improved. Members identified a need for brief information to be available covering the Care Act duties in relation to working together to safeguard adults and this was prepared, circulated and published on the webpages. (Action 14)</p>	<p>By working together and sharing information, agencies are able to make a full assessment of an adults risk of abuse or neglect and to respond to those risks effectively.</p>
<p>Board members agreed to ensure the voices of carers and adults at risk are heard by the Board. Representatives from the voluntary sector are present and involved in every Board meeting. They attend the relevant sub-groups and Board events. All new and revised policies are shared with the representatives at draft stage to ensure they can be amended, if required to take into account more fully the needs of carers and adults at risk. (Action 16)</p>	<p>Professionals who implement the Boards policies are better able to meet the needs of carers and adults at risk.</p>
<p>The Mental Capacity Act and the Deprivation of Liberty Safeguards legislation are a complex area of law that Board members wanted to understand and implement better. They held a well attended event with key note speakers who were specialists in this area of the law. (Action 17)</p>	<p>Professionals working in Surrey have improved understanding of how to apply the requirements and this will support residents who require protection have relevant health needs.</p>

The following actions were started in the reporting year but were not fully completed:

Action	Impact and activities that will be undertaken in the next year
<p>The Board began the implementation of a new Performance Framework for including data collection from statutory agencies and reporting from all sub-groups. This was the first time the Board was receiving information from many agencies which would enable members to understand and respond to emerging trends.</p> <p>Whilst much work was done to put this in place, there were several challenges. Adult Social Care were unable to provide detailed data during this period due to their IT system not being able to produce relevant reports. Detailed data was subsequently provided in July 2016, however, this was too late to inform the Annual Plan for that year. Some other agencies experienced difficulties in producing data. In addition, some agencies did not provide progress reports at each quarter. Furthermore, the Board were expecting to have a Quality Assurance Manager in post from the beginning of the year but this position was not successfully filled until the following year.</p> <p>(Action 2)</p>	<p>The Board made some progress in 2015 – 2016, however, the Board did not receive all the information that was expected.</p> <p>Adult Social Care is implementing a new IT system that will be used autumn 2016 onwards. When this in place it will enable the Board to better fulfil its responsibilities to understand safeguarding in its area and respond to issues and trends that are identified.</p> <p>The Board has successfully recruited a Quality Assurance Manager. This Manager will provide added resource to ensure relevant data is collected and will present it to each Board meeting.</p> <p>There remain some challenges for a few agencies, chiefly those that work on or near the County borders. These agencies have identified the duplication in the number of reports they have to produce as they report to several different Boards, Groups and public bodies. To support them, the Surrey Safeguarding Adults Board has agreed flexibility in what can be provided and is working with Boards/Groups/Public Bodies in other areas to see if a consistent approach can be agreed.</p>

Action	Impact and activities that will be undertaken in the next year
<p>Board members determined at the beginning of the year to have fully implemented all aspects of the Care Act relevant to safeguarding. Substantial progress was made, however, the Board cannot at this time be assured all agencies in Surrey are fully compliant at all times. It should be noted that the Care Act was a huge change in the way abuse and neglect is responded to and contains a great many requirements on agencies. This does not mean adults are not being protected from abuse and neglect. It means the Board has not received evidence that satisfies it every agency is compliant with the legislation. It should also be noted that in March 2016 the Department of Health revised the Care Act guidance. This included removing the requirement for each agency to have a Designated Adult Safeguarding Manager but to instead have a named person with the lead on adult safeguarding. The revisions included new details on financial abuse and revised some of the existing requirements.</p> <p>(Action 4)</p>	<p>There is no evidence that this has impacted on how well residents in Surrey are protected from abuse and neglect.</p> <p>However, with the social care IT system, a full time Quality Assurance resource and better understanding of the Care Act by agencies the Board is confident that it will be able to better evidence compliance.</p>
<p>Board members agreed to undertake a self-assessment of their safeguarding. A template was agreed that was based on one already used by health agencies. A timeline was in place for these to be undertaken and sent to the Board. Most agencies on the Board completed the self assessment within the agreed period. These showed a careful and thorough analysis of how effective their safeguarding is. However, not all agencies completed the self-assessment and a couple did not demonstrate a sufficiently thorough assessment.</p> <p>(Action 5)</p>	<p>There is no evidence that this has impacted on how well residents in Surrey are protected from abuse and neglect</p> <p>This coming year the Board will be assured that agencies are monitoring and responding to their own safeguarding activities, where self-assessments are not effectively undertaken the Board will via audits of the agencies concerned ensure themselves that the standards expected are evidence and met .</p>



Action	Impact and activities that will be undertaken in the next year
<p>All Board agencies and services they have commissioned abide by the agreed Multi Agency Procedures. These Procedures were initially written before the Care Act came in therefore they needed to be fully revised to ensure they were compliant with the new legislation. Initially, the Board had a multi-agency task and finish group established specifically to re-write the Multi Agency Procedures. In January 2015, Adult Social Care requested this multi agency group was disbanded as they wished to re-write the procedures on their own. This was in recognition of their leading role on safeguarding. The Board agreed to this with an implementation date of end of April 2015 for all 3 new sections. The implementation date was not achieved. A first section was completed by end of April 2015, however, it was not until later in the year that another section was completed. There remained 1 section outstanding at the end of this reporting period therefore the revision has not been completed in this reporting period. (Action 6)</p>	<p>This delay has required remedial action to be undertaken. At the end of this reporting year discussions were taking place to resolve the issues and finalise the procedures. It can be reported that the final section was completed, signed off by the Board and made available on the website in the current year.</p>
<p>Board members made a commitment to review the impact of personalisation on Adult Safeguarding and to ensure processes support this programme. To have achieved this, Adult Social Care would need to provide the Board with evidence adults involved in safeguarding were always asked what outcomes they would like and it would be expected in most cases to meet those outcomes. However, the limitations of the current IT system used by Adult Social Care means that assurance can not be provided outcomes are being met. (Action 12)</p>	<p>It is essential that safeguarding activity supports the outcome that the adult wants. Without evidence this is being achieved, the agencies do not know whether safeguarding activity is improving people's lives.</p> <p>Adult Social Care have informed the Board that it's new IT system will enable this information to be gathered and shared with the Board in a timely fashion. This will come into effect from September 2016 onwards.</p>

The following actions were not started as planned and they require remedial action in the next year:

Action	Impact and activities that will be undertaken in the next year
<p>Board members agreed there should be a review of safeguarding process following the implementation of the Care Act. This was to review the safeguarding process from the point of view of:</p> <ul style="list-style-type: none"> <li>i) the adults at risk</li> <li>ii) the carer</li> <li>iii) the referrer</li> </ul> <p>To consider communication, response times outcomes and the extent to which the adult at risk, carer and referrer were the centre of the process.</p> <p>It has not been possible to undertake this review due to a number of reasons. The fact that the Multi Agency Procedures were not completed during this reporting period meant it was not feasible to assess how well they were being implemented. In addition, the Adult Social Care IT system was not set up to provide information on outcomes. At the same time, the way safeguarding is responded to is changing as Surrey implements a Multi Agency Safeguarding Hub (known as the MASH). There is more information on the MASH later in this report. (Action 7)</p>	<p>The impact of this action not being achieved is there is a lack of information on what is working well and what could be done better. This is particularly looking at how the safeguarding pathway works for the adult at risk, carers and the person who raised the safeguarding concern.</p> <p>Action has been identified for the following year that is set out in the action below on the auditing of some of Adult Social Care's safeguarding case files.</p>

Action	Impact and activities that will be undertaken in the next year
<p>Board members agreed to undertake a review safeguarding case files. These were to share the learning from these with the Board to ensure the Board's vision is reflected in the adult at risk's experience of the safeguarding process. It was expected to focus on the multi-agency aspect of safeguarding, looking particularly at the way agencies engage with each other to safeguard adults at risk.</p> <p>It has not been possible to undertake this action. Adult Social Care have been involved in changing their practices to integrate with the Multi Agency Safeguarding Hub (MASH). This has taken longer than expected due to a number of factors such as challenges in recruiting to vacancies and the MASH being programme developing mid-year. Adult Social Care therefore reported to the Board that the safeguarding case file audit could not be done. (Action 8)</p>	<p>Without this work being completed, the Board is not fully informed as to whether its strategy and vision are aligned with agencies operational work.</p> <p>The following activities are taking place in the next reporting year to address these issues.</p> <p>The Board has appointed an external auditor with significant experience of safeguarding policies and processes to undertake an audit of safeguarding cases. This will enable the audit to be undertaken robustly and without withdrawing any Adult Social Care staff from operational duties</p> <p>The Board will receive regular updates on developments of the MASH in Surrey. This will enable the Board to be involved and to respond to changes in the way safeguarding is responded to.</p>
<p>Board members agreed that they should be assured of the effectiveness of multi-agency discharge planning for adults at risk leaving hospital. This followed the Rapid Improvement Event work led by Adult Social Care.</p> <p>Board members were informed that Adult Social Care had set up an on-going project in relation to hospital discharge and Adult Social Care agreed to submit a progress report. However, the report was not received during this reporting period. (Action 15)</p>	<p>There have been challenges in progressing this action as far as the Board would want. The Board will be undertaking further activities in the next reporting year to progress this action.</p>

## What has each sub-group of the Safeguarding Adults Board has done

The Board has 5 sub-groups that each work on a particular theme to support the Board. The information below sets out the key achievements and issues for each sub-group during the year, except for the Safeguarding Adults Review group whose activities are set out in a later section.

### Quality Assurance and Audit (QA&A) Group

Chaired by Surrey Downs Clinical Commissioning Group this group assists the Surrey Safeguarding Adults Board with developing, promoting and ensuring good quality safeguarding practice. This year they have:

- Revised reporting template for agencies to the Board and agree to report QA&A to the board.
- Undertaken a brief audit of providers and referrers on their experience of the safeguarding feedback process.

**Key challenges:** It remains challenging for some agencies to send a representative the group. The Surrey Safeguarding Adults Board had a post for a Quality Assurance Manager, however, this vacancy was not filled within the year and this impacted on the group's work. This concern has been addressed in this current operational year

### Training Group

Chaired by one of the acute hospital trusts, this group develop, implement, review and update the multi-agency training strategy for the protection of adults at risk and monitors, assesses and evaluates the uptake and impact of safeguarding training across Surrey and to ensure ongoing quality assurance. Activities they have undertaken this year include::

- Undertaken observation and quality assurance to ensure the training meets the required standards.
- Ensured a range of courses are offered that meet the needs of the Care Act and agency needs

**Key challenges:** It remains challenging for some agencies to send a representative the group. The group aspired to put on a conference for senior representatives of statutory organisations, however, this could not be achieved within the year due to non-availability of key note speakers. Action has been taken to remind partner agencies of their commitment via their signing the constitution and that Senior leaders in the organisations concerned have been tasked with resolving this issue.

### Policy and Procedures Group

Chaired by Adult Social Care, this group reviews the Multi-Agency Procedures and other Protocols, Guidance and Procedures and updates as appropriate. Activities they have undertaken this year include::

- Produced a new first section to the Multi Agency Procedures.
- Revised the Key Safe Protocol that supports agencies to safely share the numbers to key safes for vulnerable adults.

**Key challenges:** The delays in revising the Multi Agency Procedures has meant the group spent longer focusing on this work than expected. This caused other areas of work to be delayed. This is being addressed in the new operating year

### Health Group

Chaired by Surrey Downs Clinical Commissioning Group, this group ensures there is shared understanding and interpretation of current national and local guidance between all health organisations. It monitors safeguarding adult processes to ensure optimal performance and outcomes for adults, including processes around the Mental Capacity Act, Deprivation of Liberty Safeguards and PREVENT (the government programme to prevent radicalisation). Activities they have undertaken this year include:

- Established this new group and worked collaboratively with colleagues who are safeguarding children.
- Provided an opportunity to discuss safeguarding issues as they impact on families instead of separating issues into children and adults.
- Obtained funding to support the Mental Capacity Act seminar
- Fed back on health audits on Safeguarding

**Key challenges:** At times it has been challenging to manage the meetings that are held jointly with adults and children to facilitate better use of time for all members . However because the children's safeguarding agenda is so large this meant that the adults agenda was sometimes reduced. Actions have been taken to remedy this

In addition to the above sub-groups, the Surrey Safeguarding Adults Board has 5 local groups that are aligned as far as possible with Clinical Commissioning Groups and Adult Social Care Locality teams.

- South West Surrey Safeguarding Adults Group – includes the area covered by Guildford and Waverley Clinical Commissioning Group and the Adult Social Care locality teams in Guildford and Waverley.
- North West Safeguarding Adults Group – includes the area covered by North West Surrey Clinical Commissioning Group and the Adult Social Care locality teams in Woking, Runnymede, Spelthorne and Elmbridge.
- Surrey Heath Safeguarding Adults Group – covers the area covered by Surrey Heath Clinical Commissioning Group and the Surrey Heath Adult Social Care locality team.
- Mid Surrey Safeguarding Adults Group – includes the area covered by Surrey Downs Clinical Commissioning Group and the Adult Social Care locality teams in Mole Valley, Banstead, Epsom and Ewell and in Elmbridge.
- East Surrey Safeguarding Adults Group – includes the area covered by East Surrey Clinical Commissioning Group and the Adult Social Care locality teams in Tandridge and in Reigate and Banstead.

These groups meet quarterly and provide a forum for each locality to discuss safeguarding issues, share information on effective practice, learn about new guidance and policies. They are able to report into the main Board any issues they want the Board to take action on or respond to. Representation on these groups comes from a wide range of organisations working with adults at risk of abuse and neglect, for example, voluntary sector, housing and advocacy services. The chair for each of the groups is either the Adults Social Care Area Director or a senior representative from the Clinical Commissioning Group.

One achievement for each of the groups is below as an example of their activity:

<p style="text-align: center;"><b>South West Surrey</b></p> <p>This group had focused discussions on how the Care Act requires changes in practices and procedures. They have looked at the learning from national Serious Case Reviews and reports to improve practice locally.</p>	<p style="text-align: center;"><b>North West Surrey</b></p> <p>This group has shared the key learning from the Surrey Serious Case Reviews. They identified several had recommendations relating to agencies needing to improve information sharing and as a result the group has held a meeting looking closely at the enablers and barriers to effective information sharing.</p>
<p style="text-align: center;"><b>Surrey Heath</b></p> <p>This is a new group that formed so there could be a focus on adult safeguarding in this area that is the first area to introduce integrated care. They have agreed their Terms of Reference and membership.</p>	<p style="text-align: center;"><b>Mid Surrey</b></p> <p>The group looked in detail at the Care Act, discussed implications of the changes and agreed to cascade the briefing sheet on key new requirements.</p>
<p style="text-align: center;"><b>East Surrey</b></p> <p>The group met in December and shared the learning from the Camden Serious Case Review of ZZ, they updated their work plan and heard detail on how Surrey and Sussex Hospital Trust are responding to the requirements in the Mental Capacity Act</p>	

## Safeguarding Adults Reviews and Serious Case Reviews

It is a statutory requirement under the Care Act that Safeguarding Adults Boards undertake a Safeguarding Adult Review in the following circumstances:

- when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult.
- if an adult in its area has not died, but the Safeguarding Adults Board knows or suspects that the adult has experienced serious abuse or neglect.

There are three purposes to be fulfilled by the Safeguarding Adults Review, namely, to establish whether there are lessons to be learned about the way in which professionals and agencies work together to safeguard adults with needs for care and support; to establish what those lessons are, how they will be acted upon and what is expected to change as a result and to improve inter-agency working and better safeguarding of adults at risk including the review of procedures where there may have been failures.

Prior to the Act coming in, Surrey agencies had voluntarily agreed to undertake reviews which at that time were called Serious Case Reviews. The 2 types of review are very similar. There has therefore been a seamless transition in Surrey between the two processes.

When a professional or a resident has a concern that an adult has experienced abuse or neglect and they believe the above circumstances may apply, they can notify the Surrey Safeguarding Adults Board and ask them to consider undertaking a Safeguarding Adults Review. Below is a summary of the notifications sent to the Board during this reporting year, together with the reason why these cases were not subject of a Review.

1 notification related to an adult who had died in a house fire. The circumstances had been subject of a detailed review by the Fire Service and the Safeguarding Adults Board decided there would be no further learning to be achieved through a Safeguarding Adults Review. The representative from Surrey Fire and Rescue Service presented the findings and recommendations of their review to the Board so it could be cascaded to all member agencies.

1 notification related to an older man with deteriorating health. He had been discharged from hospital to a care home, however, he subsequently had to return to hospital after having a fall. The Safeguarding Adults Board were made aware Adult Social Care were conducting their own review of this case therefore it was agreed



the learning from that should come back to the Board and a Safeguarding Adults Review was not required at this time.

3 notifications were received where the information showed there may have been failings by a single agency, however, there was nothing to suggest there were failings in the way agencies worked together. For this reason, the Safeguarding Adults Board decided not to conduct a review.

2 notifications were received relating to circumstances when an adult had died. However, in those cases, whilst the deaths had been unexpected, there was no evidence of abuse or neglect that led to the harm experienced by the adult therefore a Safeguarding Adults Review was not required.

### **Serious Case Review 'Mr J and Mr Y'**

In early 2014, the Board started a Serious Case Review into the circumstances leading to the death of a man who was assaulted by another resident in a care home. The reason for doing the review was that this involved 2 adults, both of them being adults at risk of abuse and neglect therefore the Board wanted to know what could be done to prevent tragic incidents like this in the future. This review was finalised in January 2016. The Executive Summary of this review has been published on the Safeguarding Adults Board webpages.

This review took longer to complete than expected and the Safeguarding Adults Board has learned lessons and implemented new processes to avoid such delays in the future.

Recommendations on how agencies could improve related to:

- Risk assessments – ensure they include potential risks to others as well as to the vulnerable adults.
- Access to mental health assessments – ensuring all staff know how these can be arranged.
- Caring for residents who are being nursed in the same area as those who are able to move around – consider whether they should reside in different areas of the accommodation.
- Discharge from hospitals – ensure a summary of care plans includes any episode of violence or threatening behaviour.
- Safeguarding meetings – ensure that where a serious safeguarding incident involves both a victim and a potential perpetrator who are both adults-at-risk, their issues are to be addressed through separate safeguarding meetings

For more details on this Serious Case Review, please see the Surrey Safeguarding Adults Board webpages at: <http://www.surreycc.gov.uk/safeguarding-adults-serious-case-reviews>

## Funding and Expenditure

The estimated running costs of the Safeguarding Adults Board are £290,000 per year. This includes staffing costs, the costs of an independent chair, any Safeguarding Adults Reviews and training / events. This was the first year the Safeguarding Adults Board had a pooled partnership budget in place. Agencies agreed to contribute in similar proportions to those made to the Safeguarding Children's Board. This marked a significant commitment on the part of partners to work together and jointly take responsibility for decision making and running the Safeguarding Adults Board.

The chart below shows the financial commitment each agency signed up to:

Organisation	Contribution £	Percentage of total
Clinical Commissioning Groups (split between 5 groups)	£117,450	40.5%
Adult Social Care	£117,450	40.5%
Surrey Police	£29,000	10%
NHS Trusts (split between 8)	£14,500	5%
Districts & Boroughs (split between 11)	£11,605	4%
<b>TOTAL</b>	<b>£290,005</b>	

The expenditure of the Safeguarding Adults Board was less than anticipated. This was due to a number of factors:

- Staffing – it was planned to have 3 members of staff in place from April 2015. These included 2 new posts for a Board Manager and a Quality Assurance Manager plus 1 existing post for an administrator. There were difficulties in the recruitment process which led to the Board Manager being in post from mid December 2015 and the Quality Assurance Manager was in post until the next financial year.
- Safeguarding Adults Reviews – it is not possible to know in advance how many, if any, will be undertaken in a year. There are costs involved in a Review because the Safeguarding Adults Board appoints and pays for an independent author for the reports. In this year, no Reviews were started therefore these costs were not spent.

- Training – the Safeguarding Adults Board sets aside £30,000 each year to support a programme of multi-agency, classroom based training. The training is provided free to any agency that pays into the pooled budget although a £12 administration charge is applied. Any other agency pays to attend the courses. This year there was an underspend on the budget as some courses had to be cancelled when insufficient delegates had signed up. Existing delegates would be moved to the next available course when there were greater numbers attending. The cancellation of courses resulted in some funds being unspent.

The funds in the pooled partnership budget that were not spent, have been carried forward to the next year. Agencies that contribute to the budget will therefore be paying a smaller amount in 2016 – 2017.

## Safeguarding Adults Board priorities next year

Board members attended 2 events at the end of the reporting period to set the priorities for 2016 - 2017. A new Annual Plan has been devised and is publically available on the Board's webpages. The actions aim to deliver the agreed strategic priorities which are:

- 1) Communications
- 2) Training
- 3) To embrace a culture of learning
- 4) Highlighting types of abuse and neglect that are frequently hidden from professionals or are hard to detect.
- 5) Prevention of abuse and neglect
- 6) Assurance of Safeguarding practices

There are several key developments occurring in the next year that will support safeguarding adults at risk. Whilst it is anticipated these will deliver significant benefits, there are also risks attached to changes in processes. The Safeguarding Adults Board will ensure it is regularly updated on progress in relation to these. In particular this relates to:

The establishment of a Multi Agency Safeguarding Hub (MASH), that will be expected to receive safeguarding concerns relating to adults and children from the whole of Surrey. This is expected to be in place by early October 2016. This project is a major change in the way safeguarding concerns are responded to and whilst it can deliver substantial benefits in sharing information, there are challenges in recruiting staff and implementing IT systems.

Adult Social Care is implementing a new IT system in autumn 2016. Similar to the situation with the MASH, the new system is expected to deliver significant advantages, however, it will also involve many staff having to receive appropriate training and files being moved from one system to another.

Recruitment to vacant posts is proving challenging for all agencies. Surrey benefits from a vibrant job market where staff can easily move elsewhere. In addition, jobs in London are easily accessible and offer higher salaries for staff who are able to travel.

Finally, all partners are working in an environment where budgets are being cut but the demand for services remains as high as ever. All agencies are going to have to find innovative ways of delivering more for less.

**To find out more about Surrey Safeguarding Adults Board see:**

- the Surrey Safeguarding Adults Board webpages at:  
<http://www.surreycc.gov.uk/social-care-and-health/surrey-safeguarding-adults-board>
- Data on Surrey's population and health needs at: <https://www.surreyi.gov.uk>

## **Appendices**

**Appendix A – The Board:** Organogram, Terms of Reference, membership of the Board and attendance at Board meetings.

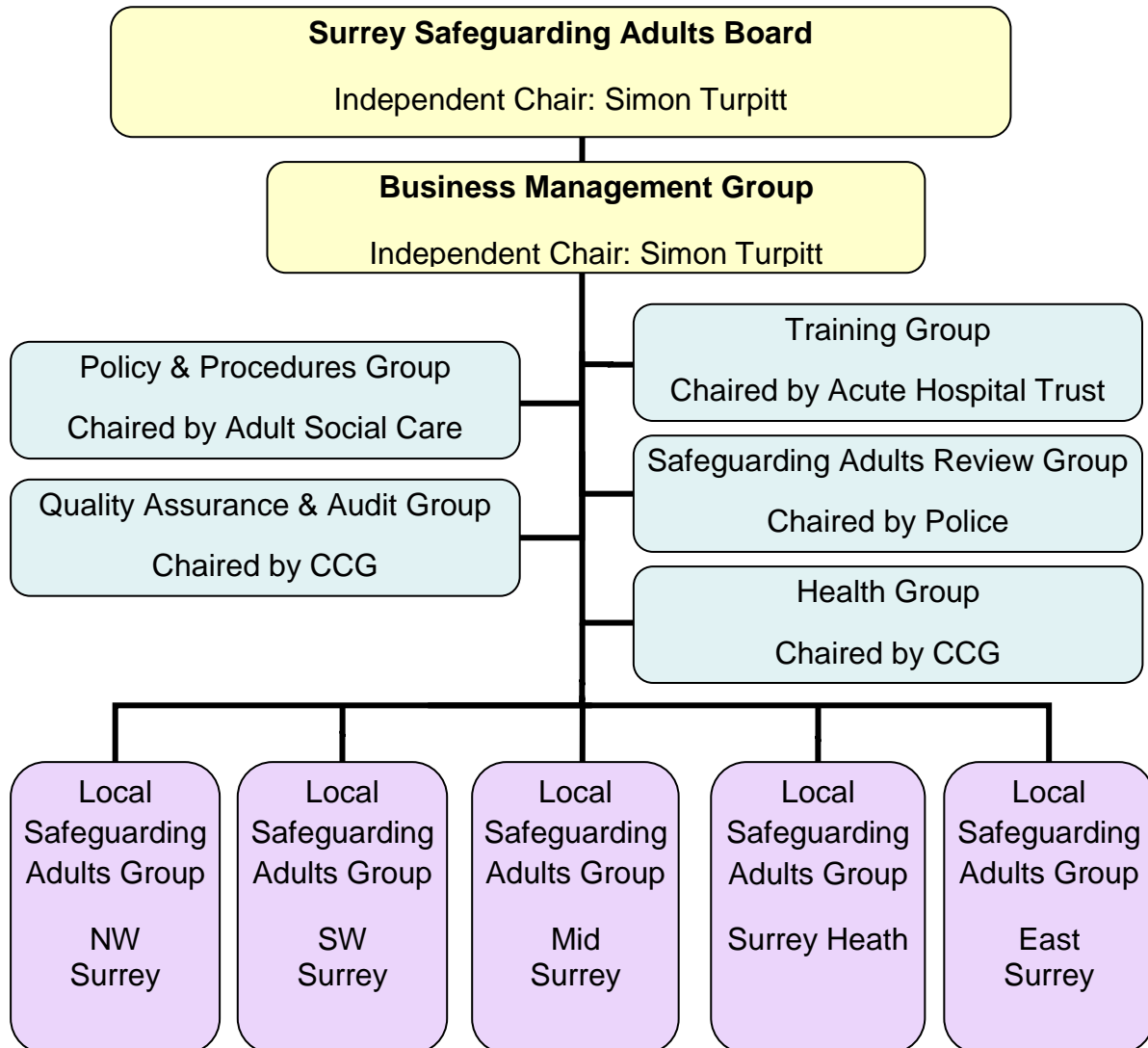
**Appendix B – Safeguarding Adults Collection data** submitted by Adult Social Care to the Department of Health

**Appendix C – Raising awareness of safeguarding publicity campaign**

**Appendix D – Surrey Safeguarding Adults Board Annual Plan for 2015-2016**

## Appendix A – Information about the Surrey Safeguarding Adults Board

### SSAB Organogram.



CCG = Clinical Commissioning Group

## SURREY SAFEGUARDING ADULTS BOARD

### TERMS OF REFERENCE

#### Policy statement

Surrey Safeguarding Adults Board's policy is to work with users, carers and other agencies to protect vulnerable adults from abuse, in line with the agreed procedures. Adults who are vulnerable will be treated in a way which respects their individuality and does not undermine their dignity or their human or civil rights. The decisions of all vulnerable adults will be respected unless there is a legal responsibility to intervene or where there is a risk to others.

The terms of reference for the Board are:

- To oversee the implementation and working of the Safeguarding Adults procedures, including publication, distribution and administration of the document
- The management of inter-agency organisational relationships to support and promote the implementation of the procedures
- To make links with other areas of policy and good practice guidance, including, contracting, care management and child protection within the statutory, voluntary and independent sectors
- To oversee the training strategy, and to maintain a strategic overview of Safeguarding Adults training
- To identify sources of funding required to implement the training and development needs associated with the procedures and to monitor the use of these resources
- To oversee the development of information systems which support the gathering of information necessary to carry out the evaluation of policy and practice
- To regularly review the monitoring and reporting of safeguarding adults concerns and investigations and to undertake a full review annually
- To make recommendations for revisions and changes necessary to the procedures, identified as a result of the monitoring process
- The promotion of multi-agency working in Safeguarding Adults, through formal events or information campaigns to ensure a wider professional and public understanding of adult abuse
- To support and advise operational managers working with abuse, through the local groups and sub groups
- To agree and maintain links with relevant corporate management groups
- Manage and support the work of the sub groups

#### Reporting and accountability

The Surrey Safeguarding Adults Board (SSAB) is constituted under "No Secrets" March 2000, Section 7 Guidance.

The SSAB manages the work of the local groups and the subgroups. Chairs of the above group will be members of the SSAB and provide annual reports to the SSAB as part of the business planning process.

The SSAB will set the key priorities of the sub groups, against the annual business plan.

The annual business plan will reflect:

- National requirements/guidance
- Relevant performance indicators
- Identified local needs.

### SSAB Membership

<b>Voluntary sector / User led organisations</b>	Action for Carers (Surrey) Age UK, Surrey Surrey Coalition of Disabled People Surrey 50+
<b>Emergency Services</b>	Ambulance Services Surrey Police Surrey Fire and Rescue Service
<b>Housing</b>	Anchor Trust - Housing
<b>Hospital / Acute Trusts</b>	Ashford & St Peters NHS Foundation Trust Frimley Park Hospital NHS Foundation Trust Royal Surrey County Hospital NHS Foundation Trust St Helier & Epsom University Hospitals NHS Trust Surrey & Sussex Healthcare NHS Trust
<b>Community Health providers</b>	CSH Surrey First Community Health & Care Sensory Services by Sight for Surrey Virgin Care Surrey and Borders Partnership NHS Foundation Trust



<b>Regulators, regional and representative organisations</b>	Care Quality Commission NHS England Surrey Care Association
<b>District and Borough Councils</b>	Guildford Spelthorne Tandridge
<b>Surrey County Council</b>	Director of Adult Social Services, Interim Assistant Director for Service Delivery, ASC Business Intelligence Manager, ASC Area Directors, Interim Head of Safeguarding and Quality Assurance, legal services, Trading Standards.
<b>Clinical Commissioning Groups</b>	Surrey Downs CCG – hosting adult safeguarding in Surrey East Surrey, North West and Surrey Heath CCGs attend in their capacity as chairs of Local Safeguarding Adults Groups
<b>Probation Service</b>	Kent Surrey & Sussex Community Rehabilitation Company Ltd (formerly Probation) National Probation Service
<b>Prison Service</b>	Prison Governor at Highdown
Chairs of Local Safeguarding Adults Groups	
Cabinet Member for Adult Social Care, Wellbeing and Independence	
Surrey Safeguarding Children's Board Partnership Support Manager	
Community Safety Partnership	



## **Appendix B – Safeguarding Adults Data**

### **Safeguarding Adults Collection (SAC) 2015 - 2016**

Data submitted by Adult Social Care to the Department of Health

#### **Background**

From 2015/16 onwards, the Department of Health introduced a new annual safeguarding statutory return called the Safeguarding Adults Collection (SAC). This superseded the Safeguarding Adults Return (SAR) which was submitted for the previous two years, and the Abuse of Vulnerable Adults (AVA) annual return which was submitted for the three years before that.

This report, where possible, compares Safeguarding data submitted by Surrey County Council Adult Social Care for the 2015/16 SAC with previous years' data submitted in the AVA and SAR returns. The source of this data is from the Adult Social Care Database (AIS).

Please note: data concerning 'Source of Referral', 'Nature of Abuse', 'Location of Abuse' and 'Source of Risk' from 2013-14 onwards are based on 'referrals completed in the year', in comparison with earlier years taken from AVA submissions where data was based on 'new safeguarding referrals received in the year'.

This data is collected by Adult Social Care for the Department of Health as opposed to the Safeguarding Board and is not required to deliver explanations to variances and therefore as such is just data without being able to properly be turned into knowledge and action. Whilst it is useful for some context, the Board needs data which it can verify, turn into knowledge and then act upon and has set up for use next year a data set that will give us meaningful information that we can interrogate and act upon.

## **Definitions**

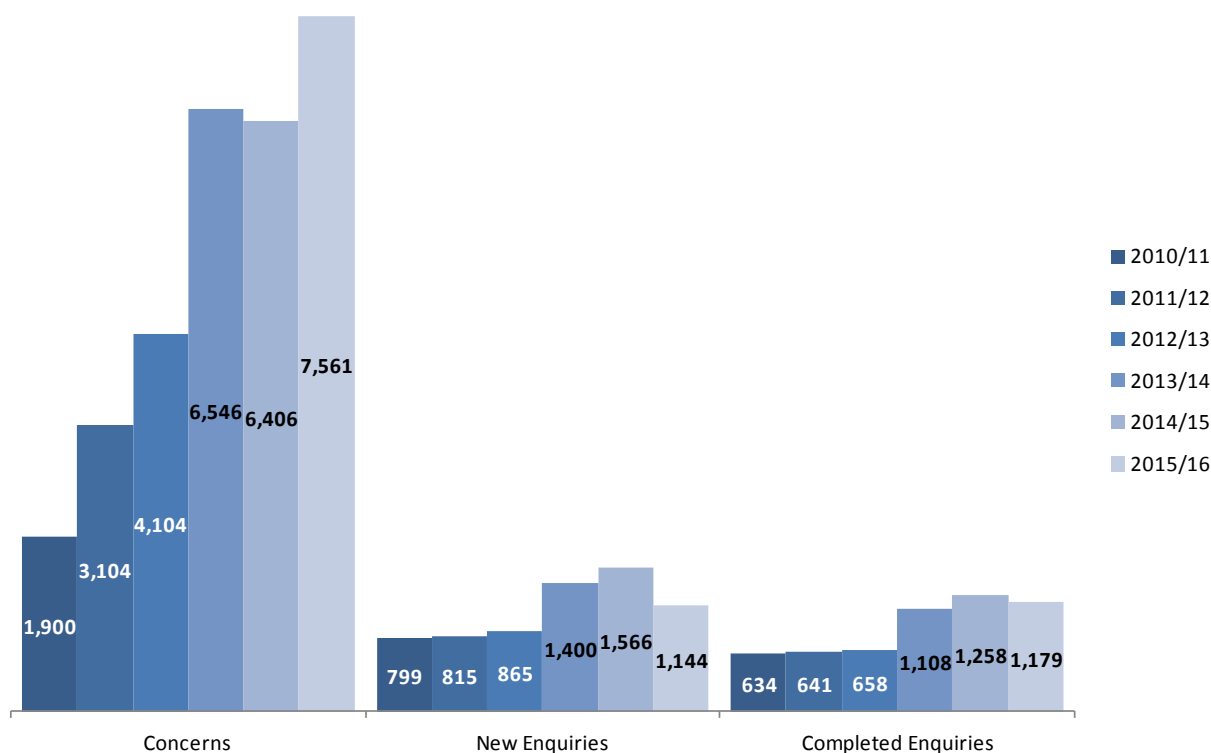
### **Safeguarding Concern**

This is when a concern is raised where an adult at risk may have been, is, or might be, a victim of abuse. This is normally the first contact between the person raising the concern and the council about the alleged abuse. For example, if an individual phoned a council and expressed a concern that their elderly neighbour was being physically abused, this would be counted as a concern.

### **Safeguarding Enquiry**

A safeguarding enquiry is where a concern is assessed by the council as meeting the local safeguarding threshold and a full safeguarding investigation is deemed necessary.

## Number of Safeguarding Concerns, New Enquiries and Completed Enquiries

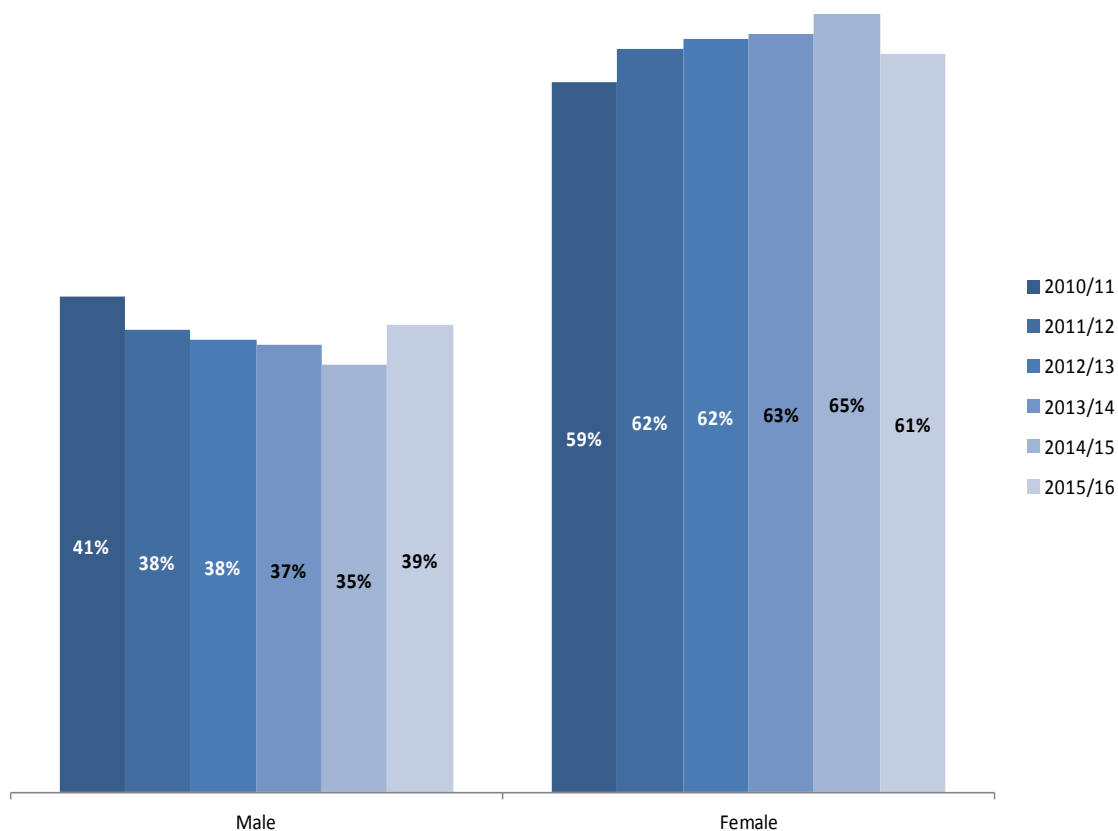


	Concerns	New Enquiries	Completed Enquiries	Concerns to Enquiries conversion rate
2010/11	1,900	799	634	42%
2011/12	3,104	815	641	26%
2012/13	4,104	865	658	21%
2013/14	6,546	1,400	1,108	21%
2014/15	6,406	1,566	1,258	24%
2015/16	7,561	1,144	1,179	15%
% change between 2014/15 & 2015/16	18%	-27%	6%	-38%

- 7,561 Concerns were received in 2015/16. This was a big increase compared with 2014/15 (6,406 Concerns).
- 1,144 Safeguarding Enquiries were received in 2015/16, which represented a decrease of 27% compared with 2014/15.
- The increase in Concerns and decrease in new Enquiries means that the proportion of Concerns that progressed to Enquiries decreased to 15% in 2015/16 (from 24% in 2014/15).
- 1,179 Safeguarding Enquiries were completed during 2015/16, which was a decrease of 6% compared with 2014/15.

## Safeguarding Enquiries by Gender

**Percentage of Safeguarding New Enquiries by Gender**

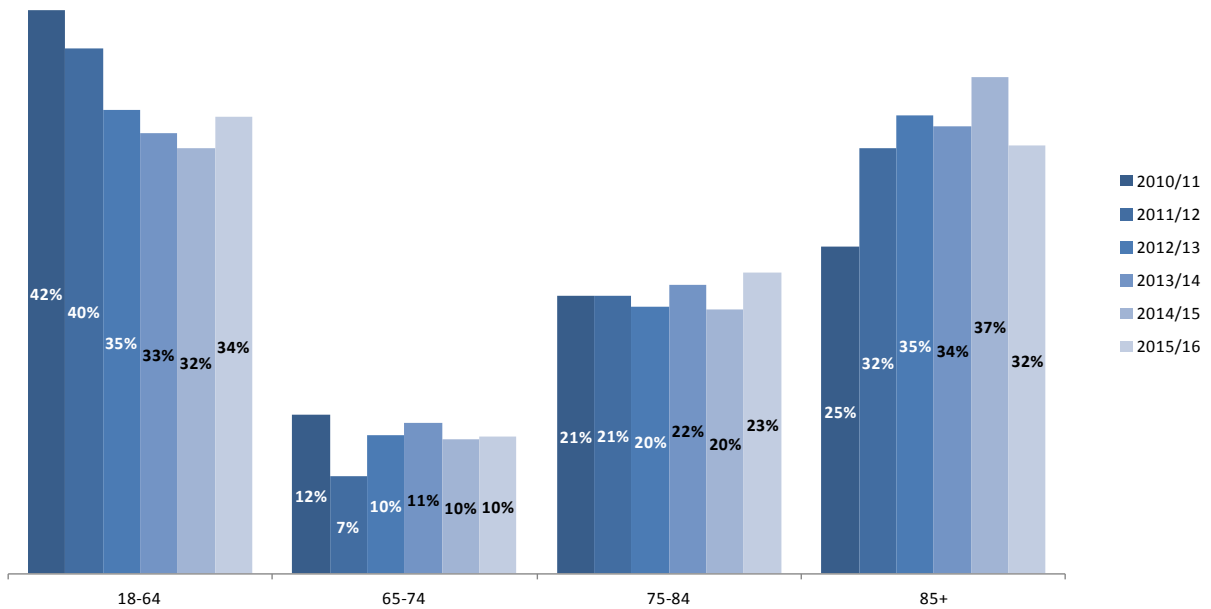


	Male	Female
2010/11	41%	59%
2011/12	38%	62%
2012/13	38%	62%
2013/14	37%	63%
2014/15	35%	65%
2015/16	39%	61%

In 2015 -2016 39% of adults at risk were male and 61% were female. The proportion of males saw a small increase for the first time but overall the gender breakdown of adults at risk has been fairly stable over the last few reporting year.

## Enquiries by age group

Percentage of Safeguarding New Enquiries  
by Age Group



	18-64	65-74	75-84	85+	Not recorded
2010/11	42%	12%	21%	25%	0
2011/12	40%	7%	21%	32%	0
2012/13	35%	10%	20%	35%	0
2013/14	33%	11%	22%	34%	0
2014/15	32%	10%	20%	37%	1%
2015/16	34%	10%	23%	32%	0

- In 2015/16 the 18-64 age group saw a small increase in the proportion of new Enquiries for the first time since 2010/11 but overall the proportion in this age group has been fairly stable for the last few reporting years.
- The 65-74 and 75-84 age groups also remain relatively stable.
- The 85+ age group shows the biggest change, a decrease of 5% since 2014/15

## Enquiries by primary support reason and age group

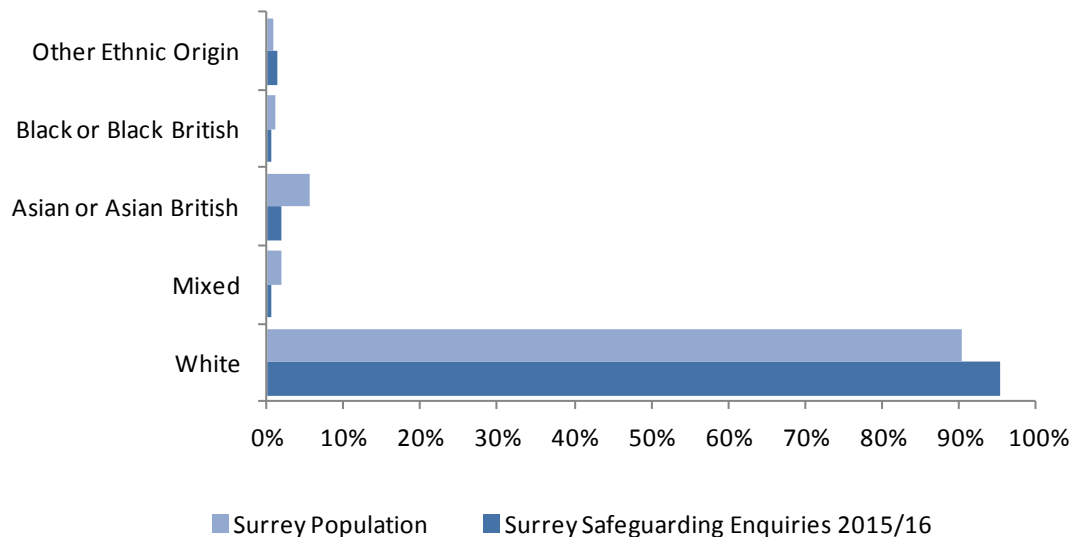
Year	Physical Support		Sensory Support <i>[previously included with 'Physical Disability, Frailty and Sensory Impairment']</i>		Learning Disability		Mental Health		Support with Memory & Cognition <i>[previously included with 'Mental Health (including Dementia)']</i>		Social Support <i>[previously included with 'Substance Misuse' or 'Other Vulnerable People']</i>		No Support Reason <i>(previously included with 'Other Vulnerable People')</i>		All Primary Support Reasons
	18-64	65+	18-64	65+	18-64	65+	18-64	65+	18-64	65+	18-64	65+	18-64	65+	Age Not Known
2010/11	11%	40%	-	-	23%	3%	8%	12%	-	-	1%	2%	-	-	-
2011/12	9%	41%	-	-	21%	2%	9%	15%	-	-	0%	3%	-	-	-
2012/13	9%	46%	-	-	20%	3%	6%	13%	-	-	1%	4%	-	-	-
2013/14	9%	48%	-	-	17%	4%	7%	12%	-	-	2%	6%	-	-	-
2014/15	7%	44%	1%	2%	13%	2%	7%	4%	0%	8%	1%	4%	3%	4%	1%
2015/16	6%	41%	1%	1%	14%	2%	7%	4%	0%	12%	2%	2%	4%	3%	0%

- There has been a further small decrease in the proportion of adults at risk whose primary support reason is Physical Support. Until 2014/15, Sensory Support was also included with Physical Support.
- There was a 4% increase in the primary support reason of 'Support for Memory and Cognition'. Until 2014/15 this was previously included with Mental Health.

## Enquiries by ethnic group

Surrey population figures are from the 2011 Census

### Percentage of Safeguarding New Enquiries by Ethnic Group (2015/16)

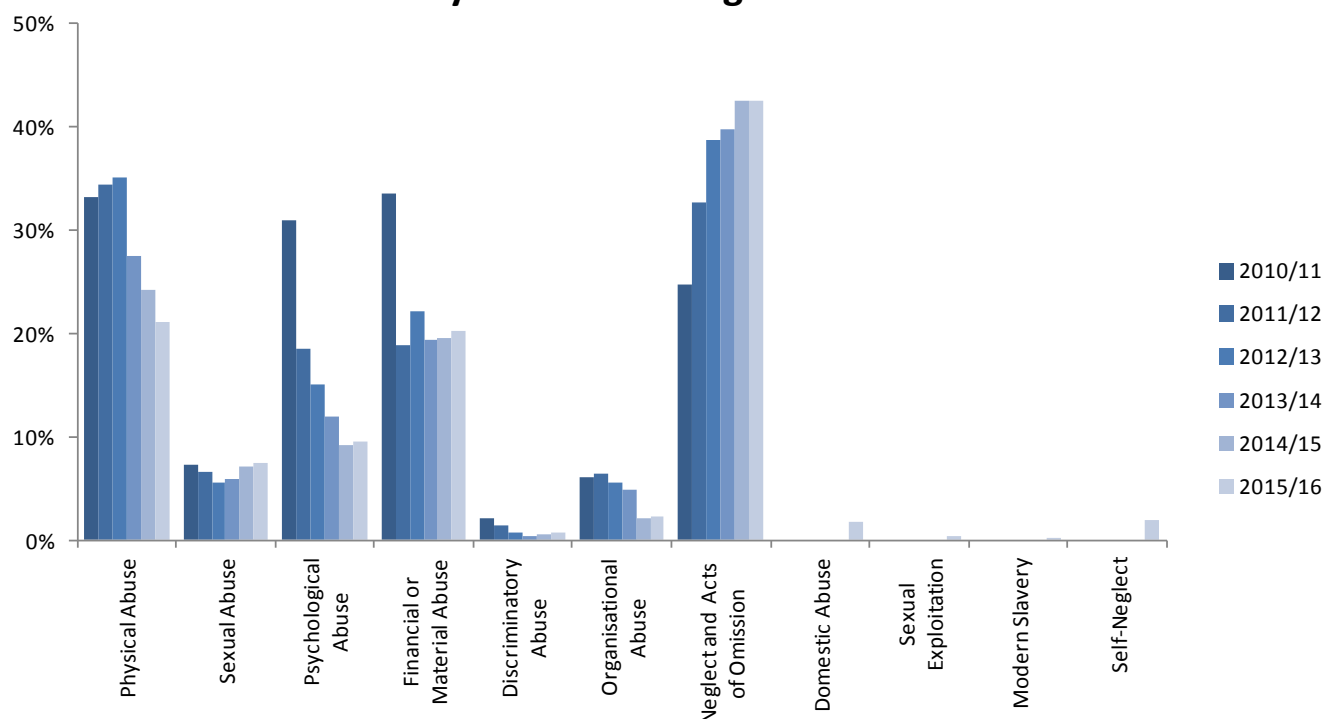


- There has been no significant change in the ethnic breakdown of adults at risk for the last four years although the proportion where ethnicity was not known (either refused or not yet obtained at the time of the safeguarding incident) has increased each year. In 2015/16 the proportion not known represented 11% of all new Enquiries.
- Of those where ethnicity was known, in 2015/16 95% of adults at risk were from the White ethnic group, as they were in the previous two reporting years. This is 5% higher than the percentage in the general population in Surrey.
- The proportion of adults at risk from the Asian or Asian British ethnic group was the same as in 2014/15 (2%) and is still lower than the percentage in the general population in Surrey (6%).



## Nature of alleged abuse

### Percentage of Safeguarding Enquiries by Nature of Alleged Abuse



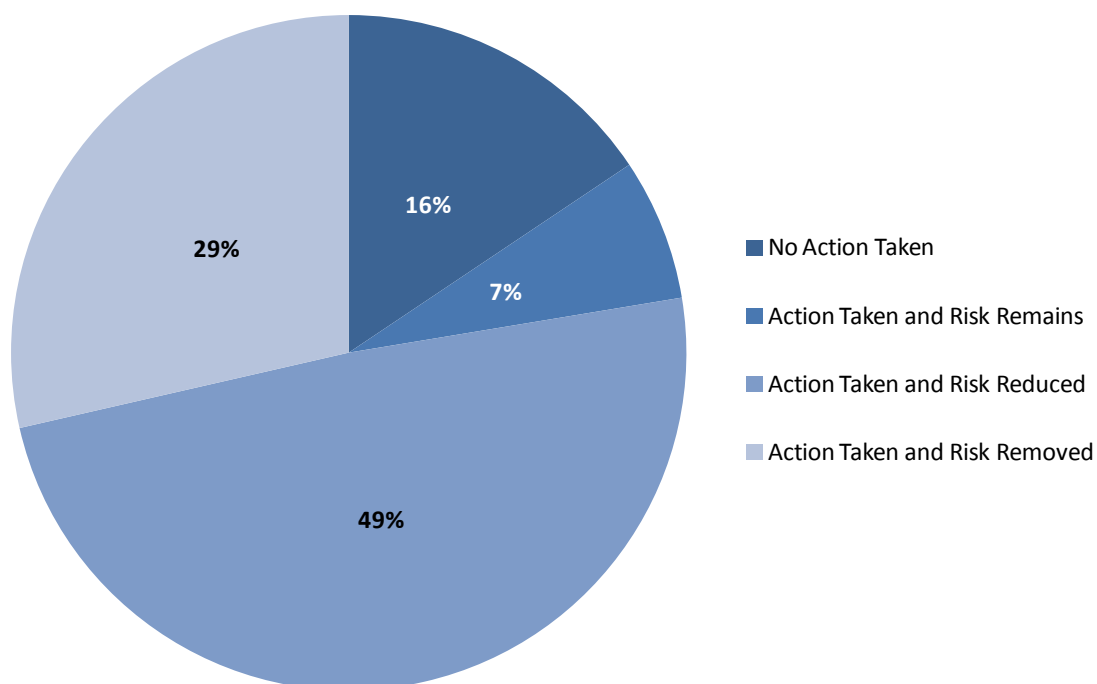
	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
Physical abuse	33%	34%	35%	28%	24%	21%
Sexual abuse	7%	7%	6%	6%	7%	7%
Psychological abuse	31%	19%	15%	12%	9%	10%
Financial or Material abuse	34%	19%	22%	19%	20%	20%
Organisational abuse	6%	7%	6%	5%	2%	2%
Neglect & Acts of Omission	25%	33%	39%	40%	43%	43%
Domestic abuse	-	-	-	-	-	2%
Sexual exploitation	-	-	-	-	-	0
Modern slavery	-	-	-	-	-	0
Self-neglect	-	-	-	-	-	2%

*Please note: multiple abuse types can be recorded for a single Enquiry. Percentages therefore add up to more than 100%.*

*All figures are rounded to the nearest whole number so figures below 1% may appear as 0%.*

- Neglect and Acts of Omission remains the largest proportion (43%).
- In 2015/16 there was a small decrease in the proportion of Physical abuse (from 24% in 2014/15 to 21%) and there has been a continuing decrease over the last four reporting years.
- In 2015/16 the Department of Health introduced four new abuse type categories: Domestic Abuse, Sexual Exploitation, Modern Slavery and Self-Neglect. Figures for these were low (4% between them) and they offset the small decrease in the proportion of Physical Abuse.

### Percentage of Completed Safeguarding Referrals by Action and Result (2015/16)



- In 2015/16 the majority of completed Enquiries had an outcome of Action Taken and Risk Reduced (49%).
- 29% of completed Enquiries had an outcome of Action Taken and Risk Removed while 16% had No Action Taken.
- In 7% of completed Enquiries the outcome was Action Taken and Risk Remains.

## Mental Capacity

	2015/16
<b>Adults involved in a safeguarding enquiry who lacked mental capacity</b>	<b>30%</b>
- of which: support was provided by an advocate, family or friend	37%
<b>Adults involved in a safeguarding enquiry who did not lack mental capacity</b>	<b>70%</b>

- 30% of Enquiries indicated that the adult at risk lacked mental capacity to make decisions related to the safeguarding Enquiry.
- Of those, it was recorded that 37% were supported by an advocate, family or friend. This is an area of concern for ASC and further investigation into the reasons why this figure is low are being planned.

## Making Safeguarding Personal – were the adults desired outcomes met

	2015/16
<b>Individual was asked and desired outcomes were expressed</b>	<b>48%</b>
<i>of which: fully achieved</i>	62%
<i>partially achieved</i>	31%
<i>not achieved</i>	7%
<b>Individual was asked but no outcomes were expressed</b>	<b>0%</b>
<b>Individual was not asked</b>	<b>52%</b>
<b>Don't know</b>	<b>0%</b>
<b>Not recorded</b>	<b>0%</b>
<b>TOTAL</b>	<b>100%</b>

- This was introduced by the Department of Health in 2015/16 and recording in Surrey started in September 2015.
- The proportion of adults at risk who were asked what their desired outcomes were was 48% of all enquiries completed during 2015/16. This figure reflects that the fact that recording of this information only started halfway through the reporting year.
- Of those who were asked and who expressed a desired outcome, 62% fully achieved their outcomes, 31% were partially achieved and 7% were not achieved.

## Safeguarding Adults Collection (SAC) 2015/16 - Summary of Key Findings

- Low conversion rate of Concerns to Enquiries. Adult Social Care are investigating the reasons for this.
- Mental Capacity: Data indicates that there was a low proportion of adults lacking capacity, who were supported by an advocate, family member or friend. Adult Social Care are investigating the reasons for this



## Appendix C – Raising awareness of safeguarding publicity campaign

### Details of raising awareness of safeguarding publicity campaign

**Date:** November/December 2015

**Run by Adult Social Care Communications team on behalf of SSAB**

#### Highlights

- 1,006 clicks on the online adverts generated through Google
- 1,171 visits to the Safeguarding web pages
- 74,235 impressions on the advert placed on the Metro online newspaper and 17 clicks from the advert to the Board's



#### Objectives

- Raise awareness of adult abuse in Surrey
- Inform people what action to take if they experience abuse
- Encourage people to report cases of abuse.

#### Target audience

- Older People
- Carers and families
- Friends and neighbours
- GPs (secondary audience).

#### Strategy and tactics

A repeated countywide campaign ran for one month using a mix of traditional communications channels and digital:

- Campaign creative – We used the same artwork that had been designed for the previous campaigns earlier in the year to get consistency of message .
- Radio advertising – We used the existing radio advert, which ran on the three main Surrey radio stations for two weeks.
- Online advertising –Google search advertising ran for the duration of the campaign. Metro online was also used to reach people who may be reading the online paper.
- Social media – Regular Tweets were uploaded encouraging residents to look out for the signs of abuse.
- Online – A web banner was uploaded onto the SCC website, this was then pulled through to the intranet for staff information.
- Surrey Communications Group – Information was provided to the Surrey Communications Group with detailed information on the campaign. We also included visuals that could be used on the group’s websites.
- Issues monitor – Information was used in issues monitor, which is sent out every Friday to MP’s and key figures in the community.
- Communicate – Information was included in the e-newsletter which is sent out weekly to members.

## Campaign impact

### Social media

#### Twitter

There were a total of 10 Tweets over the campaign period and these generated:

- Four likes
- Six Retweets

#### Metro online

There were 74,235 impressions of the advert and 17 clicks from Metro online to the protecting adults from harm webpages.

#### Google display ads

- There were 418,432 impressions of the advert placed through Google
- There were 1006 clicks on the adverts which took visitors through to the [surreycc.gov.uk/protectingadultsfromharm](http://surreycc.gov.uk/protectingadultsfromharm) webpage.

#### Web stats 2015

October 1,098 visits  
 November 1,171 visits showed an increase during the campaign ( this reads that there were 1171 increased visits in November I don't think that's what we mean?)  
 December 737 visits

#### Calls to the Adult Social Care helpline 2015/16

October 2,856 calls (+0.4% from last year)  
 November 2,832 calls (+12.6% from last year)  
 December 2,506 calls (+10% from last year)  
 January 2,868 calls (-3.9% from last year)

(Source: Achiever database)

**Number of Safeguarding Alerts 2015/16 received by the Adult Social Care helpline**

October	157
November	184 showed an increase during the campaign
December	155
January	160



## Appendix D – Training data

The Board uses funding from their pooled partnership budget to put on a programme of multi agency training that any agency or individual in Surrey can access. The Board is committed to the benefits of classroom based, multi agency training as a way to achieve the best learning experience for delegates.

The Board has a Competency Framework that describes what level of training should be undertaken by people in different roles and agencies. This helps employers achieve a competent workforce by ensuring the training matches the skills the person needs to attain.

Below is a list of the courses made available and attended in this reporting year.

**Making Safeguarding Personal** (level 1 course) – aims to provide an enhance understanding of the key changes under the Care Act and how it is applied in day to day practice.

**Self Neglect Awareness** (level 2 course) – aims to give delegates the knowledge to identify self neglect, have a working knowledge of the Mental Health Act and Mental Capacity Act and understand the role key partners play in managing self neglect within the safeguarding pathway

**Supporting the Process** (level 2 course) - aims to enable the learner to recognise and identify potential abuse/neglect, being aware of risk management including those individuals with fluctuating mental capacity.

**Managing Safely** (level 3 course) – aims to improve the knowledge, skills and expertise of managers in respect of safe recruitment, supervision and management of staff who work with adults at risk. It also imparts knowledge of prevention, multi-agency working, the legal framework and national and local developments in Safeguarding Adults.

**Provider led enquiries** (level 3 course) – aims to give delegates the confidence and competence to undertake safeguarding enquiries and to construct an enquiry report that meets legal requirements.

**Internal Management Reviews** (level 4 course) – aims to enable participants to contribute to the Safeguarding Adult Review process by producing Internal Management Reviews (IMRs) in a consistent format,



which look openly and critically at organisational practice and make recommendations to improve future practice.

### Numbers of people trained by the Board

Individual agencies will also have their own training programmes for their staff therefore this does not reflect the whole picture of staff training just the numbers trained by the Board.

<b>SSAB Training Programme 2015 - 2016</b>		
<b>Course Title</b>	<b>Training Level</b>	<b>Numbers attending</b>
Making Safeguarding Personal	1	44
Self Neglect Awareness	2	141
Supporting the Process	2	35
Managing Safely	3	49
Provider led enquiries	3	41
Internal Management Reviews	4	8

All member agencies who do not use the Board's multi agency training have to report to the board the levels and numbers trained so we can be assured that staff have the required skills in Safeguarding.

## Appendix E – Surrey Safeguarding Adults Board Annual plan for 2015-2016



# Surrey Safeguarding Adults Board

## Annual Plan 2015 – 2016

<b>Key Priorities for Surrey Safeguarding Adults Board</b>
1 Achieving good outcomes for adults at risk and carers
2 Responding to reported abuse
3 Leadership
4 Safeguarding Adults Board
5 Safeguarding Adults Reviews: Safeguarding Adults Reviews (SAR), Multi Agency Reviews (MAR) and Reviews undertaken by other Boards/Partnerships
6 Making Safeguarding Personal
7 A Competent workforce

<b>ACTIONS</b>		
<b>Action</b>	<b>Owning sub-group or Board member &amp; start date</b>	<b>Target delivery date</b>
<p><b>1. Board's constitution</b> <i>Key Priorities: 3 &amp; 4</i></p> <p>To implement a new constitution for the Board.</p>	<p>Start date: 1/4/15</p> <p>Ownership: SSAB Chair</p>	31/3/16
<p><b>2. Performance Framework</b> <i>Key Priorities: 1,3 &amp; 4</i></p> <p>To implement a new Performance Framework for the Board including data collection from statutory agencies and reporting from all sub-groups.</p>	<p>Start date: 1/4/15</p> <p>Ownership: All Board agencies except the voluntary sector.</p> <p>Monitored by: BMG</p>	1/6/15
<p><b>3. Board's Annual Report</b> <i>Key Priorities: 3 &amp; 4</i></p> <p>3a) Require all responsible agencies to report against their contribution to the Board and the delivery of the plan for the Annual Report.</p>	<p>Start date: 1/4/15</p> <p>Ownership: SSAB Chair</p> <p>Monitored by: Cabinet Associate for Safeguarding Adults</p>	1/6/15
<p>3b) Present the Board's Annual Report to SCC Cabinet and ensure it is available on the Board's webpages.</p>	<p>Start date: 1/10/15</p> <p>Ownership: SSAB Chair</p> <p>Monitored by: Cabinet Associate for Safeguarding Adults</p>	1/11/15

<b>ACTIONS</b>		
<b>Action</b>	<b>Owning sub-group or Board member &amp; start date</b>	<b>Target delivery date</b>
<p><b>4. Care Act implementation</b> <i>Key Priorities: 3 &amp; 4</i></p> <p>All Board agencies will implement the Care Act In particular:</p> <ul style="list-style-type: none"> <li>• Compliance with the Information Sharing Protocol (14.24)</li> <li>• Understanding roles &amp; responsibilities (14.40)</li> <li>• Cooperation with partner agencies (14.51)</li> <li>• All staff and volunteers trained in safeguarding (14.86)</li> <li>• Accurate records are kept (14.87)</li> <li>• Know how they contribute to safeguarding adults (14.122)</li> <li>• Know what they have done to deliver the objectives and actions of this strategic plan (14.126)</li> <li>• Reported all concerns about abuse and neglect (14.170)</li> <li>• Chief officers sign off contributions to Strategic Plan and Annual reports (14.191)</li> </ul>	<p>Start date: 1/4/15</p> <p>Ownership: All Board agencies except the voluntary sector.</p> <p>Monitored by: SSAB chair</p>	31/3/16
<p><b>5. Self Assessment Audit</b> <i>Key Priorities: 4 &amp; 7</i></p> <p>5a) All relevant Board members to undertake a safeguarding self assessment audit tool and associated Action Plan.</p>	<p>Start date:1/4/15</p> <p>Ownership: All Board agencies except the voluntary sector.</p> <p>Monitored by: SSAB chair</p>	1/7/15

<b>ACTIONS</b>		
<b>Action</b>	<b>Owning sub-group or Board member &amp; start date</b>	<b>Target delivery date</b>
5b) To actively engage in the Board's 'Challenge and Support' event.	Start date:1/7/15  Ownership: All Board agencies except the voluntary sector.  Monitored by: SSAB chair	1/11/15
<b>6. SSAB Multi-Agency Procedures</b> <i>Key Priorities: 1 &amp; 2</i>  6a) To review and revise the SSAB Multi-Agency Procedures, Information and Guidance as required to ensure it always reflects current safeguarding best practice. 6b) To review the above document 6 months after revisions have been made in response to the Care Act.	Start date: 1/6/15  Ownership: Policy & Procedures group chaired by ASC  Monitored by: SSAB Chair	31/3/16
<b>7. Review of safeguarding process</b> <i>Key Priorities: 1,2 &amp; 6</i>  Following the implementation of the Care Act, to undertake a review of the safeguarding process from the point of view of: i) the adults at risk ii) the carer iii) the referrer To consider communication, response times outcomes and the extent to which the adult at risk, carer and referrer were the centre of the process.	Start date: 1/10/15  Ownership: Quality Assurance & Audit group chaired by Surrey Downs CCG  Monitored by: SSAB Chair	30/3/16

<b>ACTIONS</b>		
<b>Action</b>	<b>Owning sub-group or Board member &amp; start date</b>	<b>Target delivery date</b>
<p><b>8. File audit review</b> <i>Key Priorities: 1,2 &amp; 3</i></p> <p>Undertake multi-agency case file audits and share the learning from these with the Board to ensure the Board's vision is reflected in the adult at risk's experience of the safeguarding process.</p>	<p>Start date: 1/4/15</p> <p>Ownership: Quality Assurance &amp; Audit group chaired by Surrey Downs CCG</p> <p>Monitored by: SSAB Chair</p>	1/12/15
<p><b>9. Safeguarding Communications Strategy</b> <i>Key Priorities: 3,4 &amp; 7</i></p> <p>Develop and implement a multi-agency communications strategy in relation to safeguarding, making use of social media.</p>	<p>Start date: 1/4/15</p> <p>Ownership: ASC Communications Team</p> <p>Monitored by: SSAB Chair</p>	30/12/15 & ongoing
<p><b>10. Working with self-funders and hard to reach groups</b> <i>Key Priority: 7</i></p> <p>To identify and undertake activities to raise awareness of adult safeguarding with:</p> <p>i) people who do, or who may, fund their own or another's care; ii) people who have characteristics that make them less willing or less able to engage with statutory services.</p>	<p>Start date: 1/4/15</p> <p>Ownership: Local Safeguarding Adults Groups chaired by: East – East Surrey CCG Mid - ASC SW - ASC NW – NW Surrey CCG</p> <p>Monitored by: BMG</p>	31/3/16

ACTIONS		
Action	Owning sub-group or Board member & start date	Target delivery date
<p><b>11. Learning from national SARs, MARs, SCRs &amp; Domestic Homicide Reviews (DHRs)</b> <i>Key Priority: 5</i></p> <p>11a) Agree the process by which national SARs (adults), MARs, SCRs (childrens) and DHRs are identified and the lessons learned are implemented by Board agencies.</p>	<p>Start date:1/4/15</p> <p>Ownership: Policy &amp; Procedures chaired by ASC</p> <p>Monitored by: SSAB chair</p>	1/7/15
<p>11b) Where themes emerge from Reviews, the Board will support agencies to understand the lessons learned and recommendations through learning events and communications.</p>	<p>Start date:1/4/15</p> <p>Ownership: Policy &amp; Procedures chaired by ASC</p> <p>Monitored by: SSAB chair</p>	31/3/16
<p><b>12. Making Safeguarding Personal</b> <i>Key Priority: 6</i></p> <p>Review the impact of personalisation on Adult Safeguarding and ensure processes support this programme.</p>	<p>Start date: 1/6/15</p> <p>Ownership: Policy &amp; Procedures chaired by ASC</p> <p>Monitored by: SSAB chair</p>	1/11/15
<p><b>13. Training</b> <i>Key Priorities: 1 &amp; 7</i></p> <p>13a) Review the effectiveness of the Board's multi-agency Training Programme 2014-15 and prepare the Programme for 2015-16.</p>	<p>Start date: 1/4/15</p> <p>Ownership: Training Group chaired by Acute Trust – ASPH / RSCH</p> <p>Monitored by: SSAB chair</p>	1/6/15 & ongoing

<b>ACTIONS</b>		
<b>Action</b>	<b>Owning sub-group or Board member &amp; start date</b>	<b>Target delivery date</b>
13b) To review the effectiveness of safeguarding knowledge and evaluation of practices following safeguarding training.	Start date: 1/7/15 Ownership: Training Group chaired by Surrey Care Assoc  Monitored by: SSAB chair	31/3/16
13c) To review the Board's Competency Framework to ensure it delivers the benefits anticipated.	Start date: 1/4/15  Ownership: Training Group chaired by Acute Trust – ASPH / RSCH  Monitored by SSAB chair	1/6/15 & ongoing
<b>14. Effective sharing &amp; use of information – for learning and prevention</b> <i>Key Priorities: 1,2 &amp; 6</i>	Start date: 1/4/15  Ownership: Local Safeguarding Adults Groups chaired by: East – East Surrey CCG Mid - ASC SW - ASC NW – NW Surrey CCG  Monitored by: SSAB chair	31/1/16
<b>15. Effective multi-agency discharge planning for adults at risk leaving hospital</b> <i>Key Priorities: 1 &amp; 7</i>  Rapid Improvement Event (RIE) work will be re-energised and audited.	Start date: 1/9/15  Ownership: Quality Assurance & Audit chaired by Surrey Downs CCG  Monitored by: SSAB chair	30/3/16



<b>ACTIONS</b>		
<b>Action</b>	<b>Owning sub-group or Board member &amp; start date</b>	<b>Target delivery date</b>
<p><b>16. Ensuring voices of carers and adults at risk are heard by the Board</b>  <i>Key Priorities: 1 &amp; 6</i></p>	<p>Start date: 1/4/15</p> <p>Ownership:            1) All Board members            2) Local Safeguarding Adults Groups chaired by:            East – East Surrey CCG            Mid - ASC            SW - ASC            NW – NW Surrey CCG</p> <p>Monitored by: SSAB chair</p>	30/3/15
<p><b>17. Mental Capacity Act &amp; Deprivation of Liberty Safeguards</b>  <i>Key Priority: 7</i></p> <p>Improving knowledge and application of the law.</p>	<p>Start date: 1/4/15</p> <p>Ownership: All Board members</p> <p>Monitored by SSAB chair</p>	30/6/15

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**SURREY COUNTY COUNCIL****CABINET**

**DATE:** 18 OCTOBER 2016

**REPORT OF:** MR DAVID HODGE, LEADER OF THE COUNCIL  
MRS HELYN CLACK, CABINET MEMBER FOR WELLBEING  
AND HEALTH

**LEAD OFFICER:** DAVID MCNULTY, CHIEF EXECUTIVE

**SUBJECT:** SUSTAINABILITY AND TRANSFORMATION PLANS

**SUMMARY OF ISSUE:**

Surrey County Council is playing an important role in the development of the three Sustainability and Transformation Plans (STPs) across Surrey. These Plans will play a pivotal role in shaping the future health and care landscape across Surrey.

This report follows the Sustainability and Transformation Plans report presented to the Cabinet on 21 June 2016 – it provides an update on the emerging STPs and asks for delegated authority to sign off the STPs on behalf of the County Council.

**RECOMMENDATIONS:**

It is recommended that the Cabinet:

1. notes the update on the emerging NHS Sustainability and Transformation Plans;
2. approves the terms of reference for, and the County Council's participation in, the Surrey Heartlands Sustainability and Transformation Plan Committees in Common;
3. appoints the Chief Executive, the Cabinet Member for Wellbeing and Health and the Strategic Director Adult Social Care and Public Health to Surrey County Council's Sustainability and Transformation Committee (as part of the Surrey Heartlands STP Committees in Common arrangement) and delegates authority for them to sign off the final Surrey Heartlands Sustainability and Transformation Plan submission and delivery plan; and
4. delegates authority to the Chief Executive, in consultation with the Leader of the Council and Cabinet Member for Wellbeing and Health, to sign off the Frimley Health and Care and Sussex and East Surrey Sustainability and Transformation Plan submissions and associated delivery plans on behalf of the Council through its membership of the relevant Sustainability and Transformation Plan Transformation / Programme Boards.

**REASON FOR RECOMMENDATIONS:**

The deadlines and tight timescales for the preparation and submission of NHS Sustainability and Transformation Plans necessitate the recommendation included in this report to delegate authority to sign off the STPs on behalf of the Council ahead of the deadline for submission to NHS England.

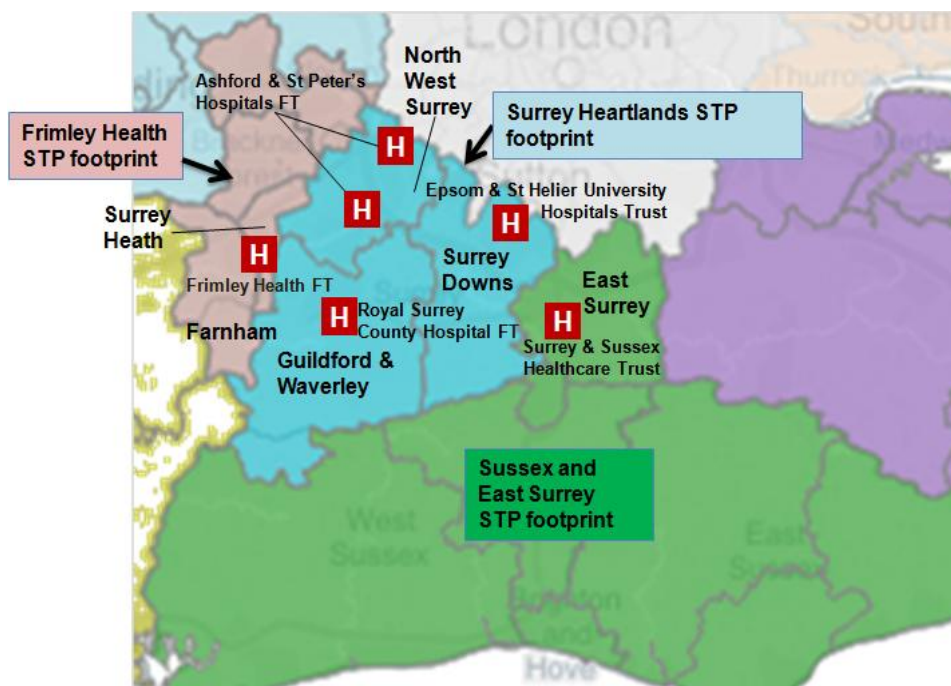
<b>DETAILS:</b>
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## Background

1. NHS Sustainability and Transformation Plans (STPs) are place-based, five-year plans built around the needs of local populations. They are intended to identify benefits to be realised in the short and longer term – helping organisations within the STPs to meet their immediate (16/17) financial challenges and ensure that the investment secured by the NHS in the Spending Review does not merely prop up individual institutions but is used to drive sustainable transformation in patient experience and health outcomes over the longer-term.
2. STPs will be the overarching strategic plan for local health and care systems covering the period October 2016 to March 2021 and represent a significant shift in NHS planning towards a place-based approach (as opposed to solely asking individual NHS organisations to produce their own plans). In addition to covering all areas of CCG and NHS England commissioned activity, STPs will also include plans around integration with local authorities.
3. The STP guidance letter issued by the NHS in September 2016 summarises the reason for introducing STPs as follows:
 

*The Five Year Forward View set out our shared ambition to improve health, quality of care and efficiency within the resources given to us by Parliament. This ‘triple aim’ will only be achieved through local health and social care organisations working together in partnership with the active involvement of patients, stakeholders, clinicians and staff. Sustainability and Transformation Plans are the means of delivering these objectives in each local health and care system.*
4. Whilst the STPs are principally part of an NHS planning process, the County Council’s involvement in the development and implementation of plans will be crucial to ensure the achievement of the shared aims of the County Council and health partners around improving health outcomes and greater integration of health and care services. It forms an important part of the County Council’s response to the challenges it faces in meeting residents’ social care needs with rising demands on services and reduced funding levels - these same challenges apply to health partners and the only way to tackle them is to work together.
5. In addressing gaps relating to health and wellbeing, the quality of care and sustainability of the health and care system, the plans that are emerging are aligned to ambitions set out in the County Council’s Corporate Strategy and their successful delivery will specifically support the County Council’s strategic goals related to:
  - Wellbeing – for example through work focussed on supporting residents to live longer and live well, and enabling people to stay well at home in their community and to return home sooner from hospital with the care they need; and
  - Resident Experience – for example through making better use of digital technology to improve services for residents and developing joined-up services designed around the people that need care and support (rather than the organisations that provide it) with people only having to ‘tell their story once’.
6. The County Council’s involvement in developing the plans enable them to be developed as truly place-based plans – ensuring that the resources within an area are used in the most effective way to meet people’s health and social care needs. The County Council also brings expertise and a track record of delivery in a number of areas (e.g. public health expertise, making better use of the public sector estate).

7. The geographic 'footprint' for STPs is determined locally and based upon natural communities, existing working relationships and patient flows – there are three STPs covering Surrey:
- Surrey Heartlands - covering the geographic areas of Guildford & Waverley Clinical Commissioning Group (CCG), North West Surrey CCG and Surrey Downs CCG
  - Frimley Health & Care - covering the geographic areas of Surrey Heath CCG, North East Hampshire & Farnham CCG, Windsor, Ascot & Maidenhead CCG, Bracknell & Ascot CCG and Slough CCG.
  - Sussex and East Surrey - covering the geographic area of East Surrey CCG, Crawley CCG, Horsham & Mid Sussex CCG, Coastal West Sussex CCG, Brighton & Hove CCG, High Weald Lewes Havens CCG, Eastbourne Hailsham & Seaford CCG and Hastings & Rother CCG.



### Progress on developing Sustainability and Transformation Plans across Surrey

8. Provisional Plans for each of the three STPs were submitted by 30 June 2016 – these outlined the scale of the challenge in terms of the health and wellbeing gap, the care and quality gap and the finance and efficiency gap, and how each area is planning to respond to close the gaps.
9. In July 2016, feedback was provided to STP leads in each of the areas following submission and work has continued to further develop the plans. Final submission of STPs must be made by 21 October 2016.
10. There are a number of emerging themes from the plans – these include:
- strengthening the focus on self-care and prevention across all areas – primary prevention (preventing health problems developing), secondary prevention (stopping health problems getting worse) and tertiary prevention (reducing impact of disease on a person's quality of life);
  - accelerating and scaling the integration of services (in line with, and building on, the Surrey Better Care Fund plan 2016-17);
  - reducing variation between health providers across a range of health and care pathways (in terms of clinical standards and outcomes for patients);

- ensuring sufficient networking of some acute hospital services across each area to ensure appropriate access for people to services as part of a sustainable health and care system;
  - prioritising workstreams and plans in some areas to redesign services / pathways; for example for cancer services, urgent and emergency care, and maternity and paediatric services;
  - taking a whole systems approach to workforce development to meet the current and future needs of the health and care system;
  - capitalising on new technology capabilities to enable and support new models of care; and
  - strengthening the role of 'citizens' in the development of health and social care services through, for example, deliberative engagement processes, co-design and production
11. Each STP has established a range of workstreams or working groups to develop the proposals and additional detail that will be included in the final STP submission. These workstreams cover clinical, enabling and thematic aspects of the plans ranging from cancer services/pathways, out of hospital services and prevention, to consolidating business support functions and use of the public sector estate.
12. The three STPs are developing their approaches to engaging with their local populations. A communication and engagement plan is now in place for the Surrey Heartlands STP and information about the STP has been published on the North West Surrey CCG website - a range of activity is planned including conducting deliberative engagement events with residents and establishing a stakeholder reference group. In the Frimley Health and Care area, a core STP communications group has been established to set out the next steps in relation to communication and engagement and there are plans for a wider communications event to take place in October with representation from each of the organisations within the footprint. In Sussex and East Surrey, the STP has established a dedicated communications and engagement workstream.
13. Whilst similar themes have emerged from the three STPs, the areas of focus, structure of the plans and governance / sign-off arrangements do vary. This reflects the different areas covered and organisations involved in each STP, the different challenges (in terms of quality or services, health and wellbeing, and efficiency of services) faced within each footprint and the flexibility within the national guidance for areas to determine its own arrangements. As a result, the County Council's role in signing off each STP will vary.
14. Set out below is a brief summary of the areas of focus and governance arrangements that has been agreed for each of the three STPs.

#### Surrey Heartlands STP

15. Surrey Heartlands STP has established a shared vision:
- "Our plan is to work together as one area to improve public services and make sure we have sustainable, high quality health and care services for the long term."*
16. Supporting this vision, the STP has identified four key objectives to shape the final submission and delivery plan. They are:
- to make sure all local residents have access to the same high quality standards of care – via a Surrey Heartlands clinical academy;

- to promote self-care and encourage and support local people to take more responsibility for their healthcare;
  - to improve the way we provide services – with more care in the community, and single centres for some of the most specialist hospital services (creating expertise and improving patient outcomes); and
  - working as one – moving towards one budget and one overall plan for the Surrey Heartlands area.
17. The principle delivery mechanism for the STP is through the Surrey Heartlands Transformation Board, comprising the Chief Executive, Clinical Chair, Medical Director/Lead Professional for each of the constituent NHS member organisations. The County Council are represented on the Board by the Chief Executive (who chairs the Transformation Board), Strategic Director Adult Social Care and Public Health, and Deputy Chief Executive.
18. The preferred approach for signing off the final Surrey Heartlands STP submission is by establishing a 'Committees in Common' arrangement that will allow for a collective approval of their Plan by the final deadline whilst also ensuring each organisation involved retains its own decision making authority. As a member of the Transformation Board, Surrey County Council has been asked to participate in the Committees in Common arrangement - this report recommends that the Cabinet Member for Wellbeing and Health, Chief Executive and Strategic Director Adult Social Care and Public Health are appointed as the representatives for the Council as part of the Committees in Common arrangement. Annexed to this report is a copy of the Committees in Common Framework and an addendum to it describing the County Council's associated arrangements.

#### Frimley Health & Care STP

19. The Frimley Health & Care STP identifies four key system transformations that need to be delivered over the coming five years:
- developing communities and social networks so that people have the skills and confidence to take responsibility for their own health and care in their communities;
  - developing the workforce across the system so that it is able to deliver our new models of care;
  - becoming a system with a collective focus on the whole population with support throughout their lives; and
  - using technology to enable patients and our workforce to improve wellbeing, care, outcomes and efficiency.
20. Alongside these system transformations, the following priorities for residents and patients have emerged and are the high level focus for the five year plan:
- further change to improve wellbeing, increase prevention and early detection;
  - improving long term condition pathways including greater self management and proactive management across all providers;
  - frailty pathways: providing proactive management of frail complex patients, having multiple complex physical and mental health long term conditions, reducing crises and prolonged hospital stays;
  - redesigning urgent and emergency care, including integrated working and primary care models providing out of hospital responses to reduce hospital stays; and

- reducing variation and health inequalities across pathways to improve outcomes and maximise value for citizens across the population, supported by evidence.
21. Governance for the STP comes from three well established, local system leadership groups: the East Berkshire System Leadership Group; the North East Hampshire and Farnham Vanguard Leadership Group and the Surrey Heath Alliance. Further groups have been developed to provide effective system leadership to develop the STP: the Frimley System-Wide Leadership Group; the Frimley System Leadership Reference Group and the Frimley System Directors' Group.
22. The County Council are represented in the governance arrangements as follows:
- the Strategic Director Adult Social Care & Public Health, Adult Social Care Area Director (Surrey Heath and Farnham) and Public Health Consultant are members of the Surrey Heath Alliance; and
  - the Adult Social Care Area Director (Surrey Heath and Farnham) is also a member of the North East Hampshire & Farnham Vanguard Leadership Group.
23. At the time of finalising this report the sign-off process for the final STP plan was still in discussion (due to be agreed by the STP on 4 October 2016).

#### Sussex and East Surrey STP

24. The Sussex and East Surrey STP focusses on the following areas to deliver the greatest public health and wellbeing improvements based on current deaths, years of life lost, healthcare costs and health inequalities across the Sussex and East Surrey footprint population:
- Cardiovascular conditions
  - Cancer
  - Respiratory conditions
  - Mental health
25. The key aims of the STP are set out below and will be supported by key enabling projects / strategies:
- improved approach to prevention and self-care including public health;
  - place-based model of care integrating primary, community, social care, mental health and 3rd sector;
  - an acute service & network that supports quality, performance, and provider financial sustainability; and
  - provider productivity improvements supported at STP level.
26. Governance and oversight of the STP is led by a Programme Board and Programme Board Executive – these boards will sign off the final submission. These are supported by a Finance Sub-Group and a Clinical Reference Group.
27. The County Council is represented on the Programme Board by the Strategic Director Adult Social Care and Public Health.

#### **CONSULTATION:**

28. A wide range of partners have been involved in the development of the STPs including the organisations that commission and provide NHS services across Surrey and each STP either has, or is developing, its own communications and engagement plan.



29. In addition:
- the Surrey Health and Wellbeing Board received updates from the three Surrey STPs at its meeting on 26 May 2016 and discussed the emerging themes and issues. A further update is due to be presented to the December 2016 Board meeting; and
  - the Wellbeing and Health Scrutiny Board held a workshop on 31 May 2016 to review the emerging STPs and the Wellbeing and Health Scrutiny Chairman has arranged meetings with the leads of the three STPs.
30. The ongoing engagement and the involvement of residents, elected Members and partner organisations in the design and development of plans and services will be crucial to the successful delivery of STPs.

#### **RISK MANAGEMENT AND IMPLICATIONS:**

31. The overall risk management arrangements for the STPs are led by health partners.
32. The STP process provides a vehicle for strengthening partnership governance arrangements, closer alignment of strategies and plans with partners, and supporting the delivery of existing plans (such as the integration of health and social care) – these are identified as key mitigating actions (processes / controls) within the Council's Leadership Risk Register against the risks associated with the achievement of the Medium Term Financial Plan 2016-2021 and the implementation of new models of delivery.

#### **Financial and Value for Money Implications**

33. Whilst there are no direct financial implications for SCC as a result of this report, the design and implementation of the STPs across Surrey will play a crucial role in developing a sustainable health and care system.
34. The Council's plans with partners relating to health and social care integration and an increasing focus on prevention and self-care are included within the STPs and are important elements of the Council's Medium Term Financial Plan. A key aspect of this is managing demand pressures across Surrey's health and social care system, which is vital to achieve financial sustainability in the long term.
35. In addition, establishing credible and ambitious STPs will be the only way for the Surrey health and care system to access the transformation funding being held by NHS England.

#### **Section 151 Officer Commentary**

36. The Section 151 Officer supports the overall health and social care integration agenda as it will enable better use of resources across the whole system to create improved and more efficient services for residents.
37. The efficacy of specific integration proposals will be judged based on whether there are robust business cases which demonstrate that the proposals represent best value for the whole system and also ensure that the Council's financial position is safeguarded in the process of integration.

#### **Legal Implications – Monitoring Officer**

38. Legislation and associated national policy places a duty on local authorities to promote and encourage the integration health and social care integration – for example:

- The Health and Social Care Act 2012 places a duty on the Council's Health and Wellbeing Board to encourage integrated working; and
  - The Care Act 2014 places a duty upon local authorities to "promote integration between care and support provision, health and health related services, with the aim of joining up services".
39. In developing specific plans for health and social care integration, it will be important to ensure that any specific duties placed on the Authority are properly managed

### **Equalities and Diversity**

40. Equality analysis and Equality Impact Assessments (EIAs) will form an important part of any planning for changes to services across health and social care to assess the impact upon residents, people who use services, carers and staff with protected characteristics. Where they represent a service, or policy change, individual schemes and programmes that are part of the STPs will have equality analysis / EIAs completed and included as part of the plans.

### **Safeguarding responsibilities for vulnerable children and adults implications**

41. The further integration of health and social care services will support the safeguarding of vulnerable Surrey residents. More joined up service delivery by organisations will aid the identification and support of people vulnerable to abuse and enhance consistency of approach and training to safeguarding issues.

### **Public Health implications**

42. Integration across health and social care will support and promote the health of the Surrey population more closely aligning outcomes and resources.

### **WHAT HAPPENS NEXT:**

The next steps include:

- final STPs are submitted by the deadline of 21 October 2016;
- national STP assurance process will follow submission (timing / process to be determined); and
- the Surrey Health and Wellbeing Board will receive further updates on the development of the STPs in December 2016.

#### **Contact Officer:**

Justin Newman, Assistant Director Health and Social Care Integration, Tel: 020 8541 8750

#### **Consulted:**

Representatives from:  
Adult Social Care and Public Health  
Legal services  
Finance  
Surrey Heartlands STP  
Frimley Health & Care STP  
Sussex and East Surrey STP

#### **Annexes:**

Annex one – Surrey Heartlands STP Committee in Common Framework  
Annex one addendum

**Sources/background papers:**

Cabinet report – 21 June 2016: Sustainability and Transformation Plans

Cabinet report – 22 March 2016: Health and social care integration

Cabinet report – 24 November 2015: Progressing the integration of health and social care in Surrey

Cabinet report – 16 December 2014: Health and social care integration

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# Surrey Heartlands' Framework for Committees in Common

## TERMS OF REFERENCE OF SURREY HEARTLANDS SUSTAINABILITY AND TRANSFORMATION PLAN COMMITTEES IN COMMON

### 1. Introduction

1.1 “**Surrey Heartlands**” is the working description of the area of Surrey serving the residents of NHS Surrey Downs CCG, NHS North West Surrey CCG and NHS Guildford and Waverley CCG (the CCGs). This meaning will apply throughout this document. The combined population of Surrey Heartlands is approximately 850,000 and covers residents in nine borough councils.

Surrey Heartlands is made up of the constituent organisations which primarily commission and provide health and social care services to its population, namely:

- Ashford & St Peter’s Hospitals NHS Foundation Trust
- CSH Surrey Ltd
- Epsom & St Helier Hospitals NHS Trust
- Guildford & Waverley CCG
- North West Surrey CCG
- Royal Surrey County Hospital NHS Foundation Trust
- South East Coast Ambulance NHS Foundation Trust
- Surrey & Borders Partnership NHS Foundation Trust
- Surrey County Council
- Surrey Downs CCG
- Virgin Care Services Ltd

1.2 A **Sustainability and Transformation Plan (STP)** has been requested from every health and care system in England by NHS England. An STP is a place-based, multi-year plan built around the needs of local populations, which will drive a genuine and sustainable transformation in patient experience and outcomes. A draft STP was submitted to NHS England on 30 June 2016 and the final document will be submitted on 21 October 2016. Thereafter the STP will need to be completed in accordance with a mobilisation and delivery plan.

## 2. Governance Arrangements

The principal governance for the STP will be through: (a) a Transformation Board, comprising the Chief Executive, Clinical Chair, Medical Director/Lead Professional for each of the constituent member organisations which form Surrey Heartlands, and (b) the named Senior Responsible Officer (SRO) for Surrey Heartlands, Julia Ross, Chief Executive of NHS North West Surrey CCG. As detailed in its terms of reference, the purpose of the Transformation Board is to seek a shared view of the strategic direction of Surrey Heartlands, in order to achieve the wider system assent to the STP. Final sign off of the STP prior to its submission will be made by the constituent member organisations through this 'Committees in Common' arrangement, representing the formal decision making body.

### 2.1 Establishment of the 'Committees in Common'

2.1.1. Partners to this arrangement are the constituent members of Surrey Heartlands.

2.1.2. The Governing Bodies and Boards of each of the member organisations have agreed to establish a committee with delegated authority to be responsible for its decision-making in relation to the Surrey Heartlands' STP, according to these Terms of Reference.

2.1.3. The STP Committees are collectively called the Surrey Heartlands' STP Committees in Common (SH STP CiC) and each of them shall be called an SH STP CiC member. Each SH STP CiC member retains its own decision-making accountability and exercises its powers concurrently with the others through the meeting of the SH STP CiC. SH STP CiC members shall meet together as the SH STP CiC, at the same time, to discuss, debate and make decisions in relation to the STP. It will be permissible for members of the committees to join the meeting remotely by conference call or other digital or electronic means, subject to agreement by the convener that arrangements for them to contribute effectively in the meeting are in place.

2.1.4 Each of the SH STP CiC members has delegated authority to make decisions about the STP on behalf of its organisation.

2.1.5 Since each of the members has delegated powers from its respective Governing Body/Board to make decisions in relation to the STP, decisions of each member will not need to be ratified by its Governing Body or Board.

2.1.6. As a separate committee with full delegated authority from its own Governing Body/Board, each SH STP CiC member will bind its organisation so that when they meet together as SH STP CiC decisions are finite. Any such decision is to be achieved by consensus of all the SH STP CiC members.

2.1.7. The functions of the SH STP CiC are set out in paragraph 3 below.

2.1.8 Each SH STP CiC will provide evidence that its parent organisation has approved these terms of reference.

2.1.9 In the event that any member organisation of the SH STP CiC is unable (whether by law, regulation, constitution or otherwise) to delegate authority to a SH STP CiC member, then such a member organisation of the STP will be requested by the Convener to provide

evidence in order to satisfy the SH STP CiC that it has taken all reasonable measures to approve the documents set out in paragraph 3.1 and 3.2 below

### **3. Functions of the Surrey Heartlands' Sustainability and Transformation Plan CiC**

In order to ensure timely submission and subsequent mobilisation of the Surrey Heartlands' STP, the SH STP CiC will take decisions to achieve delivery of the following key milestones:

- (1) Approve the final STP submission by 21 October 2016
- (2) Approve the mobilisation plan for delivery
- (3) Further work will be undertaken by the governance working group of the STP group to recommend arrangements for ongoing decision-making in relation to the STP post the October submission.

### **4. Scope of decision making**

#### **4.1 Achieving Consensus**

The core value and intention of the SH STP CiC is to make decisions based on achieving consensus across the participating organisations. Member committees, as a first principle, will have taken into account the views of each of their organisations and key stakeholders, with reference to an agreed 'ethical process' (refer Appendix B) which underpins this aspiration. In order for any decision to be taken, there will need to be support for the decision from each SH STP CiC member. Decisions agreed by the SH STP CiC will be collectively supported by each member organisation by the implementation of agreed actions supported by stakeholder communication.

#### **4.2 Delegated authority for SH STP CiC**

Each SH STP CiC member will perform the functions delegated to it by its Governing Body in relation to the functions of the SH STP CiC (see Terms of Reference at Addenda 1-11).

### **5. Membership of the SH STP CiC**

5.1 The SH STP CiC shall not have a chair but instead shall appoint an individual with responsibility for convening meetings (the Convener). The Convener of the SH STP CiC will be Jonathan Perkins, lay member for governance, NHS Surrey Downs CCG. The Convener shall not be a member of SH STP CiC; he will not be part of the decision-making process. The Convener shall support the SH STP CiC in trying to reach a consensus for each decision.

5.2 The members of each SH STP CiC shall comprise up to three voting members from each of the Governing Bodies/Boards. For the avoidance of doubt, it is noted that there will be no collective vote as part of the SH STP CiC; each SH STP CiC will take its own vote and together these must form a consensus view to be taken forward by the STP. (It will be part of the role of the Convener from time to time to establish the views of each STP Committee and whether a consensus has been reached by that member). It is suggested

that membership of each CiC member delegated committee should include an Executive, Clinician and lay member/Non-Executive Director/Chair voting member of the parent Governing Body/Board, but it is open for each participant to identify their membership, on the proviso of full delegated decision-making authority.

5.3 The nominated members for each SH STP CiC are listed in the table preceding the addenda for each of the individual committees (page 6) and also detailed in the separate addendum for each Governing Body and Board.

## **6. Attendees**

6.1 The Convener of the SH STP CiC may, at his discretion, permit other persons to attend a meeting of SH STP CiCs but, for the avoidance of doubt, any persons in attendance at any such meeting shall not count towards the quorum or have the right to make decisions at such meetings.

6.2 Any 'supporting' attendees nominated to attend in observer (non-voting) capacity for their respective organisations will be set out in their addendum. Members of the STP Core Team will be in attendance, together with any other people contributing to the STP as may be required to provide information or for the effective operation of the CiC.

## **7. Attendance at meetings**

The expectation is that SH STP CiC members will attend all meetings. It is essential that the Committee administrator (see paragraph 10) is advised of any non-attendance in advance of the meeting, so that a quorum is maintained for decision making.

## **8. Quorum**

The quorum for a meeting of the SH STP CiC shall be calculated by reference to the quorum specified for each constituent member organisation's STP Committee, as set out in the Addenda attached to this Framework. All constituent member organisations must participate in CiC decision making.

## **9. Meetings**

9.1 The SH STP CiC shall meet at such times and places as the Convener may direct on giving reasonable written notice (of not less than 7 days) to the members of the SH STP CiC. Wherever possible meetings will be scheduled to ensure they do not conflict with member organisation's Governing Bodies/Boards.

9.2 Meetings of the SH STP CiC shall be open to the public, unless there is consensus agreement on the part of SH STP CiC that they meet privately to consider an item of business.



9.3 A protocol for meetings in public is included at Appendix A.

## **10. Administration and Relationship between CIC and Governing Bodies and Boards**

Support for the SH STP CiC will be provided by NHS North West Surrey CCG.

The principal contact is Ian Pocock, Governing Body Secretary, telephone 01372 232468 or 07342 063574, e mail [Ian.Pocock@nwsurrey.ccg.nhs.uk](mailto:Ian.Pocock@nwsurrey.ccg.nhs.uk)

Papers will be circulated to SH STP CiC members no later than one week prior to each meeting. By exception, and only with the agreement of the Convener, items of urgent business may be subject to later circulation. Minutes will be kept of all decisions and recommendations of the SH STP CiC and copies circulated to all member organisations as soon as reasonably possible following the end of the meetings to which they relate.



**Addenda [Surrey County Council extract]**
**ADDENDUM 9 (of 11) to Surrey CCGs' Framework for 'Committees in Common' - supporting Surrey Heartlands' governance arrangements for decision making.**

Surrey County Council agrees to participate in the Surrey Heartlands' Sustainability and Transformation Plan Committees in Common, working in accordance with the agreed 'Framework'.

Surrey County Council's Sustainability and Transformation Committee is convened as follows:

<b>Membership (voting Board members)</b>	<i>Cabinet Member for Wellbeing and Health Chief Executive Strategic Director Adult Social Care &amp; Public Health</i>
<b>Nominated deputies</b>	<i>Cabinet Member for Adult Social Care, Wellbeing and Independence (deputy for Cabinet Member for Wellbeing and Health) Deputy Chief Executive (deputy for Chief Executive) Deputy Director Adult Social Care (deputy for Strategic Director Adult Social Care &amp; Public Health)</i>
<b>Quoracy</b>	<i>Two members. Nominated deputies may be part of the quorum where required.</i>
<b>Convener</b>	<i>The Convener of the Surrey Heartlands' Sustainability and Transformation Plan 'Committees in Common' is Jonathan Perkins a lay member (Governance) of Surrey Downs CCG Governing Body. The Convener role is shared by the individual 'Committees', but is not a member of any of the committees or part of the decision making process. For the avoidance of doubt, s/he will facilitate the wider discussions to inform the decisions and work towards achieving consensus, but will not participate in individual committee's debate to reach their final decisions.</i>
<b>In attendance (non voting) officers</b>	<i>TBC</i>
<b>Scope of decision making</b>	<i>(1) Sign off of the Sustainability and Transformation Plan in accordance with the stipulated deadline ( 21 October 2016) (2) Sign off of the mobilisation plan.</i>
<b>Decision making</b>	<i>The Committee will arrive at its decisions through consensus.</i>
<b>Calling Meetings</b>	<i>At such times and places as the Convener may direct on giving reasonable written notice.</i>

SIGNED on behalf of .....

Chief Executive:

Date:

Chair:

Date:

## Appendix A

### Protocol for Meetings in Public

#### 1. Introduction

The purpose of this protocol is to provide guidance on the preparation and running of any Committees in Common (CiC) meeting in public.

#### 2. Preparation for a Meeting in Public

Before a meeting in public is called, the agenda and arrangements for the meeting should be agreed with the Convener and consulted upon with members at a preceding meeting.

The costs of holding meetings in public will be met from the STP budget.

The following issues should be considered at the initial preparation stage:

**Objectives/purpose.** Subject to paragraph 9 of the terms of reference, decisions should be taken at meetings in public.

**Time, date and venue.** Consideration should be given to the likely number of attendees, thinking particularly about places that have convenient access for people with disabilities. A suitable venue should be chosen which can accommodate the numbers expected to attend.

**Publicity.** The event should be publicised as far in advance as possible so that people can plan to attend, know where to go and what to expect. The CiC will be required to publicise the event as follows:

- All CCG member websites and in the normal places where local CCG Governing Board meetings are publicised (by CCGs)
- A dedicated consultation website if this is established.
- Through key stakeholder groups to be identified when the agenda for the meeting is set (by STP Programme Team and CCGs where applicable).

**Convener arrangements.** Meetings in public will be convened by the appointed lay Convener who will facilitate discussions and be required to work with the team to agree the use of presentational aids (where required) and general housekeeping matters.

**Provide accessible and timely information.** The CiC will publish the agendas (only) for all meetings in public one week in advance of the meeting taking place on the dedicated or CCGs' website. Unless otherwise directed by the CiC, Members will receive papers for meetings in public one week in advance of the meeting taking place, at which point papers will be available to the public on request. This is subject to any restriction that may be in place which would not make this possible to comply with. To ensure papers are accessible, each paper will have an overview summary or introduction to the topic that external audiences can easily understand.

### 3. Guidelines for the Meeting

#### ***The role of the Convener should be to:***

- open the meeting
- keep the meeting focused on the agenda – if necessary, to refer people back to the agenda
- make sure that everyone who wants to speak gets an opportunity – not allowing one or two people to dominate proceedings
- draw the meeting to a close at the appropriate time.

#### ***Creating the right atmosphere***

The organiser(s) should aim to arrive at the venue in good time to check that any equipment and facilities requested are in place. This will include any catering arranged, as well as the equipment needed at the meeting. The location of fire doors and alarms should also be checked. Those attending should be greeted as they arrive, avoiding any serious debates or discussions before the meeting starts.

#### ***Making a good start***

The meeting should be started at the time arranged, with the appropriate introductions and a summary of the purpose of the meeting. If it is likely to be a while before the attendees can express their views (e.g. because there is a short, initial presentation), this should be made clear, so that people have an expectation about the way the event is likely to proceed.

#### ***Getting the most from the meeting***

Make good use of questions raised at the meeting to probe, challenge and fully understand the views that people may have

Arrange for someone to keep notes on the main points raised

Keep an attendance sheet, with contact details, so that those attending can be provided with follow up information

At the end of the meeting thank people for attending and explain clearly what the next steps will be.

#### ***After the Meeting***

All agreed actions should be followed up after the event. Consideration should also be given to lessons learnt from the process, such as:

- did the meeting achieve what was expected?
- what aspects of the meeting were successful and what did not work?
- did things go as planned or were there any surprises?
- were there any problems that could have been avoided?

## Appendix B

### An Ethical Framework for Decision making (Rowson 2006<sup>1</sup>)

Component	Application to Decision making
<b>FAIRNESS</b>	<p>This is linked to the concept of justice – the “equal treatment of equal cases” – but does not necessarily mean that everyone is treated the same regardless. It is about meeting everyone’s individual needs fairly, where certain groups or individuals may require care above what is required for other groups.</p> <p>Fairness is also about providing benefits such as healthcare, education, social welfare, opportunities and protection equally to everyone and distributing burdens/responsibilities equally as well.</p>
<b><i>Respect for</i> AUTONOMY</b>	<p>This is allowing individuals to make their own decisions by giving them all the correct information, in a way they can understand and by giving them enough time to decide. There should be no interference with this process and no one making the decisions should be placed any undue influence.</p>
<b>INTEGRITY</b>	<p>Actions should match what the decision makers believe to be right, with a wholehearted commitment to a set of professional values. This is about embracing the code of conduct and always working within its guidance and direction. Being honest, acting with integrity and probity at all times. Ensuring that the best interests of service users and the public are upheld within decision – making, that resources are protected from corruption and fraud, and that judgements about colleagues are fair, unbiased and consistent being properly founded.</p>
<b><i>Seeking the most beneficial</i> RESULTS</b>	<p>This is about seeking the most beneficial and least harmful consequences or results – firstly to produce as many benefits as possible from decisions made, and secondly to avoid causing and prevent as much harm as possible.</p> <p>It is about being aware of the wider effects decision can have and working to maximise benefits, whilst minimising or removing any potential harm. Within decision making, it is about recognising the problems and negative consequences and then being open and honest about them, especially to those service users or staff who it affects, and then moving forward together to try and find a solution if possible.</p>

<sup>1</sup> “Working Ethics: How to Be Fair in a Culturally Complex World, Richard Rowson, 2006

**SURREY COUNTY COUNCIL****CABINET****DATE: 18 OCTOBER 2016**

**REPORT OF: MRS LINDA KEMENY, CABINET MEMBER FOR SCHOOLS,  
SKILLS AND EDUCATIONAL ACHIEVEMENT  
MRS HELYN CLACK, CABINET MEMBER FOR WELLBEING  
AND HEALTH**

**LEAD OFFICER: GARATH SYMONDS, ASSISTANT DIRECTOR FOR  
COMMISSIONING AND PREVENTION**

**SUBJECT: DELIVERY OF NEW SPEECH AND LANGUAGE THERAPY  
SERVICE AND JOINT COMMISSIONING ARRANGEMENTS FOR  
SPECIALIST SCHOOL NURSING SERVICE**

<b><u>SUMMARY OF ISSUE:</u></b>
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Consultation with families, schools and other stakeholders has identified a significant opportunity to improve the speech and language therapy service for children and young people in Surrey.

In response to this feedback, Cabinet agreed a joint commissioning strategy between Surrey County Council and Surrey Clinical Commissioning Groups in May 2015. Cabinet agreed that speech and language therapy services for mainstream schools would be delivered directly by Surrey County Council and services for specialist settings would be delivered by schools. New arrangements for this service would be implemented from September 2016.

This paper details the principles for TUPE arrangements as the service moves towards implementation. It also outlines the proposal to bring the service for specialist settings into Surrey County Council, to sit alongside the mainstream service and changes to joint commissioning arrangements between Surrey County Council and Surrey Clinical Commissioning Groups for the Special School Nursing Service provided to children and young people in Surrey special schools.

<b><u>RECOMMENDATIONS:</u></b>
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It is recommended that the Cabinet agree that:

1. Surrey County Council will continue to jointly commission the Specialist School Nursing service with Surrey Clinical Commissioning Groups.
2. the speech and language therapy service for special schools and specialist settings will transfer to Surrey County Council alongside the mainstream school service from April 2017

3. approximately 64 staff will transfer across to Surrey County Council from April 2017.

<b>REASON FOR RECOMMENDATIONS:</b>
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### **Speech and Language Therapy**

In February 2014, Cabinet agreed to issue new contracts to Virgin Care Services Ltd and CSH Surrey Ltd for an additional three years whilst joint commissioning arrangements were agreed with Health. These contracts expire in March 2017; therefore there is a requirement for new service arrangements to be in place from April 2017.

In May, 2015, Cabinet agreed the following decisions regarding the future joint commissioning and delivery of a Speech and Language Therapy Service in Surrey:

1. that the Cabinet approves the draft commissioning strategy and the five joint commissioning principles within the strategy;
2. that the Cabinet agrees in principle to the realignment of commissioning responsibilities for the Council and Surrey Clinical Commissioning Groups;
3. that the Cabinet agrees for work to continue in developing a detailed costing model for a new speech and language therapy service. At this stage it is estimated to mean an increase of £377,000 in the Council's budget, to be made available from the Schools' High Need Block and will be subject to Schools Forum approval in June; and
4. that the Cabinet agrees that the new speech and language therapy service should be procured through devolving funding directly to special schools and specialist centres and bringing the mainstream service in-house to the Council. This service will be fully in place from September 2016.

The joint commissioning strategy agreed between Surrey County Council (SCC) and Surrey Clinical Commissioning Groups (CCG) means the realignment of commissioning responsibilities for each organisation. SCC will become responsible for commissioning the school aged services and Surrey CCGs will re-direct resource into Early Years.

This Cabinet paper sets out further changes to the proposals detailed in the May 2015 Cabinet paper. These changes are:

- postponing the implementation date from September 2016 to April 2017. This date was put back whilst discussions took place with current providers of the service. Following further dialogue, both providers were satisfied that their concerns were being addressed and implementation could progress; and
- bringing the service for specialist settings (Surrey special schools and specialist centres) into SCC to sit alongside the mainstream service.

A jointly commissioned service that brings the school-aged service into SCC will offer the following benefits. These include:

- a service that achieves value for money – where the therapy service will be educationally focused and child-centred;
- reducing the gap in accessing speech and language therapy input between children and young people who have an Education, Health and



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Care plan and those that do not;

- offering a school-based delivery model rather than a health-focused one, will enable therapists to focus their time on supporting the child and school;
- removing barriers in accessing the service, for example, restrictions relating to where a child might live or which GP the child is registered with will no longer apply;
- investment into the early years service which reduces waiting times from referral and intervention, building trust and confidence in the system for families and reducing the number of children entering school with speech, language and communication needs;
- jointly commissioned speech and language therapy services across Surrey for children and young people aged 0-25 years;
- a service model which has been evidenced to work in other local authority areas and that has an impact on achieving positive outcomes for children and young people;
- clear commissioning principles and arrangements in place with Education and Health, including funding responsibilities; and
- improving the school offer in state funded provision, therefore instilling trust and confidence for families in the local school provision and reducing Surrey's reliance on the non-maintained and independent sector.

The Children and Families Act 2014 is clear that most speech, language and communication needs form part of a child's overall education needs and are not health related. On-going contract management of the current speech and language therapy services in Surrey has not been able to reshape a Health managed service into one that can provide schools with what they need to embed this service into their education offer for children and young people. In the new service, working days and leave will be organised around the school day and entitlement to the service will no longer be based on where a child lives or which GP a child is registered with. Recruitment, selection and training of therapy staff that is managed by an education service will ensure that staff are equipped with the skills and understanding to support schools and children and young people in the classroom. In addition, aspects of record keeping and training mandated by the Health service will no longer apply, freeing up therapists' time to provide direct therapy support.

A jointly commissioned service between SCC and Surrey CCGs across Surrey will provide an equitable and consistent offer for children and young people aged 0-25 years. This means that children and young people will access the service based on need regardless of whether they have a statutory plan in place or not.

Approximately 64 staff will be transferring across to SCC from April 2017 and Cabinet should be reassured that a key set of principles with regards to TUPE are being applied to the process.

### **Special School Nursing Service**

There was reference in the May 2015 Cabinet paper that the Council would cease funding of this service and resources would be re-directed into the new speech and language therapy service. This was ultimately not possible as the service would be effectively decommissioned. Instead, SCC negotiated a 50:50 funding arrangement

with CCGs, improving the SCC position from the current funding of 66%.

The SEND 2020 programme focuses on the importance of developing local provision for children and young people with Special Educational Needs and Disabilities (SEND) through joint partnership with Health. Jointly commissioning the Special School Nursing Service supports the new SEND joint inspection framework and SEND Performance scorecard.

#### **DETAILS:**

1. Speech and language therapy services for children and young people in Surrey have until now been commissioned separately by the CCGs and the Local Authority. Commissioning authorities spend an estimated total of £4.1m on speech and language therapy services in Surrey. The Council has an allocation of £2.4m which is provided from the Dedicated Schools Grant (DSG) and CCG's estimated current spend is £1.7m.
2. The new joint commissioning strategy sets out to realign provision to meet the commissioning responsibilities and intentions of Surrey's CCGs and Surrey County Council to meet the speech, language and communication needs (SLCN) of children in Surrey.
3. Early identification, timely interventions and an integrated school offer will create a service that is built from trust and confidence in the system, where meeting the communication needs of a child or young person is seen as everybody's responsibility.
4. Implementing this joint commissioning strategy and bringing the service into SCC provides the following features:
  - jointly commissioned speech and language therapy service across Surrey for children and young people aged 0-25 years which focuses on achieving good outcomes and is co-designed with families and schools;
  - a core speech and language therapy service offer for mainstream schools, with proposed development of a traded offer for schools;
  - clear commissioning principles and arrangements in place between Education and Health, including funding responsibilities;
  - investment into early years by CCGs which focuses on early identification of need and timely intervention (i.e. significantly reduced waiting times and therapy at a time when it is needed); and
  - speech and language therapy that forms part of an integrated school offer for children and young people in specialist SEND provision;

#### **Bringing the Service for Specialist Settings into Surrey County Council**

5. In May, 2015, Cabinet agreed that the speech and language therapy service for mainstream schools would come into SCC and funding for specialist settings would be devolved to schools directly to deliver this service through a hub and spoke approach. It is now proposed that both the mainstream service and the service for specialist settings will come into SCC and sit within the Schools and Learning service.

6. Although special schools have told us that they are currently not able to manage the delivery of a speech and language therapy service directly, they continue to support the need for change away from the current provision of speech and language therapy. Special schools recognise that this change needs to be a sustainable model of provision that negotiates a path through the changes in the next few years, particularly those brought about by the academisation process.
7. Therefore it is recommended that speech and language therapists will be employed centrally by SCC whilst more local models of delivery are developed.
8. Bringing the service for specialist settings into SCC offers a number of additional benefits, these are:
  - a combined service offering greater certainty and security to current therapy teams;
  - change to the service that can be managed and introduced by one organisation;
  - all staff will be entitled to Transfer of Undertakings (Protection of Employment) Regulations 1981 (TUPE), which would not have been the case if they were transferring to a Hub which was an academy; and
  - greater opportunities for development, career progression and skills mix
9. This aligns closely to the current SEND Development plan (2016-2020) which commits to:
  - children and young people can access high quality community-based local provision that enables them to achieve the right outcomes based on their personal needs;
  - families can access early help and intervention; and
  - meeting the gaps in local provision
10. A project group and several sub-groups have been set up to support the implementation of the new service. Representation on these groups includes families, schools and providers. Consultation and engagement with families and schools has also taken place throughout the process and communication with families, schools (including Phase Councils) will be key, post-implementation, in order to ensure that any issues are addressed early.

### **TUPE Arrangements and Principles**

10. SCC believes the TUPE regulations apply for the provision of speech and language therapy services for school-aged children in mainstream schools and specialist settings.
11. Where the assignment of transferring individuals is not clear, either because employees have a number of roles or work in corporate functions providing generic support, the principles that should be applied to determine the assignment should be:
  - The amount of time spent by the employee on activities. A 50% plus specific allocation to the activities transferring would normally be decisive but other criteria should be considered, including:
    - the cost of the employees and their budget allocation;
    - the job and role description for the employee; and

- the value or significance of the work on the activities transferring within the employee's overall role.
12. This service will transfer across from Virgin Care Limited and CSH Surrey to SCC and will be brought in house and delivered by the Council with effect from 1st April 2017.
  13. It is estimated that the contracts of employment for approximately 64 staff (50 working time equivalents) will come across to SCC. These numbers are currently being validated with the two providers.
  14. If TUPE applies therapy staff will:
    - transfer on existing terms and conditions of employment;
    - have their continuity of service preserved;
    - have collective agreements and TUPE recognition rights transferred;
    - HR have informed Virgin Care Services and CSH Surrey that SCC believes that TUPE applies and the Council will undertake due diligence. Meetings will take place with the employees prior to their transfer on 1 April 2017; and
    - Surrey Pensions Department are seeking clarification from the NHS Pension Scheme about the Original Direction Order used for when Public Health staff transferred across to SCC to determine whether a new Direction Order would be appropriate.

#### **Special School Nursing Service**

15. The joint procuring of Children's Community Health Services between the Council and Surrey's CCGs was approved in November 2015. Commissioning and procuring NHS and Public Health services jointly will help to provide a seamless service for users and carers and reflects the synergies that exist between the services commissioned by the CCGs and the Council.
16. The Council commissions a number of services that are part of this procurement; this includes the Special School Nursing Service (SSNS). To ensure best outcomes are achieved for Surrey's children and young people as well as delivering the necessary financial efficiencies, the procurement has placed scrutiny on the funding for services to be commissioned.
17. The SSNS is a jointly commissioned service between SCC and the CCGs. The service is provided to approximately 700 pupils in the eight schools that cater for children with severe and profound learning disabilities (SLD).
18. The SSNS costs £0.67m. SCC currently funds 66% of this (£0.45m) and the CCGs 34% (£0.23 m). The Council funds this service from the high needs block of the Dedicated Schools Grant (DSG). In a paper to Cabinet in May 2015 reference was made to using funding (£0.454m) from the SSNS to increase capacity and change the model of the schools based Speech and Language Therapy Service.
19. A review of SSNS in 2014 supported the move towards a reduction in spend on the SSNS being favoured by the Council with the intention that funds from the SSNS would be redirected to speech and language to enable re-modeling and delivery of the Schools Based Speech and Language Therapy service.

20. The SEND 2020 programme and Children's Community Health Service procurement called for a fresh look at SSNS provision in Surrey and SEND 2020 is focusing on developing local provision across the area and reducing the number of pupils placed out of county. It set out the risks associated with any reduction in spend for the SSNS for both the Council and the CCGs. These included the possibility of an increase in children whose needs could not be met and more children being placed in non-maintained and independent schools, impacting on the Council's high needs budgets.
21. Legal and statutory guidance show that CCGs, local authorities and schools all have a responsibility for ensuring that children receive the medical support they require to stay in school. The SSNS has a large role to play in enabling this to happen for children in Surrey's eight SLD schools and in the future a wider responsibility to all children with a special educational need or disability.
22. Further to the 2016 review of SSNS it is recommended that the SSNS continues to be funded at current levels with SCC and the CCGs funding this at an equal level of 50% each. This will result in a reduction in the Council's overall spending on the SSNS by 27% (£0.120m).
23. Surrey CCGs have already gained agreement to increase their level of contribution to the funding of this service.

#### **CONSULTATION:**

- Speech and Language Therapy Project Group.
- Special School Phase Council.
- Therapy Staff engagement events.
- SEND Partnership Board (key members include Health, Schools and Family Voice) - 15 September 2016.
- Committee in Common (this was set up as part of the approval for Children's Community Services and membership includes Cabinet Member for Wellbeing and Health).

#### **RISK MANAGEMENT AND IMPLICATIONS:**

##### **Speech and Language Therapy Service**

25. Instability of staff due to change in employer. A number of staff transferring across to SCC will have only worked for a Health provider in their career and may have concerns working for a different employer. This could lead to a limited service due to vacancies. This risk is being mitigated by developing a recruitment strategy, plans to working with local universities, a skills mix which includes newly graduated professionals, increased communication with therapy staff (i.e. staff engagement events) and the development of clear career progression pathways.
26. There is a risk involved with the transfer of service user records from two different case management system across to a separate case management system within SCC. This is being mitigated through close working with health

providers, development of formal agreements with both providers and scheduled tests leading up to the transfer date.

27. The Council will be taking on all existing terms and conditions including any contractual redundancy for all staff who transfer across to SCC. It is not anticipated that there will be redundancies when the service transfers across to SCC.
28. Risk of service disruption by having a separate early years and school-aged service. This is being mitigated by a series of workshops planned later this year. Once the Children's Community Services provider is announced to agree clear pathways for children moving from the Early Years service to the school-aged service.
29. It is likely that there will be some issues arising from the realignment of responsibilities between SCC and the CCGs. To mitigate this, the SEND Partnership has agreed to a time-limited advisory body being established to support the early implementation of the Speech and Language Therapy Service. It is proposed that membership of the advisory group would comprise of SCC, representatives of Surrey CCGs, the new single Children's Community Services provider, schools and families. The group will advise on early issues or unforeseen situations that may arise as the new Speech and Language Therapy Service is implemented.

#### **Financial and Value for Money Implications**

30. Planning for the new Speech and Language Therapy Service, as reported to Cabinet in May 2015, was based on redirecting resources from the SSNS to augment the new service model. The subsequent review of SSNS and the recommendation to continue joint commissioning with Health, albeit at a reduced cost, means that the resources available for speech and language are reduced as set out in the table below:

	May 2015	Oct 2016 (current position)
	£s	£000s
Speech and Language Budget	2,420	2,420
Additional resources approved by Cabinet and Schools Forum 2015	213	213
Health Contribution to meet health needs in schools	70	70
	2,703	2,703
	0.450	0.120
	3,153	2.830

30. Therefore the costs of the Speech and Language Therapy Service will now be managed within the reduced budget envelope of £2.8m. Resources will need to be reprioritised and redirected to fund the new service as it develops.
31. It is understood that TUPE applies and SCC will be responsible for taking on all existing terms and conditions for therapy staff supporting specialist settings.

There are no material financial implications to the County Council expected following TUPE transfer.

32. In line with the SEND 2020 Strategy, the future proposals are to expand the Speech and Language Therapy Service in schools compared to current provision so there are no plans for staff reductions.

#### **Section 151 Officer Commentary**

31. The 2017/18 budget will be set at £2.8m for the Speech and Language Therapy Service. If planned costs exceed this funding level and/or proposals to expand the service are implemented, then resources will need to be redirected to this service budget.
32. The new service is expected to contribute to the SEND 2020 strategy, over time reducing the level of Education, Health and Care Plans (EHCP), increasing inclusion and reducing the number of NMI placements thereby leading to eventual savings. Recent consultations and workshops suggest that the Speech and Language Therapy Service is valued by stakeholders in the Surrey school's community.

#### **Legal Implications – Monitoring Officer**

33. Under Part 3 of the Children & Families Act 2014 the Authority has a duty to identify and assess the special educational needs of the children and young people for whom it is responsible. Once assessed the special educational provision that is specified in any EHCP (previously known as a statement of special educational needs) must be provided by the Council. Such provision often includes therapies.
34. Under the proposed strategy that the Cabinet is asked to endorse, the Council will take on responsibility for all the speech and language therapy provided in maintained schools including the therapy previously provided by Health through the CCGs. Although the strategy proposes a realignment of commissioning responsibility, it has no bearing on the Council's underlying statutory responsibility to children and young people to provide what is set out in EHCPs. Accepting commissioning responsibility should make it easier for the Council to ensure that it is able to comply with its statutory obligations.
35. As has been recognised in paragraphs 22-26, TUPE will likely apply. If TUPE applies, employees of the outgoing contractors transfer on existing terms and conditions to SCC and the Council will be obligated to observe TUPE regulations regarding informing and consulting affected staff.

#### **Equalities and Diversity**

36. Equality Impact Assessments have been completed for both the new Speech and Language Therapy Service and the Specialist School Nursing Service. Both assessments can be accessed through the Members' Reading room.

#### **WHAT HAPPENS NEXT:**

#### **Speech and Language Therapy Service**

**November 2016**

Staffing structure for new service agreed

Information sharing letters sent out to service users

Business Process agreed

Staff conference takes place

**December 2016**

Therapy staff eligible for TUPE transfer confirmed

**February 2017**

Case management system established

**March 2017**

Data migration takes place

**April 2017** – Service implemented

**Specialist School Nursing Service**

**October 2016** - Contract award for new Children's Community Services provider made

**April 2017** – Service implemented

**Contact Officer:**

Beverley Clarke, Head of Additional and Special Educational Needs  
Zarah Lowe, Provision and Partnership Development Manager

**Consulted:**

Surrey Clinical Commissioning Groups, Therapy Providers, Schools and Families

**Sources/background papers:**

- May 2015 Cabinet Paper – Joint Commissioning Strategy for Speech and Language Therapy
  - Surrey Joint Commissioning Strategy for Speech and Language Therapy
  - SEND 2020 Development Plan
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**SURREY COUNTY COUNCIL****CABINET****DATE: 18 OCTOBER 2016****REPORT OF: MR DAVID HODGE, LEADER OF THE COUNCIL****LEAD OFFICER: SHEILA LITTLE, DIRECTOR OF FINANCE****SUBJECT: LOCAL GOVERNMENT FINANCE SETTLEMENT – TECHNICAL CONSULTATION****SUMMARY OF ISSUE:**

On 15 September 2016 the Department for Communities and Local Government issued a technical consultation paper on the 2017/18 Local Government Finance Settlement.

The consultation covers a number of funding areas and seeks the views of local authorities and their representative bodies. The areas covered particularly affecting Surrey County Council include the four year offer; the methodology for distributing the improved Better Care Fund; council tax referendum principles, the business rates revaluation and more indirectly, the treatment of areas piloting 100% retention of business rates.

As a key part of its financial sustainability strategy, the Council will respond to this consultation and input into other representative bodies' responses. The deadline for responses is 28 October 2016.

**RECOMMENDATIONS:**

Cabinet is asked to approve:

1. the Council's response to the consultation paper (Annex **Error! Reference source not found.**1 - to follow), and
2. the Leader's covering letter to the Department for Communities and Local Government (Annex 2 - to follow).

**REASON FOR RECOMMENDATIONS:**

Surrey County Council (SCC) is facing a significant financial challenge in creating a balanced and sustainable budget for 2017/18 and beyond. The methodologies to distribute resources within the Local Government Finance Settlement will have a material impact on the council's funding.

**DETAILS:**

1. Annex 1 to this report provides the detailed response to the 2017/18 Local Government Finance Settlement technical consultation paper. Annex 2 is the proposed letter from the Leader to the Department of Communities and Local Government setting out the Council's principles that underpin its response.

2. The publication of a consultation document ahead of the Provisional Local Government Finance Settlement is welcomed if it is a genuine opportunity to consult the local government sector on the principles behind the Settlement. This is in contrast to the significant changes to local government funding announced in the Provisional Settlement last year which warranted, but did not include, such a technical consultation meaning that the Council was required to deal with a £20m shortfall in funding at very short notice.
3. The consultation confirms that funding available for councils for the remaining four years of this Parliament will remain broadly flat. As a part of this it reiterates the four year offer of 'guaranteed' funding if the offer is accepted and goes further by asking for suggestions of other grants to include in the offer.
4. There are no proposed changes to the Core Spending Power methodology for distributing the Revenue Support Grant (RSG) introduced in 2016/17, including the negative RSG in 2019/20.
5. The Government announced an improved Better Care Fund for local authorities as a part of the 2016/17 Finance Settlement with the intention that this will be phased in from 2017/18 rising to £1.5 billion nationally by 2019/20. Under the proposed methodology SCC would not receive any funding in 2017/18 and 2018/19 and £1.5m in 2019/20 which is 0.1% of the national total.
6. The consultation proposes for 2017/18: a 2% threshold for council tax referendums for the core council tax, and a further 2% adult social care precept.
7. The next business rates revaluation will take effect from 1 April 2017. This is intended to be a revenue neutral exercise where local authorities will neither gain nor lose out by changes to the rates valuations of businesses in their area.

#### **CONSULTATION:**

8. The Council's Section 151 Officer has consulted with the Leader and Deputy Leader of the Council in preparing the response to the Department of Communities and Local Government.

#### **RISK MANAGEMENT AND IMPLICATIONS:**

9. Risk implications are stated throughout the report and annex. The leadership risk register continues to reflect the increasing uncertainty of future funding likely to be allocated to the Council.

#### **Financial and Value for Money Implications**

10. The Finance Settlement, including the distribution of the improved Better Care Fund, will have material financial implications for the Council due to the impact on its key sources of funding.

#### **Section 151 Officer Commentary**

11. The methodologies used in the Finance Settlement have a significant and material impact on the Council's finances. The response to the consultation is therefore carefully considered to make the financial case for the Council.

#### **Legal Implications – Monitoring Officer**

12. There are no legal implications or risks raised in this report.

#### **Equalities and Diversity**

13. Any impacts of the budget monitoring actions will be evaluated by the individual services as they implement the management actions necessary.

#### **WHAT HAPPENS NEXT:**

14. The response to the consultation will be sent to the Department for Communities and Local Government by the deadline of 28 October 2016. The Provisional Local Government Finance Settlement is expected to be in the weeks following the 2016 Autumn Statement on 23 November 2016.

#### **Contact Officer:**

Sheila Little, Director of Finance  
020 8541 7012

#### **Consulted:**

Leader of the Council, Deputy Leader of the Council, Chief Executive..

#### **Annexes:**

- Annex 1 – Surrey County Council Response to the 2017/18 Local Government Finance Settlement Technical Consultation.
- Annex 2 – Covering letter to the Response from Leader of the Council.

#### **Sources/background papers:**

None

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**SURREY COUNTY COUNCIL****CABINET****DATE: 18 OCTOBER 2016****REPORT OF: MR DAVID HODGE, LEADER OF THE COUNCIL****LEAD OFFICER: SHEILA LITTLE, DIRECTOR OF FINANCE****SUBJECT: FINANCE AND BUDGET MONITORING REPORT TO  
30 SEPTEMBER 2016****SUMMARY OF ISSUE:**

The Council takes a multiyear approach to its budget planning and monitoring, recognising the two are inextricably linked. This report presents the Council's financial position as at 30 September 2016 (month six).

The annex to this report gives details of the Council's financial position.

**RECOMMENDATIONS:**

Recommendations to follow.

**REASON FOR RECOMMENDATIONS:**

This report is presented to comply with the agreed policy of providing a monthly budget monitoring report to Cabinet for approval and action as necessary.

**DETAILS:****Revenue budget overview**

1. Surrey County Council (SCC) set its gross expenditure budget for the 2016/17 financial year at £1,686m. A key objective of the Medium Term Financial Plan 2016-21 is to increase the Council's overall financial resilience. As part of this, the Council plans to make efficiencies totalling £83.5m.
2. The Council aims to smooth resource fluctuations over its five year medium term planning period. To support the 2016/17 budget, Cabinet approved use of £24.8m from the Budget Equalisation Reserve and carry forward of £3.8m to fund continuing planned service commitments. The Council currently has £21.3m in general balances.
3. In February 2016, Cabinet approved the Council's Financial Strategy 2016-21. The Financial Strategy aims to:
  - secure the stewardship of public money;
  - ensure financial sustainability; and
  - enable the transformation of the Council's services.

## Capital budget overview

4. Creating public value by improving outcomes for Surrey's residents is a key element of the Council's corporate vision and is at the heart of MTFP 2016-21's £651m capital programme which includes £207m spending planned for 2016/17.

## Budget monitoring overview

5. The Council's 2016/17 financial year began on 1 April 2016. This budget monitoring report covering the financial position at the end of the sixth month of 2016/17 (30 September 2016). The report focuses on material and significant issues, especially monitoring MTFP efficiencies. The report emphasises proposed actions to resolve any issues.
6. The Council has implemented a risk based approach to budget monitoring across all services. The approach ensures effort is focused on monitoring those higher risk budgets due to their value, volatility or reputational impact.
7. A set of criteria categorise all budgets into high, medium and low risk. The criteria cover:
  - the size of a particular budget within the overall Council's budget hierarchy (the range is under £2m to over £10m);
  - budget complexity, which relates to the type of activities and data monitored (this includes the proportion of the budget spent on staffing or fixed contracts - the greater the proportion, the lower the complexity);
  - volatility, which is the relative rate that either actual spend or projected spend moves up and down (volatility risk is considered high if either the current year's projected variance exceeds the previous year's outturn variance or the projected variance has been greater than 10% on four or more occasions during the current year); and
  - political sensitivity, which is about understanding how politically important the budget is and whether it has an impact on the Council's reputation locally or nationally (the greater the sensitivity the higher the risk).
8. Managers with high risk budgets monitor their budgets monthly whereas managers with low risk budgets monitor their budgets quarterly or more frequently on an exception basis (if the year to date budget and actual spend vary by more than 10%, or £50,000, whichever is lower).
9. Annex 1 to this report sets out the Council's revenue budget forecast year end outturn as at 30 September 2016. The forecast is based upon current year to date income and expenditure as well as projections using information available to the end of the month.
10. The report provides explanations for significant variations from the revenue budget with a focus on efficiency targets. As a guide, a forecast year end variance of greater than £1m is material and requires a commentary. For some services £1m may be too large or not reflect the service's political significance so variances over 2.5% may also be material.
11. Annex 1 to this report also updates Cabinet on the Council's capital budget. Appendix 1 provides details of the MTFP efficiencies, revenue and capital budget movements.

### **CONSULTATION:**

12. All Cabinet Members will have consulted their relevant director or head of service on the financial positions of their portfolios.

### **RISK MANAGEMENT AND IMPLICATIONS:**

13. Risk implications are stated throughout the report and each relevant director or head of service has updated their strategic and or service risk registers accordingly. In addition, the leadership risk register continues to reflect the increasing uncertainty of future funding likely to be allocated to the Council.

### **Financial and Value for Money Implications**

14. The report considers financial and value for money implications throughout and future budget monitoring reports will continue this focus. The Council continues to maintain a strong focus on its key objective of providing excellent value for money.

### **Section 151 Officer Commentary**

15. The Section 151 Officer confirms that the financial information presented in this report is consistent with the Council's general accounting ledger and that forecasts have been based on reasonable assumptions, taking into account all material, financial and business issues and risks.

### **Legal Implications – Monitoring Officer**

16. There are no legal issues and risks.

### **Equalities and Diversity**

17. Any impacts of the budget monitoring actions will be evaluated by the individual services as they implement the management actions necessary.

### **WHAT HAPPENS NEXT:**

18. The relevant adjustments from the recommendations will be made to the Council's accounts.

#### **Contact Officer:**

Sheila Little, Director of Finance  
020 8541 7012

#### **Consulted:**

Cabinet, strategic directors, heads of service.

#### **Annexes:**

- Annex 1 – Revenue budget, staffing costs, efficiencies, capital programme.
- Appendix 1 – Service financial information (revenue and efficiencies), revenue and capital budget movements, balance sheet, earmarked reserves, debt and treasury management.

**Sources/background papers:**

- None
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**SURREY COUNTY COUNCIL**

**CABINET**

**DATE: 18 OCTOBER 2016**

**REPORT OF: MS DENISE LE GAL, CABINET MEMBER FOR BUSINESS SERVICES AND RESIDENT EXPERIENCE**

**LEAD OFFICER: SHEILA LITTLE, DIRECTOR OF FINANCE**

**SUBJECT: LEADERSHIP RISK REGISTER**



#### **SUMMARY OF ISSUE:**

The Surrey County Council Leadership risk register is presented to Cabinet each quarter and this report presents the Leadership risk register as at 31 August 2016.

#### **RECOMMENDATIONS:**

It is recommended that the Cabinet note the content of the Surrey County Council Leadership risk register (Annex 1) and endorse the control actions put in place by the Statutory Responsibilities Network.

#### **REASON FOR RECOMMENDATIONS:**

To enable the Cabinet to keep Surrey County Council's strategic risks under review and to ensure that appropriate action is being taken to mitigate risks to a tolerable level in the most effective way.

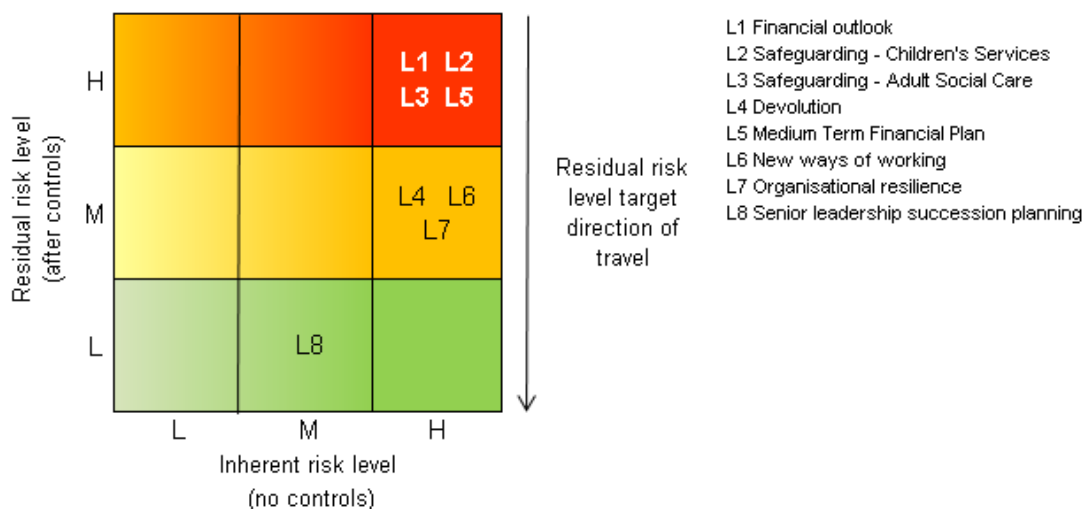
#### **LEADERSHIP RISK REGISTER:**

1. The Surrey County Council (SCC) Leadership risk register (Annex 1) is owned by the Chief Executive and captures SCC's key strategic risks. The risk register focuses specifically on the strategic risks that have the potential to significantly destabilise the organisation.
2. The role of the Cabinet is to assure itself that SCC's strategic risks are captured on the risk register and that appropriate actions are being taken to effectively mitigate the risks to a tolerable level.
3. The Leadership Risk Register is reviewed monthly by the Statutory Responsibilities Network, bi-monthly by the Strategic Risk Forum and the Audit and Governance Committee at each meeting.
4. Scrutiny Boards are also giving further consideration to risk through reviewing directorate and service risk registers.

5. Since the risk register was last presented to the Cabinet in July 2016, updates to the 'processes in place' and 'controls' have been made to the majority of risks, in particular:
- Reference to Government changes (Financial outlook - L1);
  - Changes regarding the Care Act (Safeguarding – Adult Social Care (L3);
  - Updates on Government negotiations and meetings (Devolution – L4); and
  - Reference to the work of the Public Value Transformation (PVT) Board (Medium Term Financial Plan - L5).

### Residual risk level

6. The SCC Leadership Risk Register includes both the inherent and residual risk levels for each risk. Inherent risk is the level of risk before any control activities are applied. The residual risk level takes into account the controls that are already in place or are being put in place, detailed on the risk register as both 'processes in place' and 'controls.'
7. Despite mitigating actions, four risks have a high residual risk level (L1,L2,L3,L5), three risks have a medium residual risk level (L4,L6,L7) and one risk has a low residual risk level (L8): showing the significant level of risk that the Council is facing despite the processes and controls being put in place to manage the risks.



### **CONSULTATION:**

8. The SCC Leadership Risk Register has been reviewed by a number of senior officer groups and the Audit and Governance Committee.

### **RISK MANAGEMENT AND IMPLICATIONS:**

9. Effective management of risks and financial controls supports the Council to meet its objectives and enable value for money.

### **Financial and Value for Money Implications**

10. There are no direct financial implications relating to the SCC Leadership Risk Register.

### **Section 151 Officer Commentary**

11. The Section 151 Officer is well sighted of current and emerging risks through being Chair of the Strategic Risk Forum, a member of the Statutory Responsibilities Network and a direct report to the Chief Executive Officer. Her attendance at key strategic meetings provides further insight and ensures an integrated risk approach.

### **Legal Implications – Monitoring Officer**

12. There are no direct legal implications relating to the SCC Leadership Risk Register.

### **Equalities and Diversity**

13. There are no direct equalities implications but any actions taken need to be consistent with the Council's policies and procedures.

### **WHAT HAPPENS NEXT:**

14. The SCC Leadership Risk Register will be presented to the Cabinet on a quarterly basis.

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#### **Contact Officer:**

Cath Edwards, Risk and Governance Manager  
Tel: 020 8541 9193

#### **Consulted:**

Strategic Risk Forum, Statutory Responsibilities Network, Chief Executive and direct reports, Audit and Governance Committee, Cabinet

#### **Annexes:**

Annex 1 – Leadership risk register

#### **Sources/background papers:**

None

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# Leadership risk register as at 31 August 2016 (covers rolling 12 months)

Annex 1  
Owner: David McNulty

**Strategic risks** – have the potential to significantly disrupt or destroy the organisation

Ref	Risk ref.	Description of the risk	Inherent risk level (no controls)	Processes in place (ie the 'how' risks are being mitigated)	Controls (i.e. decisions needed)	Lead risk owner	Residual risk level (after existing controls)
L1	CSF7 EAI1 FN1 ORB10	<b>Financial outlook</b> Lack of funding, due to constraints in the ability to raise local funding and/or distribution of funding, results in significant adverse long term consequences for services.	<b>High</b>	<ul style="list-style-type: none"> <li>Structured approach to ensuring Government understands the council's Council Tax strategy and high gearing.</li> <li>Targeted focus with Government to secure a greater share of funding for specific demand led pressures (in particular Adult Social Care).</li> <li>Proactive engagement with Government departments to influence Government policy changes (especially relative needs assessment, 100% business rate retention strategy and Better Care Fund).</li> <li>Continued horizon scanning of the financial implications of existing and future Government policy changes.</li> <li>Development of alternative / new sources of funding (e.g. bidding for grants).</li> </ul> <p>Notwithstanding actions above, there is a significant risk of Central Government policy changes /austerity measures due to changes in ministerial responsibilities impacting on the council's long term financial resilience.</p>	<ul style="list-style-type: none"> <li>Members make decisions to reduce spending and or generate alternative sources of funding, where necessary, in a timely manner.</li> <li>Officers unable to recommend MTFP unless a credible sustainable budget is proposed.</li> <li>Members proactively take the opportunities to influence central Government.</li> <li>Officers continue to analyse events and create budget scenarios.</li> </ul>	Director of Finance	<b>High</b>
L2	CSF3,4,9	<b>Safeguarding – Children's Services</b> Avoidable failure in Children's Services, through action or inaction, including child sexual exploitation, leads to serious harm, death	<b>High</b>	<ul style="list-style-type: none"> <li>Working within the frameworks established by the Children's Safeguarding Board and the Social Care Services Board ensures the council's policies and procedures are up to date and based on good practice.</li> <li>Adult Social Care and Children, Schools and Families are working as key stakeholders in the</li> </ul>	<ul style="list-style-type: none"> <li>Timely interventions by well recruited, trained, supervised and managed professionals ensures appropriate actions are taken to safeguard and promote the well being of children in Surrey.</li> </ul>	Deputy Chief Executive and Strategic Director of Children's Schools and Families	<b>High</b>

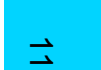
Key to references:

ASC = Adult Social Care risk  
CSF = Children, Schools and Families risk

C&C = Customers and Communities risk  
EAI = Environment and Infrastructure risk

FN = Finance Service risk  
ORB = Orbis risk





## Annex 1

Owner: David McNulty

### Leadership risk register as at 31 August 2016 (covers rolling 12 months)

Ref	Risk ref.	Description of the risk	Inherent risk level (no controls)	Processes in place (ie the 'how' risks are being mitigated)	Controls (i.e. decisions needed)	Lead risk owner	Residual risk level (after existing controls)
Page 124		or a major impact on well being.		<p>further development of the Multi-Agency Safeguarding Hub.</p> <ul style="list-style-type: none"> <li>• Children's Services Improvement Plan is being delivered to address the improvement notice dated 26 January 2016 and strengthen service and whole system capability and capacity. Ofsted visit on a monthly basis to monitor progress.</li> <li>• Assistant Director roles and responsibilities have been reshaped to strengthen leadership and governance.</li> </ul>	<ul style="list-style-type: none"> <li>- Actively respond to feedback from regulators.</li> <li>- Robust quality assurance and management systems in place to identify and implement any key areas of learning so safeguarding practice can be improved.</li> <li>- The Children's Safeguarding board (chaired by an independent person) comprises senior managers from the County Council and other agencies facilitating prompt decision making and ensuring best practice.</li> <li>- An Improvement Board (chaired by the Deputy Leader) oversees progress on the Improvement Plan and agrees areas of action as required.</li> </ul>		
	L3	ASC6,7,13,14	<p><b>Safeguarding – Adult Social Care</b></p> <p>Avoidable failure in Adult Social Care, through action or inaction, leads to serious harm, death or a major impact on wellbeing.</p>	<b>High</b>	<ul style="list-style-type: none"> <li>• Working within the framework established by the Surrey Safeguarding Adults Board ensures that the council's policies and procedures are up to date and based on good practice.</li> <li>• Adult Social Care and Children, Schools and Families are working as key stakeholders in the further development of the Multi Agency Safeguarding Hub.</li> <li>• Established a locality safeguarding advisor to assure quality control.</li> <li>• Strong leadership, including close involvement</li> </ul>	<ul style="list-style-type: none"> <li>- Continue to work with the Independent Chair of the Surrey Safeguarding Adults Board to ensure feedback and recommendations from case reviews are used to inform learning and social work practice.</li> <li>- Actively respond to feedback from regulators.</li> <li>- One year on from the implementation of the Care</li> </ul>	Strategic Director of Adult Social Care & Public Health

Key to references:

ASC = Adult Social Care risk  
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 ORB = Orbis risk

Leadership risk register as at 31 August 2016 (covers rolling 12 months)

Owner: David McNulty

Ref	Risk ref.	Description of the risk	Inherent risk level (no controls)	Processes in place (ie the 'how' risks are being mitigated)	Controls (i.e. decisions needed)	Lead risk owner	Residual risk level (after existing controls)
				by Associate Cabinet Member for Adult Social Care in safeguarding functions.	Act, a new strategic plan for safeguarding within ASC will be implemented.		
L4		<b>Devolution</b> Failure to achieve a 3 Southern Counties (3SC) devolution deal leaves Surrey County Council without a coherent response to the strategic challenges facing the county.	<b>High</b>	<ul style="list-style-type: none"> <li>3SC internal governance arrangements agreed - including a Strategic Oversight Group which manages 3SC risks (and 3SC risk register developed/approved).</li> <li>Programme office and workstream sponsors and leads agreed with roles and responsibilities defined.</li> <li>Regular meetings of local authority Leaders and Chief Executives. Last Leaders' meeting 11 July 2016.</li> <li>Regular engagement with 3SC partners.</li> <li>Regular engagement with central government at both political and official level. Meeting with senior officials from DCLG and the Treasury taking place on 14 September.</li> <li>Negotiation with Government underway – Heads of Terms sent to officials as basis for negotiations.</li> </ul>	<ul style="list-style-type: none"> <li>Keep all processes under active review.</li> <li>Strategic Oversight Group reviewing risk register quarterly.</li> <li>Next 3SC Leaders meeting on 19 September 2016.</li> </ul>	Chief Executive	<b>Medium</b>

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**Cross cutting risks** – high level risks that can be mitigated more effectively through cross working.

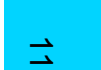
Ref	Risk ref.	Description of the risk	Inherent risk level (no controls)	Processes in place (ie the 'how' risks are being mitigated)	Controls (i.e. decisions needed)	Lead risk owner	Residual risk level (after existing controls)
L5	ASC1,2,12 C&C4 CSF1,2,	<b>Medium Term Financial Plan (MTFP) 2016-21</b> Failure to achieve the MTFP, which could be a	<b>High</b>	<ul style="list-style-type: none"> <li>Monthly reporting to Continuous Improvement and Productivity Network and Cabinet on the forecast outturn position is clear about the impacts on future years and enables prompt</li> </ul>	<ul style="list-style-type: none"> <li>Prompt management action taken by Directors / Leadership Teams to identify correcting actions (evidenced)</li> </ul>	Director of Finance	<b>High</b>

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## Annex 1

Owner: David McNulty

### Leadership risk register as at 31 August 2016 (covers rolling 12 months)

Ref	Risk ref.	Description of the risk	Inherent risk level (no controls)	Processes in place (ie the 'how' risks are being mitigated)	Controls (i.e. decisions needed)	Lead risk owner	Residual risk level (after existing controls)
Page 126	7 EAI1,3 FN2 ORB01, 10	<p>result of:</p> <ul style="list-style-type: none"> <li>• Not achieving savings</li> <li>• Additional service demand and/or</li> <li>• Over optimistic funding levels.</li> </ul> <p>As a consequence, lowers the council's financial resilience and could lead to adverse long term consequences for services if Members fail to take necessary decisions.</p>		<p>management action (that will be discussed informally with Cabinet).</p> <ul style="list-style-type: none"> <li>• Budget support sessions (Chief Executive and Director of Finance) continue to review and challenge the robustness of MTFP delivery plans and report back to Cabinet as necessary.</li> <li>• Regular meetings of the Public Value Transformation (PVT) Board (Leader of the Council (Chair), Chief Executive and Director of Finance) to ensure savings are being delivered and stakeholders are engaged.</li> <li>• Budget planning discussions held with Cabinet and Scrutiny Boards.</li> <li>• Early conversations are undertaken with all relevant stakeholders to ensure consultations about service changes are effective and completed in a timely manner.</li> <li>• Cross service networking and timely escalation of issues to ensure lawfulness and good governance.</li> </ul>	<p>by robust action plans).</p> <ul style="list-style-type: none"> <li>- Members (Council, Cabinet, Scrutiny Boards) make the necessary decisions to implement action plans in a timely manner.</li> <li>- Members have all the relevant information to make necessary decisions.</li> </ul>		
	L6	ASC2 CSF1,2, 5,6,8 ORB01, 02,07	<p><b>New ways of working</b></p> <p>Failure to identify and manage the impacts / consequences of implementing a range of new models of delivery leads to severe service disruption and reputational damage.</p>	<b>High</b>	<ul style="list-style-type: none"> <li>• Shared and aligned strategies to ensure no unintended consequences.</li> <li>• Robust governance arrangements (eg. Inter Authority Agreements, Health and Social Care Integration Board, Health and Wellbeing Board, financial governance framework) in place with early warning mechanisms.</li> <li>• Regular monitoring of progress and risks against work streams.</li> <li>• Effective transition arrangements with continuous stakeholder engagement.</li> <li>• Continuous focus on building and maintaining</li> </ul>	<ul style="list-style-type: none"> <li>- Leadership and managers recognise the importance of building and sustaining good working relationships with key stakeholders and having early discussions if these falter.</li> <li>- Work with Clinical Commissioning Groups on models of integrated care.</li> <li>- Members continue to endorse approaches to integration across the council.</li> </ul>	Chief Executive

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Leadership risk register as at 31 August 2016 (covers rolling 12 months)

Owner: David McNulty

Ref	Risk ref.	Description of the risk	Inherent risk level (no controls)	Processes in place (ie the 'how' risks are being mitigated)	Controls (i.e. decisions needed)	Lead risk owner	Residual risk level (after existing controls)
				strong relationships with partners through regular formal and informal dialogue. <ul style="list-style-type: none"> <li>Close liaison and communication with customers.</li> </ul>			
L7	ASC4, 5,8 CSF5 EAI2,3,4 ORB0 2,03,08	<b>Organisational resilience</b> Failure to plan for and/or respond effectively to a significant event results in severe and prolonged service disruption and loss of trust in the organisation.	High	<ul style="list-style-type: none"> <li>Developing an employment framework that supports flexibility in service delivery and organisational resilience.</li> <li>Robust governance framework (including codes of conduct, IT security policies, health and safety policies, complaints tracking).</li> <li>External risks are regularly assessed through the Local Resilience Forum and reviewed by the Statutory Responsibilities Network.</li> <li>Active learning by senior leaders from external experiences / incidents informs continual improvement within the council.</li> <li>Close working between key services and the Emergency Management Team to proactively update and communicate business continuity plans and share learning.</li> </ul>	- Regular monitoring of effectiveness of processes is in place and improvements continually made and communicated as a result of learning.	Chief Executive	Medium
L8		<b>Senior Leadership Succession Planning</b> A significant number of senior leaders leave the organisation within a short space of time and cannot be replaced effectively resulting in a reduction in the ability to deliver services to the level required.	Medium	<ul style="list-style-type: none"> <li>Enhance distributed leadership by focus on organisational goals and scorecard for organisational performance.</li> <li>Workforce planning linked to business continuity plans.</li> <li>High Performance Development Programme in place to increase skills, resilience and effectiveness of leaders.</li> <li>Career conversations built into appraisal process looking forward five years</li> <li>Shaping leaders programme.</li> <li>Senior leadership appraisal process</li> </ul>	- Transparent and effective succession plans.	Chief Executive	Low

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# Annex 1

Owner: David McNulty

## Leadership risk register as at 31 August 2016 (covers rolling 12 months)

Ref	Risk ref.	Description of the risk	Inherent risk level (no controls)	Processes in place (ie the 'how' risks are being mitigated)	Controls (i.e. decisions needed)	Lead risk owner	Residual risk level (after existing controls)
				incorporates feedback (shaping leaders) and succession planning into appraisal process.			

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## Movement of risks

Ref	Risk	Date added	Inherent risk level when added	Movement in residual risk level		Current residual risk level
L1	Financial outlook	Aug 12	High	Jan 16	↑	High
L2	Safeguarding – Children's Services	May 10	High	Jan 15	↑	High
L3	Safeguarding – Adult Social Care	May 10	High	Jan 15	↑	High
L4	Devolution	Jan 16	High	-	-	Medium
L5	Medium Term Financial Plan	Aug 12	High	-	-	High
L6	New ways of working	Jan 16	High	-	-	Medium
L7	Organisational resilience	May 10	High	Aug 12	↓	Medium
L8	Senior Leadership Succession Planning	Mar 15	Medium	Apr 16	↓	Low

## Risks removed from the register in the last 12 months

Risk	Date added	Date removed
<i>National policy development</i>	<i>Feb 13</i>	<i>Jan 16</i>
<i>Waste</i>	<i>May 10</i>	<i>Jan 16</i>
<i>Comprehensive Spending Review 2015</i>	<i>Sept 14</i>	<i>Jan 16</i>
<i>Reputation</i>	<i>Oct 14</i>	<i>Jan 16</i>
<i>Staff resilience</i>	<i>May 10</i>	<i>Jan 16</i>
<i>Information governance</i>	<i>Dec 10</i>	<i>Jan 16</i>
<i>Supply chain / contractor resilience</i>	<i>Jan 14</i>	<i>Jan 16</i>

### Leadership level risk assessment criteria

Due to their significance, the risks on the Leadership risk register are assessed on their inherent risk level (no controls) and their residual risk level (after existing controls have been taken into account) by high, medium or low.

Risk level	Financial impact	Reputational impact	Performance impact	Likelihood
	<i>(% of council budget)</i>	<i>(Stakeholder interest)</i>	<i>(Impact on priorities)</i>	
Low	< 1%	Loss of confidence and trust in the council felt by a small group or within a small geographical area	Minor impact or disruption to the achievement of one or more strategic / directorate priorities	Remote / low probability
Medium	1 – 10%	A sustained general loss of confidence and trust in the council within the local community	Moderate impact or disruption to the achievement of one or more strategic / directorate priorities	Possible / medium probability
High	10 – 20%	A major loss of confidence and trust in the council within the local community and wider with national interest	Major impact or disruption to the achievement of one or more strategic / directorate priorities	Almost certain / highly probable

**SURREY COUNTY COUNCIL****CABINET****DATE: 18 OCTOBER 2016****REPORT OF: MR JOHN FUREY, CABINET MEMBER FOR HIGHWAYS, TRANSPORT AND FLOODING****LEAD OFFICER: TREVOR PUGH, STRATEGIC DIRECTOR – ENVIRONMENT AND INFRASTRUCTURE****SUBJECT: STREET LIGHTING – INTRODUCTION OF A PART- NIGHT LIGHTING PROGRAMME****SUMMARY OF ISSUE:**

Surrey County Council's street lights consume nearly 25 million kilowatt hours of electricity and generate around 12,500 tonnes of CO<sub>2</sub> each year which currently costs the Council £3 million per annum.

Increasing energy costs and the significant environmental impact of street lighting consumption places a responsibility on the Council to ensure it is using its infrastructure efficiently and cost effectively. This includes ensuring the lights are on full power when needed but that lighting is adapted when this is less so – for example, the vast majority of Street Lights are currently dimmed by up to 50% power from 2200 – 0530 hours each night.

Following a consultation, in which over 75% of respondents expressed support, this report proposes that some street lights in Surrey are turned off for part of the night. Turning off 44,000 street lights in residential areas would save the Council approximately £210,000 per annum along with reducing its CO<sub>2</sub> "footprint".

**RECOMMENDATIONS:**

It is recommended that Cabinet:

1. approves the implementation of a part-night lighting policy across Surrey commencing with residential roads where assessed safe to do so. Lights in selected roads would be turned off from midnight to 0500 hours each night.
2. delegates authority to the Assistant Director for Highways and Transport in consultation with the Cabinet Member for Highways, Transport and Flooding to determine the final programme of roads included and in future to vary the road categories to be included and future timings of part-night lighting where assessed to be safe to do so.

**REASON FOR RECOMMENDATIONS:**

The introduction of the Central Management System for controlling street lights initially allowed the Council to introduce a dimming regime in 2010 but also provided the future flexibility to adapt lighting profiles including turning lights off. The expected £210,000 annual saving represents a 7% saving on the Council's electricity budget.

The reduction in CO2 output by 1250 tonnes per annum as a result not only contributes to the Council's objective to reduce its CO2 impact but achieves a further £22,500 saving in avoided Carbon Tax.

The recommendations follow a review of the increasing number of local authorities implementing part-night lighting and the outcome of the research by the LANTERNS project as described in point 8. Whilst the Council's public consultation identified concerns around personal safety and road safety with implementing part-night lighting, over 75% of respondents were in favour of switching off at least some street lights.

Building on good practice in other local authorities, the introduction of part-night lighting will only be implemented in locations where it is deemed safe to do so based on a combination of factors including a site visit and risk assessment and, consultation with the Council's Road Safety Team and Surrey Police to mitigate against the concerns highlighted.

## **DETAILS:**

### **Background**

1. In 2009, Surrey County Council awarded a PFI contract for the provision of a street lighting service for 25 years from 1 March 2010. Included in the service specification was the replacement of all the county's 89,000 street lights.
2. The street lighting replacement programme included provision of a Central Management System (CMS) – to dynamically control the operation of the street lights rather than relying on photocells to determine on and off times.
3. The installation of a CMS allows “dynamic” control of the lights' operation. Previously, lights could be dimmed by the installation of equipment with pre-set instructions to dim lights at a prescribed time by a prescribed amount – any decision to change this means you have to replace the equipment which is expensive and largely impractical. Whereas with the CMS, the profile could in theory be changed every day and if required be different for each light. In practice there are currently only 4-5 profiles covering two dimming levels and several time variances:
  - i. Lights on Traffic Routes are dimmed by 25%
  - ii. Lights in Residential Areas are dimmed by 50%

Most lights are dimmed from 2200 hours but there are several exceptions in town centres where lights do not dim until midnight, 0200 or 0300 hours based on the local night time economy.

The original dimming profile was to dim lights from 2300 to 0530 hours each night which will save an estimated £12 million in energy bills and 60,000 tonnes of CO2 over the 25 years of the contract. In October 2015, this was changed to commence at 2200 hours saving a further £90,000 in energy annually.

## Options Analysis

4. Over recent years, officers within SCC's Highways and Transport Team have been working on savings opportunities in street lighting in conjunction with other highway authorities and central government departments including the Department for Transport, HM Treasury, the Department for Energy and Climate Change and Local Partnerships.
5. Depending on the individual Authorities' Asset Management Strategy and current asset condition, there are a number of opportunities available to reduce energy costs for future years. These include installing LED to reduce energy consumption, installing a CMS to allow dynamic control of lighting, introducing dimming where enabled and switching off lights in certain locations.
6. In 2015, SCC officers carried out a review of the recommended energy saving initiatives that were available and applicable having already carried out a column replacement programme:

Option	Analysis	Outcome
Replace some (or all) lights with LED	<p>Replacing the existing lights with LED would reduce consumption by up to two-thirds where installed.</p> <p>The only way to achieve this would be to replace the whole lantern as retrofitting of the lamp element (bulb) is not currently available. The cost of replacing the lanterns including the borrowing costs would take in excess of 10 years to pay back.</p> <p>Whilst the reduction in energy consumption would reduce CO<sub>2</sub>, it will take significant capital investment (potentially diverting resources from other projects) and not deliver savings for many years.</p> <p>As the technology was not sufficiently developed at the time of the contract award this could not be adopted during the initial column replacement phase.</p>	<p>Monitor energy consumption and energy inflation and revisit the business case if energy inflation exceeds 10% in a single year or 5% consecutively for two years or more.</p> <p>Ensure new developments are fitted with LED where the Council will later adopt the road as Highway</p>
Further Dimming	<p>The lights on traffic routes have been designed to ensure even spacing, uniform minimum lighting across the carriageway and conform to the British Standard for Lighting designs. Dimming lights by 25% is approximately equivalent to reducing the lighting by one lighting class as defined in the British Standard. Current risk assessments determine that this could reduce the lighting level beyond a suitable standard for the types of road.</p> <p>The lights in residential areas are dimmed by 50% power. Tests carried out in 2013 demonstrated that the lights begin to flicker when operated at less than 50% power particularly in cold weather.</p>	Dimming the lights by a greater amount is not viable.
Dimming for Longer	<p>Looking at other authorities it is clear that there were a variety of regimes with some dimming the lights from 2100 and others at midnight. Many authorities are either introducing dimming or reviewing their current profiles. Dimming all the lights by the same percentage for a further hour was estimated to save approximately £90,000 per annum.</p> <p>Feedback from many residents indicate they are unable to notice the impact of dimming which in itself is positive.</p>	Dimming was changed from 2300-0530 to 2200-0530 from October 2015.
Remove Lights	Generally speaking the lights have been installed for good reason and the Council receives numerous requests each year for additional lights. The cost of disconnecting and removing a light is significant and the resultant energy saving would take many years to cover the costs.	Remove lights on a case by case basis only where this is demonstrated to be in the public interest.

Switch off every other light in a road	Whilst this would generate savings, it would also create uneven lighting in roads and potentially dark spots along sections of road – as some lights would be in operation, night vision would be impaired potentially increasing risks	This is not a viable option.
Switch off all lights in a road	<p>Many authorities are now implementing part-night lighting (where lights are turned off for part of the night). This reflects the significant reduction on use of roads by pedestrians and motorists during the middle of the night. Part-night lighting can be achieved either through a fixed decision using the equipment to control on and off times as with dimming (i.e. through photocells and electronic ballasts) or through a Central Management System – use of a CMS allows the Authority to make amendments to any regime either by individual light or to whole roads, areas or indeed the County.</p> <p>Officer estimate that switching off 44,000 street lights in residential roads will save approximately £210,000 per annum.</p>	Explore options to implement a Part Night Lighting Policy in 2016/17

### Proposal: Part Night Lighting in Surrey

7. Under the Highways Act (1980), Highways Authorities have the power to light the highway; however they are not obliged to do so. Where street lighting is present, the Authority has a duty of care to ensure it is safely operated and maintained.
8. In 2015, the London School of Hygiene and Tropical Medicine published a paper on research they carried out referred to as the LANTERNS project. The researchers obtained data from numerous local authorities including SCC and compared this to published data on both crime and road accidents. The study found no link between dimming and switching lights off with any increase in crime or road accidents. Full details of the study can be found at the following link: <http://lanterns.lshtm.ac.uk>
9. In areas where part-night lighting has been implemented elsewhere in the country, risk assessments have been carried out to ensure that roads selected are considered suitable for turning lights off. Using a checklist (now becoming commonly known as Avoidance Criteria), roads are assessed for suitability for part-night lighting. Based on best practice in other authorities, SCC officers have developed the following Avoidance Criteria:
  - a. Traffic Routes – this will predominantly be A, B and C classified roads, however some lower trafficked roads in this group may be included and equally some higher trafficked unclassified roads may be excluded by this criteria.
  - b. Town centres where this is a night time economy.
  - c. Where traffic calming measures (speed cushions or humps, chicanes etc) or formal pedestrian crossings such as zebra crossings are present and they require illumination.
  - d. Locations where Council or Police CCTV is in operation to reduce crime.
  - e. Locations where the Council's Road Safety Team or Surrey Police believe that implementing part-night lighting could have an adverse effect on either crime or road safety.
  - f. In cases where buses or trains run beyond the proposed switch off time, roads will be assessed and may either be excluded from part-night lighting or have a later switch off time.



10. If one or more of these Avoidance Criteria is present on a road, affected parts (in the case of traffic calming/pedestrian crossings), or all of the road, will not have the street lights switched off.
11. Officers have used the Surrey Priority Network hierarchy to determine where to implement part-night lighting and initially this will be focussed on the SPN 4a and 4b networks. The 4a and 4b networks are residential roads including some roads which link busier roads on the SPN 1, 2 and 3 networks.
12. It is proposed that subject to individual risk assessments, roads where part-night lighting is implemented will have the street lights switched off at midnight and switch back on again at 0500 hours every day<sup>1</sup>.

### **CONSULTATION:**

13. A public consultation was published via the Council's website ([www.surreysays.co.uk](http://www.surreysays.co.uk)) from 5 August 2016 to 2 September 2016. This was promoted through a variety of routes including emailing links via Residents' Panels and posters in the Council's Libraries.

Respondents were asked:

Are you in favour of the Council switching off street lights for part of the night where deemed safe to do so in order to reduce energy bills and reduce CO2 emissions?

They were provided with 3 options:

**Many      Some      None**

Respondents were also offered the opportunity to provide any additional information for the Council to consider.

### Analysis

14. There were 842 responses. The responses broke down as follows:

Answer	Number	Split
Many	390	46%
Some	253	30%
None	199	24%
<b>Total</b>	<b>842</b>	

15. As can be seen, nearly half of all respondents were in favour of switching off many lights and overall 76% were in favour of switching off at least some lights.

16. Many respondents left additional comments.

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<sup>1</sup> Lights will continue to be dimmed 2200 to 0530. In the summer months where dawn is before 0500, lights will not be switched on again.

As could be expected, people in favour of switching “many” lights off commented on it being a positive step with comments covering the positive impact on the environment, reducing costs or improving the night sky.

Many of those selecting “some” provided comments around ensuring the right lights were turned off. In these cases there was a mixture of focus with some respondents favouring traffic routes over residential areas and others the exact opposite.

A more detailed analysis can be found in Annex 1.

### **RISK MANAGEMENT AND IMPLICATIONS:**

There are several areas of risk associated with implementing a part-night lighting programme including:

17. The decision on which roads to include – for example a blanket approach to turn lights off in a whole area is unlikely to identify local risks. These risks may include an adverse effect on a night time economy, road safety or personal safety as well as the potential impact on other types of crime. Having investigated other local authorities’ approaches, the Council has developed a set of avoidance criteria (see paragraph 9) to identify these risks and lights will not be turned off in these locations.
18. The Council’s reputation could be adversely affected as a result of implementing a part-night lighting programme – whilst for some people this might be seen as a positive step to reduce costs, CO2 output and reduce light pollution, others might feel less safe. The public consultation has allowed the Council to gauge opinion from residents and road users in Surrey and whilst there were concerns raised particularly around road safety and personal safety, over 75% of respondents were in favour of switching off at least some street lights. The application of the avoidance criteria along with individual risk assessments by road and consultation with the Council’s Road Safety Team and Surrey Police will identify risks in each location and street lights will only be switched off where it is deemed safe to do so.

### **Financial and Value for Money Implications**

19. The street lights consume around 25 million KW/h each year which is currently costing £3 million and generating in the region of 12500 tonnes of CO2 each year. The Council’s unit price for electricity is currently 11.49 pence per hour. This has risen from 8.12 pence per hour in 2010 (41% increase).

20. The estimated savings are based on a reduction in energy consumption of 2.8 million KW/h per year.
21. It should be noted that the energy price is based on an averaged figure. The timing of consumption has an impact on the price and this is adjusted every six months based on actual consumption. For example, energy consumed 1900-0700 costs 30% less than the average price (i.e. currently 7.9p per KW/h) but during peak periods such as 1600-1900 October to March, the price increases significantly to around 35p per KW/h.
22. The revised operating “profile” of the lights can be updated in the CMS in bulk so there is no specific cost for implementing the changes. The site visits and risk assessments have been carried out with existing officer resource and, where possible, tied in to other activities to maximise efficiency.
23. The proposal will deliver savings in the region of £210,000 in energy costs and a further £22,500 in avoided Carbon Tax annually from 2017/18 through a 1250 tonne CO2 reduction. The savings for 2016/17 are estimated to be in the region of £50,000 in energy reductions and £5,300 in avoided Carbon Tax – these are subject to the implementation dates proposed and the outcomes of the site visits and risk assessments.

#### **Section 151 Officer Commentary**

24. The measures outlined in this report would be expected to deliver a saving of £210,000 in a full year, which is in line with the Council’s Medium Term Financial Plan. Due to the requirement for consultation, implementation has been delayed. This will create a financial pressure in 2016/17 and a review is under way to identify compensating savings.

#### **Legal Implications – Monitoring Officer**

25. The County Council as Highway Authority looks to the Highways Act 1980 in relation to many of its powers and duties. There is no statutory duty to light the highway. Section 97 of the 1980 Act gives every local highway authority a power to provide lighting for the purpose of any highway and the Council has to determine where it is necessary to provide and maintain lighting on the public highway.
26. Where highway lighting is installed s97 (2) provides that the County Council may alter any works constructed by them. The decision to implement part -night lighting does not require public consultation but given the change proposed to long-standing practice, in line with the common law duty of fairness, consultation was carried out to ascertain public reaction and any support for the proposals.
27. The public sector equality duty (Section 149 of the Equality Act 2010) applies to the decision to be made by Cabinet in this report. There is a requirement when deciding upon the recommendations to have due regard to the need to advance equality of opportunity for people with protected characteristics, foster good relations between such groups and eliminate any unlawful discrimination. These matters are dealt with in the equalities and diversity paragraph of the report.

### **Equalities and Diversity**

28. Community and personal safety concerns affect a number of groups including people walking alone, elderly and disabled people using the roads during the proposed switch off times. It is difficult to determine how the proposal directly affects the occurrence of crime given the research referred to in paragraph 8 above but it may increase fear of crime depending on the local circumstances. The public consultation raised some concerns as to personal safety and road safety. Known crime hotspots are excluded from the programme and a dialogue will be maintained with the Police to monitor this issue.
29. There is potentially a negative impact on road safety for some groups with protected characteristics, such as disabled and elderly people, if it is harder to identify trip hazards or when crossing roads. This is being mitigated by implementing the changes in a way sensitive to the local road network. Site assessments are being carried out to identify locations where traffic calming measures or formal pedestrian crossings are in place and lights will not be switched off in these locations.
30. Impacts on accessibility are likely to be minimal as the majority of changes will affect street lighting after 0000 hours when fewer people are around, although young people returning from pubs and night clubs may be affected. Impacts will be monitored through monitoring of crime and road accident trends and complaints from the public.

### **Climate change/carbon emissions implications**

31. SCC street lights generates approximately 12500 tonnes of CO<sub>2</sub> per year which accounts for approximately 23% of the Council's total CO<sub>2</sub> output and any changes to street lighting use will impact on that.
32. It is anticipated that switching off 44,000 lights in residential roads will result in a reduction on CO<sub>2</sub> of approximately 1250 tonnes each year, equivalent to just over a 2% reduction in the Council's total consumption. Furthermore, the Council will see a reduction in Carbon Tax payments of £22,500<sup>2</sup>.

### **WHAT HAPPENS NEXT:**

33. Subject to Cabinet approval, lists of roads that will be included in part-night lighting will be published for one month prior to implementation. Site visits will have been carried out by officers to assess each road to ensure they are suitable for part-night lighting against the avoidance criteria. These will have also been reviewed by SCC's Road Safety Team in conjunction with Surrey Police and by Surrey Police's Crime Prevention teams. The publication of the full lists is expected to be as detailed in the table below:

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<sup>2</sup> Carbon Tax is currently £18 per tonne of CO<sub>2</sub>

District/Borough	Part Night Lighting Implemented
Guildford	December 2016
Surrey Heath	December 2016
Waverley	December 2016
Elmbridge	January 2017
Epsom and Ewell	January 2017
Mole Valley	January 2017
Reigate and Banstead	January 2017
Runnymede	February 2017
Spelthorne	February 2017
Tandridge	February 2017
Woking	February 2017

**Contact Officer:**

Paul Wheadon, Business and Strategic Programme Manager 020 8541 9346

**Consulted:**

Surrey Police – Crime Reduction and Road Safety Officers  
Public Consultation – see Annex One

**Annexes:**

Annex One – Part Night Lighting Consultation Outcome

**Sources/background papers:**

- LANTERNS Study - <http://lanterns.lshtm.ac.uk>

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## Surrey County Council – Part Night Lighting Consultation August 2016

As part of the proposal to implement a Part Night Lighting policy, the Council published a Consultation to seek feedback.

The Consultation was published via the Council's consultation page from 5 August to 2 September. Links to the consultation questionnaire were sent by email to members of the public who form part of the Council's residents' panels, published via social media and posters were displayed in the Council's network of 53 Libraries.

### Consultation Details

The following information was provided as background to the proposal:

#### **Overview**

The council is considering turning off some street lights from midnight to 5.00am. This would start from Autumn 2016.

The vast majority of the county's 89,000 street lights are already dimmed by up to 50% from 10.00pm to 5.30am each night. Switching some lights off for some of the night would deliver significant reductions in CO2 emissions and save money through reduced energy bills and lower carbon tax payments. Whilst lighting the roads during the evening and into the beginning of night time is essential while many vehicles and pedestrians are travelling, in some locations such as residential areas, the lights are on all night whether they are needed or not.

#### **Why We Are Consulting**

We want to know if you support this proposal and we want to hear your views. Many councils across the country have already implemented similar successful schemes and are saving large sums of money and reduced CO2 emissions. We have prepared answers to some of the questions from the residents of other counties from the street lighting webpage – [www.surreycc.gov.uk/streetlights](http://www.surreycc.gov.uk/streetlights)

A study published in 2015 by the London School of Hygiene and Tropical Medicine (LSHTM) found no link between street lights being dimmed or switched off and any increase in road accidents or crime.

To keep our roads safe we propose to keep the lights on in roads where:-

- There is more traffic
- There are traffic calming measures (speed cushions or humps, chicanes etc) or formal pedestrian crossings such as zebra crossings are present and they require lighting
- The council's Road Safety Team or Surrey Police think that less night lighting would cause more crime or more accidents.

## Surrey County Council – Part Night Lighting Consultation August 2016

Respondents were then asked:

Are you in favour of the council switching off street lights for part of the night where deemed safe to do so in order to reduce energy bills and reduce CO2 emissions?

They were provided with 3 options:

**Many      Some      None**

Respondents were also offered the opportunity to provide any additional information for the Council to consider.

### Analysis

There were 842 responses which compared to other Consultations carried out by the Council is a significant level of response. The responses broke down as follows:

Answer	Number	Split
Many	390	46%
Some	253	30%
None	199	24%
<b>Total</b>	<b>842</b>	

As can be seen, nearly half of all respondents were in favour of switching off many lights and overall 76% were in favour of switching off at least some lights.

Many respondents left additional comments.

As could be expected, people in favour of switching “many” lights off commented on it being a positive step with comments covering the positive impact on the environment, reducing costs or improving the night sky.

Many of those selecting “some” provided comments around ensuring the right lights were turned off. In these cases there was a mixture of focus with some respondents favouring traffic routes over residential areas and others the exact opposite.

For those selecting none, there was a mixture of concerns mostly covering:

- Personal Safety – concerns about people walking during darkness (if lights were switched off in that location) whether returning home as a pedestrian or moving between a parked vehicle and their home. Comments included specific reference to people leaving for or returning from work during the switch off times, and some specific comments about concern for lone females and elderly people during this time.



**Surrey County Council – Part Night Lighting Consultation  
August 2016**

- Crime – in addition to the above, concerns that crime such as burglary and anti-social behaviour would increase due to the ability to operate unseen. Conversely there were other comments by those in favour of switching lights off which felt crime wouldn't increase or may even reduce as being able to see by street light aided crime.
- Road Safety – a number of respondents raised concerns about being able to see the footways (and any trip hazards etc) when walking if the street lights were not switched on at that time. Others raised concerns about the ability for drivers to see either pedestrians or cyclists if they were not highly visible (no lights, dark clothing) and the increase potential for accidents.
- Timing – a few respondents commented on the timing of the lights switch off but for slightly different reasons. These included shift workers walking to/from work (both Gatwick and Heathrow airports were referred to), people being more likely to return home from pubs, restaurants and entertainment venues after midnight at weekends.

There were also a number of comments suggesting alternatives such as use of LED or solar power to reduce energy consumption, switching off every other light to maintain some lighting and use of sensors to switch lights on when pedestrians or vehicles approach. All have been considered and discounted either on the grounds of the cost being prohibitive or in the case of solar power and motion sensors, the technology is not sufficiently advanced. It should be noted that these were identified in advance of the consultation being published and were explained in the Frequently Asked Questions.

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**SURREY COUNTY COUNCIL****CABINET****DATE: 18 OCTOBER 2016****REPORT OF: MR PETER MARTIN, DEPUTY LEADER****MR JOHN FUREY, CABINET MEMBER FOR HIGHWAYS,  
TRANSPORT AND FLOODING****LEAD OFFICER: TREVOR PUGH, STRATEGIC DIRECTOR, ENVIRONMENT &  
INFRASTRUCTURE****SUBJECT: INVESTMENT IN TRANSPORT AND HIGHWAYS  
INFRASTRUCTURE - ADDITIONAL SCHEMES IN THE THIRD  
TRANCHE OF THE LOCAL GROWTH FUND****SUMMARY OF ISSUE:**

In their Strategic Economic Plans (SEPs), the two Local Enterprise Partnerships (LEPs) covering Surrey, Enterprise M3 (EM3) and Coast to Capital (C2C), have set out their proposals for supporting economic development in their areas. Surrey County Council has worked with them to develop these plans which include improvements to transport infrastructure to provide economic benefits. Funding for the schemes included in the SEP comes from the Local Growth Fund (LGF), government funding through the LEPs. The arrangements require a local contribution to be made to the cost for these schemes and for this to be identified when business cases are submitted.

On 23 September 2014, the Cabinet approved arrangements for local contribution for the first tranche of three schemes of the 2015-16 SEP programme. On 14 December 2014 approval was given for local contribution for the second tranche of seven schemes of the same programme and, on 15 December 2015 the Cabinet approved further local contribution for the third tranche of four schemes of the same 2015-16 SEP programme.

Approval is now sought for the development and submission of business cases for a further four schemes; namely Wider Staines STP (phase 1), A30 London Road Camberley, Greater Leatherhead STP and A24 Epsom town centre Resilience, to be added to the third tranche of the 2016/17 SEP programme. The total estimated cost for these four schemes is £16.533m with a potential LGF contribution from the LEPs of £12.570m.

Approval is sought for a County Council contribution of approximately £1.789m for these schemes to be match funded from the existing Surrey County Council Local Growth Deal and Project Horizon capital budgets.

Partner and S106 developer committed contributions are currently £2.174m which could increase as discussions are still in progress with partners.

The business cases for these four schemes are planned to be submitted during the autumn /winter of 2016/17. Detailed design could commence on some of these

schemes during Q4 of 2016/17.

The Council has been in discussions with the relevant borough councils to secure their share of the local contribution. It is a requirement that the County Council confirms that the specified local contribution is available when it submits the business cases.

#### **RECOMMENDATIONS:**

It is recommended that the Cabinet agrees to delegate authority to the Strategic Director for Environment and Infrastructure, in consultation with the Deputy Leader, Cabinet Member for Highways, Transport and Flooding and the Director of Finance, to agree the schemes for business case submission and the precise amount of the Surrey County Council contribution based on the draft proposals as set out in Table 2 in this report, including an SCC local contribution of £1.789m.

#### **REASON FOR RECOMMENDATIONS:**

Transport infrastructure schemes are a key element of the Strategic Economic Plan (SEPs), submitted by the Local Enterprise Partnerships (LEPs) to Government in March 2014, which sets out how they will support the economic development and regeneration of their areas. The proposed schemes will deliver a range of benefits to Surrey's residents including reduced congestion; improved journey time reliability; enhanced safety and improved access for cyclists, pedestrians and buses, as well as enabling economic development and regeneration.

Under the funding arrangements, delivery bodies are required to provide a local contribution for the schemes, to reflect the local benefits that will be provided. Therefore, for these schemes to proceed to business case submission, Cabinet approval is needed to confirm that this local contribution is available.

The precise amount of contribution that the County Council will need to make, will be finalised once discussions with relevant Borough Leaders/ Chief Executives have been completed, in accordance with the approach presented to the Cabinet at the meeting of 23 September 2014.

Presently, funding has been secured from Heathrow Airport Ltd, Surrey Heath Borough Council and S106/PIC/CIL contributions. Further funding opportunities may arise in the near future, especially through developer contributions such as S106/CIL funding.

#### **DETAILS:**

##### **Introduction**

1. In July 2014, the Government announced Local Growth Fund (LGF) allocation for transport infrastructure to Local Enterprise Partnerships (LEPs), for the 2015 – 2021 periods, based on their respective SEPs. Allocation for 2015-16 was specifically detailed with committed funding for a selection of prioritised schemes. The County Council was successful in receiving committed funding for several schemes from both the LEPs, subject to submission of satisfactory business cases.

2. Schemes for the 2015-16 programmes were organised into two tranches to correspond with the submission dates of September/ October 2014 and January 2015. Three schemes were submitted as part of the first tranche with a further eight schemes submitted as part of the second tranche.

### The Third Tranche for business case submissions

3. On 15 December 2015, the Cabinet approved funding for four projects as indicated in Table 1 below.

**Table 1: Schemes already featured in the Third Tranche with updated comment**

Scheme	Comment
Guildford Transport Package	Business case approved and project commenced
Epsom- Banstead STP	Business case submission planned autumn 2016
A23 Strategic Maintenance	Business case submitted but further evidence required by LEP.
A217 Strategic Maintenance	Business case approved and project commenced

4. A further four schemes are now proposed as part of the third tranche. As previously, they have been selected as a result of a prioritisation exercise which assessed each scheme across a number of criteria including economic benefits and borough/ partner contributions.
5. Submission of business cases can be made to EM3 LEP in January and/or September; and to C2C LEP in spring and/or autumn. Business cases for these four schemes are intended to be submitted during autumn and winter 2016/17.
6. Estimated scheme costs and current position regards local contributions are set out in Table 2 below.

**Table 2: Proposed additional schemes for the Third Tranche projects**

Scheme	Scheme cost	LGF/ LEP ask	Partner Contribution	S106/ CIL contribution	SCC direct contribution
Wider Staines STP (phase 1) (EM3 LEP)	£4.950m	£3.713m	£0.609m <b>(WS1)</b>	£0.263m	£0.365m <b>(WS2)</b>
A30 London Road Camberley (EM3 LEP)	£5.000m	£3.750m	£0.770m <b>(Cam 1)</b>	£0m	£0.480m
Greater Leatherhead STP (C2C LEP)	£4.880m	£3.660m <b>(GL1)</b>	£0.500m <b>(GL2)</b>	£0.032m <b>(GL3)</b>	£0.688m
A24 Epsom town centre Resilience (C2C LEP)	£1.703m	£1.447m	£0m	£0m	£0.256m <b>(Eps1)</b>
<b>Total</b>	<b>£16.533m</b>	<b>£12.570m</b>	<b>£1.879m</b>	<b>£0.295m</b>	<b>£1.789m</b>

- WS1 - contribution from Heathrow Airport Ltd (£0.549m) and from London Buses (£0.060m).

- WS2 - developer contribution of up to £0.452m expected within 12 months, in which case SCC funding can be reallocated to other LGF schemes.
  - Cam 1 - contribution from Surrey Heath Borough Council.
  - GL1 - C2C LEP have not confirmed the percentage of local contribution required. Assumed current rate of 25%.
  - GL2 - Mole Valley District Council contribution subject to their formal approval.
  - GL3 - Local contribution from PIC funding of £0.032m has been included as secured funding. S106 contribution (£0.136m) not yet secured but could be within six months.
  - Eps1 - contribution of £0.256m from Project Horizon 2017/18.
7. Based on the above scenario and qualifying notes, the current full cost to SCC regards local contributions is £1.789m, of which £0.256m is from Project Horizon and the remainder (£1.533m) from the SCC Local Growth Deal budget. If the business cases are accepted this could attract Government investment of £12.6m.
8. On 15 December 2015, the Cabinet approved £1.2m of SCC contribution for Epsom-Banstead STP . A Business case for this project is planned to be submitted to the C2C LEP during the autumn of 2016. Following negotiations with Epsom & Ewell Borough Council and Reigate & Banstead Borough Council, together with available S106 funding, the SCC local contribution has been reduced to zero. This means that the £1.2m previously set aside for the Epsom-Banstead STP is now available to fund other schemes, in this tranche.

<b><u>CONSULTATION:</u></b>
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9. The proposed schemes have been developed in consultation with Borough and District partners and have been noted to the LEPs and the neighbouring Local Transport Authorities through the SEP process as indicated previously.
10. Officers from relevant Boroughs and Districts have been kept informed and engaged in the preparation of the business cases for the schemes through participation on the governance boards for schemes/ scheme clusters.
11. Design proposals for schemes have been/ are being presented to Local Committees for scrutiny and approval of the preferred solutions.
12. All the expressions of interest that were input into the Strategic Economic Plans submitted to Government are already publicly available on both the LEP websites. Where schemes are submitted as business cases these will also be published on the LEP websites.
13. All business cases are subject to up to 12 week public consultation period run by the LEPs, the results of which will be used by the LEPs as part of their independent assurance process. These results could influence the detailed design development process of the schemes.

14. All necessary consultation processes have been carried out to date, either by the County Council or Borough Councils involved. The feedback has been fed into the development of the schemes up to the point they are to be submitted to the LEPs as business cases.
15. This includes all required and necessary consultation with statutory agencies, such as the Highways Agency, Network Rail and the Environment Agency etc as well as with statutory undertakers (utility operators) as appropriate to each scheme.
16. In addition to the above, a public consultation and exhibition was carried out for the Wider Staines STP (phase 1) during the spring of 2016; public consultations and exhibitions are planned for the A30 London Road Camberley and Greater Leatherhead STP in the autumn/winter of 2016/17.
17. The Cabinet should note that the A24 Epsom Town Centre project forms part of the routine maintenance programme and, as such, is not subject to any consultation.
18. The Cabinet should also note that any further statutory consultation will happen once the detailed scheme designs are ready.

Reference to these projects can be found on the Surrey County Council Major Transport schemes web site: <http://www.surreycc.gov.uk/roads-and-transport/roads-and-transport-policies-plans-and-consultations/major-transport-projects>

#### **RISK MANAGEMENT AND IMPLICATIONS:**

19. The scheme costs set out in this report are estimates that were reviewed in 2016, based on outline scheme designs. Whilst they include a contingency sum and optimism bias there is a risk that these costs could increase once the designs are finalised and procurement processes run. If costs increase, such that the local contribution required would exceed the amount stated in this report, then the following mitigation strategies would apply:
  - Further value engineering exercises would be undertaken as the design is developed to see if scheme costs could be brought down without reducing the scope of the scheme.
  - If scheme costs cannot be reduced then the scope of the scheme would be reviewed to see if the primary benefits could still be realised but with a reduced scheme.
  - If it is not possible to reduce the scheme cost in either of these ways, then we would engage with the LEPs and the relevant borough/district to see if they are able to increase their contribution.
  - If, after following the steps above, the scheme would still require a greater contribution from Surrey, then a further decision on this would be sought from the Cabinet or Cabinet Member, as appropriate.
20. If SCC does not submit these business cases the Council may not be able to attract government investment in infrastructure through the Local Growth Deal. There is a risk that if we do not financially support these schemes and deliver them well SCC may lose the opportunity to access LEP funding for later potential schemes. LEPs are urging Councils and other delivery bodies to ensure that they utilise the LGF funding available in each year as any unused funds could be

clawed back. However, investment in these schemes does mean that there is minimal Council funding remaining for future schemes/ tranches.

#### **Financial and Value for Money Implications**

21. The proposed schemes are expected to cost £16.533m as set out in table 2, of which SCC's contribution is currently expected to be £1.789m. This will be met from the existing SCC Local Growth Deal and Project Horizon capital budgets.
22. The proposed transport schemes will deliver significant benefits to Surrey and, depending on the type of scheme, 75% or more of their estimated capital cost will be provided by LEP. Therefore, the required local contribution represents good value for money for Surrey residents.
23. Local contributions for most schemes are being met by partner contributions, S106 developer contributions and/or other sources as indicated in Table 2. However, the details presented in Table 2 reflect the position as at the writing of this report. Expectations are that additional contributions could become available from borough partners as the schemes are being prepared.
24. In order to optimise value for money robust procurement will be undertaken for each of the schemes and approval to award the contracts will be sought as required under the Council's constitution.

#### **Section 151 Officer Commentary**

25. The Section 151 Officer highlights that estimated scheme costs are currently under review and in some cases are based on outline scheme designs and therefore would be expected to change as designs evolve and as schemes are procured. In recognition of this estimated costs include appropriate risk allowances. As grant funding is likely to be fixed, subject to the mitigation strategy outlined in this report, an increase in scheme costs could result in an increase in the local contribution required. The Council would also need to meet any future maintenance costs for these schemes.
26. The Council's expected contribution will be funded from the existing capital budget, including Project Horizon. Depending upon final costs and the profile of spend, capital budgets may need to be re-profiled across financial years.
27. Further consideration should be given to the long-term strategy for funding future tranches of schemes including contributions from partners and the utilisation of new funding streams such as the Community Infrastructure Levy (CIL).

#### **Legal Implications – Monitoring Officer**

28. The report sets out the process by which relevant schemes for the addendum to the third tranche have already been identified and these are schemes which have been the subject of consultation and may need to have further public consultation, if required, before final approval by the LEPs. The LEPs will need to take account of the results of those consultations when finalising their views. The report also sets out proposed principles by which decisions can be made about how the costs of the local contributions to the schemes can be shared with boroughs and districts and the rationale behind these principles is clear and takes account of relevant matters. As the final decision regarding the amount of



contribution is an executive function it can properly be delegated to the Strategic Director for Environment and Infrastructure.

#### **Equalities and Diversity**

29. An initial equalities and diversity screening was carried out in advance of the report to Cabinet of 27 November 2012 which indicated that a full Equalities Impact Assessment was not required. However, project specific equality and diversity screening is to be undertaken as part of the development of each project. All the proposed schemes seek to eliminate any perceived and/or actual inequalities through compliance with up to date design standards which address disabled access and social inclusivity. Improved crossing facilities and disabled access will be provided at pedestrian crossings and junctions, wherever appropriate.

#### **Public Health / Climate change / carbon emissions implications**

30. A key objective of many of the proposed schemes, in particular the Sustainable Transport Package Schemes (STP), is to reduce carbon emissions through a combination of reduced vehicle delays, improvements to public transport and encouraging alternative modes of transport to motorised vehicles. In addition to this, improvements in public health can be gained through more walking and cycling.

#### **WHAT HAPPENS NEXT:**

31. **For C2C LEP:** Business cases for the Greater Leatherhead STP and the A24 Epsom town centre Resilience projects are expected to be submitted to the LEP during the autumn of 2016. The LEP decision can be expected by January 2017 or earlier.

**For EM3 LEP:** Business case for 'Wider Staines STP (phase 1)' scheme needs to be submitted by 30 September 2016, subject to approval by Cabinet of the SCC direct local contribution at this meeting. The LEP decision can be expected by mid November 2016. The A30 London Road Camberley project is also planned to be submitted to the LEP during 2017.

32. Detailed design and procurement for the schemes will commence following approval from the LEP. The costs for Detailed Design, Construction, Project Management and Supervision can be reclaimed from the LEP. These costs have been included in the scheme cost estimate submitted in the business cases.

33. Following final approval by the LEPs of the business cases, all partner organisations will be informed of the outcomes. Cabinet Members and Local Members will also be updated by the Cabinet Member for Highways, Transport and Flooding, and the Strategic Director of Environment and Infrastructure. If appropriate, further report or reports to Cabinet may be required to gain approval to start work.

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#### **Contact Officer:**

Lyndon Mendes, Transport Policy Team Manager, tel: 020 8541 9393

**Consulted:**

Trevor Pugh, Strategic Director, Environment and Infrastructure  
Jason Russell, Assistant Director, Highways and Transport  
Kevin Lloyd, Lead Manager, Economic Growth

Details of external consultation and future consultation arrangements are covered in the Consultation section of this paper.

**Annexes:** None

**Sources/background papers:**

Cabinet Report, 'Supporting the economy through investment in transport infrastructure', 27 November 2012.

Cabinet Report, 'Supporting Economic Growth', 25 February 2014.

Cabinet Report, 'Supporting Economic Growth through investment in Highways infrastructure', 23 September 2014.

Cabinet Report, 'Supporting Economic Growth – implementing the Local Growth deals', 21 October 2014.

Cabinet Report, 'Supporting Economic Growth through investment in Transport and Highways infrastructure – second tranche', 16 December 2014.

Cabinet Report, 'Supporting Economic Growth through investment in Transport and Highways infrastructure – third tranche', 15 December 2015.

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**SURREY COUNTY COUNCIL****CABINET****DATE: 18 OCTOBER 2016****REPORT OF: JOHN FUREY, CABINET MEMBER FOR HIGHWAYS, TRANSPORT AND FLOODING****LEAD OFFICER: TREVOR PUGH, STRATEGIC DIRECTOR, ENVIRONMENT AND INFRASTRUCTURE****SUBJECT: RIVER THAMES SCHEME FUNDING CONTRIBUTION****SUMMARY OF ISSUE:**

Serious flooding from the River Thames causes severe hardship and suffering to many Surrey residents and damage to the County's economy. Many are yet to fully recover from the last major flood event in 2013/14 and the risk of future flooding is significant.

The Environment Agency (EA) is responsible for flood risk management of the Thames and is developing a major flood alleviation scheme that would benefit the Surrey stretch of the Thames. It is called the River Thames Scheme (RTS) and is estimated to cost a total of £461m. The Government and other national bodies do not fully fund such flood alleviation schemes and therefore large contributions from other sources are required if schemes are to be successfully developed and built. There is currently a £213.6m funding gap for the RTS and the County Council is supporting work to secure further contributions.

Although there is a risk, at this stage, that the scheme may not receive the necessary funding, consents and Government approval to facilitate completion, it is proposed that the County Council contribute a total of £2.5m towards its development costs because of the importance of Thames flood protection to Surrey residents and businesses. The total cost of the development phase of the RTS is estimated at £55.7m and in the absence of further financial support from the Government at this stage, this "pump priming" investment by the County Council will help to get the scheme fully developed to a "shovel ready" state and this will increase its prospect of achieving full funding.

Further flood events of the scale of 2013/14 or greater would incur significant costs for the County Council in fulfilling its statutory duties and this risk would be reduced if the scheme is built.

**RECOMMENDATIONS:**

It is recommended that Cabinet approves a total funding contribution of £2.5m from 2016-20 towards capital activities in the development phase of the River Thames Scheme.

**REASON FOR RECOMMENDATIONS:**

Cabinet has previously indicated its support for the scheme by approving provision of £2.5m in the Medium Term Financial Plan in March 2016. A decision is now required

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for the contributions to be enacted.

Although there is no specific statutory responsibility for the County Council to contribute to flood alleviation schemes, in its capacity as Lead Local Flood Authority SCC has a duty to develop a strategy for flood risk management and to adopt a co-ordinated and co-operative approach with other Risk Management Authorities under sections 9 and 13 of the Flood and Water Management Act 2010 respectively. Delivery of the RTS is both part of SCC's strategy for flood risk management and a key element of its co-ordinated approach with partners; therefore a contribution towards delivery of the RTS will enable the Council to fulfil these particular statutory responsibilities.

Flooding is a significant concern to the residents of Surrey. The River Thames Scheme would significantly reduce the risk and impact of flooding to a number of communities in the County and provision of this funding would assist with the development of the scheme and will show a strong commitment to supporting the EA and other partners in successfully delivering the scheme.

## **DETAILS:**

### **Background**

1. The River Thames between Datchet and Teddington has the largest area of developed floodplain in England without flood defences. Over 15,000 homes and businesses within the area are at risk from flooding (35,000 after predicted climate change).
2. Major flooding in this area would cause severe disruption to the local and regional road network. It would suspend several major drinking water abstractions supplying the South East and threaten up to 20 local electricity substations.
3. The EA has calculated that damages from a major flood could exceed £850 million (£2 billion by 2055 taking into account the predicted effects of climate change).
4. Many of the communities in this area have already been affected by flooding with major floods in 1947, 1968, 2003 and recently in 2014 when over 1,500 homes were flooded internally in Surrey alone.
5. In total approximately 15,000 homes across the scheme area along with businesses and significant local infrastructure (roads, sewerage network, power supplies) will be better protected from flooding by the RTS. The scheme will also provide economic, social and environmental benefits.
6. All communities between Datchet and Teddington will benefit from the RTS. This includes the locations downstream of the flood channel, as weir modifications will also reduce water levels between Walton Bridge and Teddington. The amount of benefit will vary along this 40 kilometre length of the river and these benefits will be optimised during the design of the scheme.
7. Communities in Surrey stand to benefit significantly from the scheme. Locations in Spelthorne, Runnymede and Elmbridge are situated on the banks of the Thames and a large number of homes and businesses will be better protected from flooding.

8. Some households will also be offered further flood protection for their homes. These are called “property level products” which are fitted to individual homes to make them more resistant to flooding.
9. SCC has been asked to contribute funding towards development of the full business case for the RTS.

### Purpose of Contribution

10. The funding contribution will be used for capital activities in the development of the full business case for the scheme. This part of the project is estimated to cost a total of £55.7m. Any activities not associated with the development phase of the RTS (i.e. specific construction projects beyond the full business case stage), and any activities not classified as capital, will not be covered by this contribution.

### Total Contributions to the River Thames Scheme from Central Government and partners

11. The whole life present value cost of the RTS (i.e. the overall cost including construction and 100 years maintenance, expressed at current prices) is estimated at **£461m**. The following table provides an overview of how much of this cost will be covered by Central Government, Flood and Coastal Risk Management Grant in Aid (FCRMGiA) funding and additional contributions:

Funding source	Amount
FCRM Grant in Aid Funding	£151m
Government 2014 budget statement	£60m
Thames RFCC	£28.9m
Local Councils	£5m
Local Enterprise Partnerships	£2.5m
<b>Total</b>	<b>£247.4m</b>

### Funding Gap

12. When the total secured funding sources (£247.4m) are deducted from the estimated total cost of the RTS (£461m), a funding gap of £213.6m remains.
13. Work is being progressed jointly by the EA and SCC to find opportunities for further bridging the gap. The Leader of SCC has established and is Chairing a Funding Group which includes senior Members from partner Local Authorities. Negotiations have begun with key beneficiaries including local enterprise partnerships, Thames Water, Highways England and Network Rail. The Funding Group has already secured initial up-front funding from the Local Enterprise Partnerships for the development phase of the scheme.
14. The Funding Group has developed a clear funding strategy and action plan. Over 40 potential funding sources have been shortlisted for investigation to fill the funding gap; these are primarily direct and indirect beneficiaries of the RTS and engagement has already commenced with them.
15. £110m of the funding shortfall is for Landfill Tax from the disposal of spoil from the construction. Ways of reducing or eliminating this are being considered, such

as through the construction design and method and through discussions with HM Treasury.

#### **CONSULTATION:**

16. The Council's Investment Panel has reviewed the funding proposal and expressed its support.
17. The Economic Prosperity, Environment and Highways Board has previously received reports and briefings on the RTS and informally expressed its support for the scheme. The Board also convened a Flooding Task Group in 2014 and one of its recommendations was to encourage construction and development of the RTS as quickly as possible.

#### **RISK MANAGEMENT AND IMPLICATIONS:**

18. The RTS is subject to the major project approval process as set by HM Treasury, meaning that robust planning and business cases following this stringent guidance have been developed/are in development to support the scheme and greatly enhance its viability. This reduces a number of risks associated with the project.

#### **Financial risks:**

- SCC commits funding but shortfall for delivery of the scheme remains.  
*Mitigation:* RTS funding sub-group chaired by the Leader established to actively seek further contributions from beneficiaries.

#### **Reputational risks:**

- Scheme is not taken forward due to lack of funding or political reasons.  
*Mitigation:* SCC works with partners to find required funding and lobbies Central Government to proceed with construction of the scheme.
- Scheme is taken forward but does not provide the benefits residents expect.  
*Mitigation:* SCC to work with partners to engage with communities and keep them apprised of progress and changes to the scheme in order to manage expectations.
- Scheme is not completed within proposed timescales and/or costs significantly increase.  
*Mitigation:* SCC to work with partners to engage with communities and provide regular updates as to when each phase of the scheme is due to be completed. Original costings updated in 2016 in light of more detailed design. Appropriate optimism bias has been included in costings.

#### **Service risks:**

The scheme is being delivered by the EA and is therefore unlikely to pose service-level risks beyond those detailed above. However, ongoing SCC resource may be required to support certain activities and this will be accommodated around existing commitments.

### **Financial and Value for Money Implications**

19. The total cost of the financial contribution will be £2.5m between 2016-2020 with the payment schedule as follows:

Year	16/17	17/18	18/19	19/20	Total
<b>SCC Contribution (£m)</b>	1*	0.5	0.5	0.5	2.5

\*16/17 payment £1m as contribution not made in 15/16

20. Funding has been agreed as part of the Council's Medium Term Financial Plan.

### **Section 151 Officer Commentary**

The Section 151 Officer supports the proposed £2.5m contribution to the development phase of the RTS which is provided for in the Council's Medium Term Financial Plan. The estimated cost of the scheme has been developed by the EA and, in accordance with Government guidance, includes appropriate risk adjustments; however costs may still change as the development of the scheme proceeds. As explained in the report, all of the necessary funding has not yet been secured and work is ongoing to identify further funding opportunities to allow the scheme to proceed.

### **Legal Implications – Monitoring Officer**

Under the Flood and Water Management Act 2010 the Council has a duty to develop a strategy for flood risk management (section 9) and to adopt a co-ordinated and co-operative approach with other Risk Management Authorities (section 13).

In coming to a decision on this issue the Cabinet needs to take account of all relevant matters. The weight to be given to each of the relevant matters is for the Cabinet to decide. Relevant matters in this context will include the statutory requirements, the Medium Term Financial Plan, the Council's fiduciary duty and any relevant risks.

### **Equalities and Diversity**

An Equalities Impact Assessment is not required for this item as the recommendation regards a funding contribution towards a project managed by a Government agency rather than a policy change or Council-led activity.

### **WHAT HAPPENS NEXT:**

The funding contribution will commence as soon as practicable following approval of the recommendation.

### **Contact Officer:**

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**Consulted:**

Internal:

- Investment Panel
- Director of Finance

External:

- Environment Agency

**Annexes:**

None.

**Sources/background papers:**

EA Strategic Outline Business Case for the River Thames Scheme

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**SURREY COUNTY COUNCIL****CABINET****DATE: 18 OCTOBER 2016****REPORT OF: MR RICHARD WALSH, LOCALITIES AND COMMUNITY WELLBEING****MS DENISE LE GAL, BUSINESS SERVICES AND RESIDENT EXPERIENCE****LEAD OFFICER: RUSSELL PEARSON, CHIEF FIRE OFFICER****SUBJECT: APPROVAL FOR THE SURREY FIRE AND RESCUE SERVICE TO TRIAL THE USE OF INITIAL RESPONSE VEHICLES AND AWARD A CONTRACT FOR THE PROVISION.****SUMMARY OF ISSUE:**

Surrey Fire and Rescue Service (SFRS) wishes to conduct a trial of a new type of vehicle for responding to incidents with an option to roll-out the concept across the Service, where relevant, on completion of a successful trial.

An 'Initial Response Vehicle' (IRV) is a van sized vehicle (see Annex B) normally to be crewed by two firefighters, in comparison to the traditional LGV sized fire engine crewed by four firefighters. It has the capability and will be appropriately equipped and crewed to attend a defined range of routine incidents (see Annex C) and to provide support at more complex situations. This vehicle will also deliver a range of community safety activities and could play an important role in SFRS's fleet, leading to both capital and revenue savings.

Subject to the results of the trial, the intention would be to recommend purchase of additional IRVs to replace/assist part of the current fleet.

This report, detailed in part two, also seeks approval to award a contract for an IRV concept for SFRS to commence on the 4 November 2016

**RECOMMENDATIONS:**

The Cabinet is asked to agree that:

1. Surrey Fire and Rescue Service pilot the use of Initial Response Vehicles; and
2. a contract for an Initial Response Vehicle concept is awarded to Rosenbauer UK Ltd for a two phase contract consisting of an initial trial period with two vehicles with an option to extend for a further two years with up to an additional four vehicles, subject to the completion of a successful pilot.

## **REASON FOR RECOMMENDATIONS:**

In order for Surrey Fire and Rescue Service (SFRS) to better align capacity to demand, its service delivery strategy needs to be adjusted.

SFRS have experienced a reduction in incident demand of approximately 50% over the past 10 years which is in line with national trends (See Annex A). With the introduction of SFRS co-responding to medical emergencies in Surrey, the breakdown of incidents attended has also changed as follows (23 May – 25 September 2016):

<b>Incident category</b>	<b>Total incidents</b>	<b>Percentage</b>
Ambulance Co-responder	1387	22%
False alarm	2119	34%
Non-attendance	284	5%
Primary Fire	439	7%
Road Traffic Collision	407	7%
Secondary Fire	430	7%
Special Service	935	15%
Over The Border incident	217	3%
<b>Total incidents</b>	<b>6218</b>	<b>100%</b>

A differentiated response incorporating an 'Initial Response Vehicle' (IRV) concept could provide options for increased flexibility and speed of delivery whilst maintaining quality and potentially reducing cost by up to £6m per IRV over a programme of 15 years - the life time of a traditional fire-engine which includes reduced running and maintenance costs. For a detailed cost comparison between IRVs and fire engines see 'Financial and Value For Money Implications' below.

There are similar response models in place across the globe and it is therefore in line with best practice for SFRS to trial a differentiated response model in Surrey.

The proposed trial will enable SFRS to evaluate a 'proof of concept' to understand the implications of using IRVs. Awarding the contract may enable SFRS to benefit from external expertise in developing new models of delivery with minimal or no impact on the quality of service that is currently being achieved.

A full tender process, in compliance with the requirements of Public Contracts Regulations 2015 and the Council's Procurement Standing Orders, has been completed. The offers received as part of the tender have been rigorously evaluated and the best overall solution has been identified.

## **DETAILS:**

### **Business Case**

1. SFRS wish to hold a pilot scheme for a maximum 12 month period which assesses the use of IRVs as part of the overall service delivery model. Whilst similar concepts are in use in other Fire and Rescue Services in the UK this contract will host the provision of an end-to end package to include two vehicles, equipment and proof of safe systems of work as well as additional training requirements including a 'train the trainer' methodology for the pool of eighteen staff to crew the vehicles during the pilot.

2. The intention of the initial pilot scheme is to utilise two IRVs across Surrey in addition to current provision in order to assess capabilities and gather intelligence on the scope of operations that could be delivered by such a model, ensuring safe systems of work. Variable factors such as locations, crewing arrangements, fixed or roaming locations and the types of incidents attended are expected to be flexible throughout the duration of the pilot scheme following feedback from a strategic, tactical and operational level.
3. It is the professional opinion of the Chief Fire Officer that operating two IRVs during the trial provides the flexibility and resilience required to ensure that the pilot has every chance of success and that sufficient data can be captured to effectively evaluate the outcomes and to fully support any decision to progress with phase 2.
4. As budget pressures have continued to increase over recent months since the IRV project began, in order to achieve targets within the Medium Term Financial Plan (MTFP), changes to the SFRS response model will need to be implemented at the earliest point possible. Flexibility and resilience need to be at an optimum in order to maximise the opportunities for success of the pilot.
5. The two-phased IRV concept has been co-designed and agreed with the relevant representative bodies. This agreement is to run a pilot with two IRVs in addition to the existing response model and fleet to be able to capture and analyse the data and ensure safe systems of work prior to commencing any roll-out. The trial will begin in April 2017 once the new vehicles have been delivered.
6. Using two vehicles aims to ensure that the pilot is ongoing for the entire duration and that any essential changes that need to be made to the vehicles can be staggered and the pilot will remain uninterrupted.
7. The use of two vehicles will result in improved data from the following:
  - a greater number of locations to be attended;
  - a greater number of incidents of varied types to be attended; and
  - the ability to test the use of two IRVs working together.
8. Data captured will inform SFRS of performance against set criteria. Workstreams within the project will determine the key measurements for success/failure, how this will need to be measured and Key Performance Indicators (KPIs) will be developed. These KPIs will be monitored by the IRV project board and by a governance board attended by key stakeholders, including the Cabinet Member for Localities and Communities Wellbeing, the Cabinet Associate for Fire and Police Service and the Fire Brigades' Union (FBU)

**The proposal is for a two phase contract:**

9. Phase one will see the appropriate delivery, review and completion of the pilot as previously described. Central to this will be the understanding of how safe systems of work can be maintained whilst adding significant value to existing service provision. The capabilities and limitations of the specification will be tested during the pilot and this will be used to refine the final product. It is intended that within the pilot scheme a minimum of quarterly performance reviews will be undertaken and reported through SFRS governance arrangements.

10. On completion and evaluation of phase one, if successful, phase two will provide the option for an extended roll out of further IRVs. If the pilot and response modelling demonstrate that IRVs are a suitable response option and safe systems of work are agreed with the recognised representative body, the contract allows for up to an additional four vehicles to be introduced. SFRS plans that any provision of additional vehicles would be in replacement of existing assets such as traditional fire engines and deliver a capital and revenue saving. The extended roll out of further vehicles would be following a successful pilot scheme and approval through Cabinet and following public consultation on a proposal for a new attendance standard incorporating this differentiated response model. Key stakeholders, including Cabinet and the Fire Brigades' Union (FBU), will be kept engaged throughout the trial. Breakout clauses have been established in the contract that allows the SFRS not to progress with further roll out of the scheme if it is deemed not appropriate at the time. For planning purposes the financial information within this report identifies estimated costs associated with both phase one and phase two, followed by an overall cost for the contract and forecasted savings over three years.

### **Procurement Strategy and Options**

11. Options considered prior to commencing the procurement activity were as follows:
  - a. SFRS does not currently have the capacity to manage and develop this project 'in-house.' It is also not necessarily the most cost effective or expedient way to introduce this new model especially as the concept is in use elsewhere around the globe. SFRS believe that outsourcing the provision of both the specialised vehicles and the equipment, safe systems of work will utilise previously developed solutions with an expectation of lower overall cost, shorter development and build time scales as well as improved quality by benefiting from an experienced commercial provider.
  - b. A supplier market engagement day took place at HQ Wray Park that allowed suppliers to meet the project team, discuss the requirements and contribute to the development of the specification ahead of the tender being published.
  - c. It was established that there were no suitable national frameworks available to provide this service and so a fully compliant tender was deemed the preferred route for the 'proof of concept' package. This allows SFRS to benefit from suppliers with experience and proven track record of delivering small, specialised vehicles; equipment and appropriate training. It is expected that outsourcing to a reputable supplier would provide the opportunity to reduce cost and improve speed of delivery whilst maintaining an element of flexibility and retaining quality. Further roll out of vehicles as part of a phase two agreement would be predicated on a successful and sustainable relationship with the supplier.
  - d. Consultation continued with the Chief Officers' Group (COG) and the FBU and it was decided the most appropriate procurement approach was to carry out an Official Journal of the European Union (OJEU) Open Procedure to incorporate all elements and award to a single provider.

### **Competitive Tendering Process**

12. Using the OJEU Open Procedure, the tender was divided into two phases:

13. Phase one will see the appropriate delivery, review and completion of a 12 month pilot as previously described. Central to this will be the understanding of how safe systems of work can be maintained whilst adding significant value and flexibility to existing service provision. SFRS is comfortable that they understand the capabilities and limitations of any proposed specification. It is intended that within the pilot scheme a minimum of quarterly performance reviews will be undertaken to ensure continuous development towards a final vehicle specification and that safe systems of work are achievable through appropriate training and provision of equipment.
14. Phase two will provide the option for an extended roll out of further IRVs. It is anticipated that this could be up to an additional four vehicles. SFRS plans that any provision of additional vehicles would be in replacement of existing assets such as traditional fire engines and deliver a capital and revenue saving.
15. Representatives from key service areas were involved throughout the evaluation process to ensure that the preferred solution was fit for purpose for all areas of the organisation.

### **Key Implications**

16. The initial contract term will allow a full and comprehensive evaluation of the concept.
17. The contract terms allow the Council to terminate the contract with three months' notice in the event of legislation changes; change of Service and/or County Council priorities or supplier performance is not to the required standard.
18. Performance will be monitored through a series of key performance indicators as detailed in the contract and reviewed at monthly operations meetings with the provider.

### **CONSULTATION:**

23. Key stakeholders both external and within the County Council have been consulted at appropriate stages of the procurement process including:
  - Fire Brigades' Union
  - Kay Hammond, Cabinet Associate for Fire and Police Services

### **RISK MANAGEMENT AND IMPLICATIONS:**

24. The 12 month pilot will enable safe systems of work to be evaluated and address operational risks prior to commencement of phase two.
25. If the pilot is unsuccessful there will be two IRVs that may no longer be required. These could be dealt with as follows:
  - a. the assets acquired through the pilot, both vehicle and equipment, to be sold as a complete package;
  - b. the vehicles and equipment will be repurposed and used within SFRS; and

- c. the vehicles and equipment will be sold separately and remaining assets will be repurposed.
26. Repurposing the IRVs within the Service could negate the need to replace other Service vehicles and potentially the equipment could be used to enhance operational capabilities.
  27. Robust project management methodology will ensure appropriate levels of governance are applied to enable the effective management and control of the programme progress, finance, risks and issues.
  28. There will be monthly reviews of performance data. This will be monitored and managed via the Service governance arrangements in place. In addition, the contract includes consultancy throughout the pilot to develop the solution.

**Key risks identified:**

**29. Project objectives not achieved within required timescale**

There are various risks of delays in meeting the intended timescale for the pilot:

- a. programme implementation falling behind schedule;
- b. changes to key personnel in project;
- c. challenges received through public consultation;
- d. opposition from national, regional and local workforce; and
- e. lack of capacity amongst the knowledge experts required for the pilot.

All such delays could result in a delay in both the realisation of the required savings and unlocking the identified service benefits.

These risks will be mitigated by early engagement with stakeholders and the public, implementation of robust project management, having consistent project sponsorship, gathering and collating supporting evidence and maintaining co-design at a regional and local level.

**30. Inability to undertake pilot either fully or in part**

There are a few risks around limiting what can be delivered during the pilot phase:

- f. insufficient availability, interest or funding to crew the new appliances; and
- g. single breathing apparatus user restrictions arising from national operational guidance

These risks will be mitigated by development of an efficient crewing model, having the option to be flexible with the duration of the pilot, early engagement with workforce, maintaining co-design with the FBU, review and amendment of breathing apparatus policy to ensure single users can operate safely at appropriate incident types and working closely with local FBUs and the BA

training section to develop appropriate control measures within the national incident command doctrine.

### **Financial and Value for Money Implications**

31. The Funding for stage 1 capital expenditure is from the existing SFRS Vehicle and Equipment Replacement Fund (VERF) with the training costs from the existing 2016/17 training budget. The invitation to tender invited alternative bids to include such schemes as a 'lease to buy' for the initial two pilot vehicles. None of the tender submissions included these alternative options. The remaining funding required of £530,000 to cover the staff costs of operating the trial in addition to the current emergency response arrangements, will be considered by the Investment Panel as an Invest to Save proposal. The total cost of the trial is outlined in Part 2 of this paper.
32. Should the pilot scheme prove successful the capital funding for stage two will be from the VERF. This will be diverted from funds currently planned for the procurement of replacement traditional fire engines. No additional revenue costs for stage two are forecast.
33. No immediate savings are expected within the year 1 pilot scheme as this will be supplementary to existing service delivery assets. However, subject to a successful pilot, SFRS expect to see ongoing capital and revenue savings from year 2 onwards should the Fire Authority decide to change emergency response provision by introducing IRVs in place of traditional fire engines at some locations, subject to Integrated Risk Management Plan consultation, so that it addresses community risk and doesn't just save money.
34. A comparison of the costs associated with an IRV against a traditional fire engine is outlined below:

#### **Comparison of IRV to traditional Fire engine.**

<b>Notes</b>	<b>Fire engines</b>	<b>IRV</b>	<b>Variance</b>
1 Procurement of Vehicle and equipment	£375,000	£159,000	-£216,000
Life expectancy	15 years	10 years	-5 years
Capital cost per year (contribution to Vehicle Reserve)	£25,000	£15,900	-£9,100
Crew size	4	2	-2
2 Annual cost of crewing (direct staffing only)	£905,000	£505,000	-£400,000
3 Total Annual cost of provision	£930,000	£520,900	-£409,100

- 1 When operating within a fleet both vehicles types require spare vehicles to provide cover for when off run. Estimated at 20% across the fleet. This is not included within the figures above.
- 2 Crewing costs does not include associated costs of training and Personal Protective Equipment. These costs will also reduce, but may initially be partly offset by extra introductory training
- 3 In addition there should be a reduction in service and maintenance costs. Awaiting results of the trial to establish the differences.

35. There are potentially significant savings to be achieved by replacing a traditional fire engine with an IRV. The revenue saving is estimated at £400,000

per year. In addition, there could be a capital saving of £91,000 over the ten year life of an IRV leading to a reduced requirement for VERF contributions.

36. As part of the pilot phase any proposed equipment changes will be bench marked to ensure value for money before accepting any further proposals (similarly any reductions in equipment provision will lead to a reduction in cost).

#### **Section 151 Officer Commentary**

37. The Section 151 Officer notes that significant expenditure is required to deliver the trial, however the proposal to replace traditional vehicles with IRVs will deliver an ongoing saving to the Council if the trial is successful and the change in service delivery is implemented following appropriate consultation. The cost of the trial is not budgeted and additional revenue funding of £0.5m will be required on an Invest to Save basis for the cost of the staff involved in the trial. The full cost of the trial is noted in the part two report. The detailed proposals will be considered by the Investment Panel at its next meeting and the Section 151 Officer recommends that due consideration is given to the success criteria and that this is agreed by the relevant parties prior to the commencement of the trial in April 2017.

#### **Legal Implications – Monitoring Officer**

38. The procurement was done in accordance with the Public Contracts Regulations 2015. The use of the Open Procedure meant that SFRS tested the market thoroughly for best value.
39. The contract was specially written to help SFRS achieve its objectives of trialling the concept of an initial response vehicle to see if it can be proved. SFRS has the flexibility to discontinue the contract if things do not go as planned.

#### **Equalities and Diversity**

40. One facet of the proof of concept exercise will be to develop the Equalities Impact Assessment (EIA) and monitor how the differentiated response to incidents is experienced by communities and staff. Therefore, assessment of the pilot's success and deciding whether to propose advancing to the second stage will, in part, rest upon the outcome of the EIA.

#### **Climate change/ carbon emissions implications**

41. It is anticipated that when comparing like for like mileage between a traditional LGV sized appliance and an IRV there will be less fuel consumption and therefore fewer carbon emissions. Similarly, when at the site of an incident the IRVs are likely to use less fuel to power connected appliances than a traditional vehicle.

#### **WHAT HAPPENS NEXT:**

42. Key programme milestones:
- Award of Contract – November 2016



- Receipt of vehicles, equipment, training package and safe systems of work – April 2017, followed by ‘go live’ of pilot
  - Review of pilot and, if successful, incorporate IRV concept into revised Public Safety Plan proposals for consultation – Autumn 2017.
- 

**Contact Officer:**

Area Commander Ian Thomson 01737 733687

**Consulted:**

See Consultation section in main body of report

**Annexes:**

Annex 1– Incidents attended by English Fire and Rescue Services 1999 - 2015

Annex 2 – Example IRV image.

Annex 3 – Fire and Rescue Service National incident types

**Sources/background papers:**

- Operations Management Report (IRV)

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Incidents attended by English Fire and Rescue Services 1999 – 2015

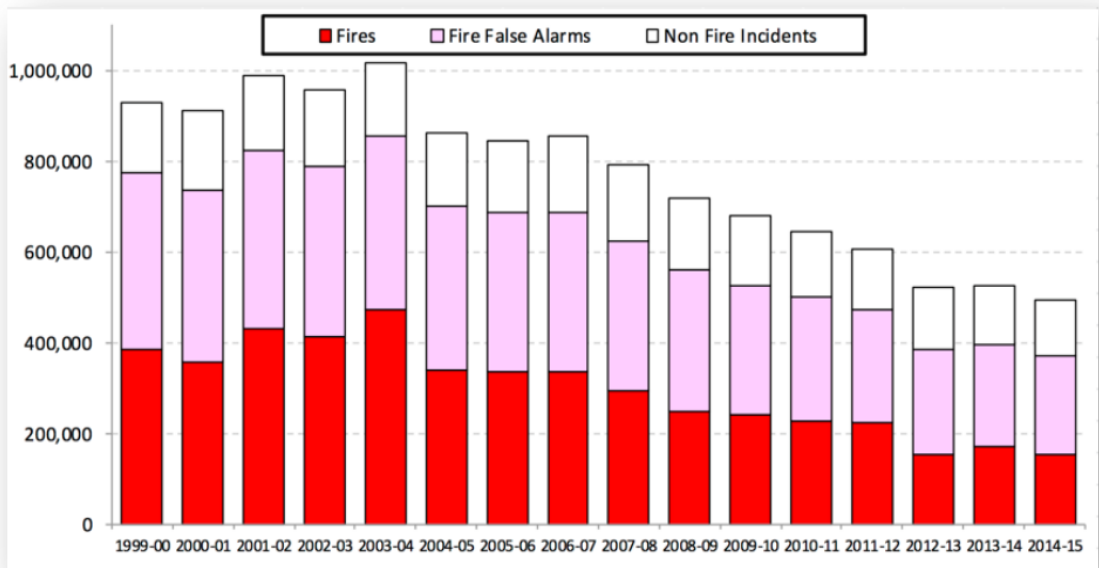


Figure 4. Incidents attended by Fire and Rescue Services, in England, 1999 -2015 (DCLG, 2015)

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Example of what an Initial Response Vehicle may look like



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## Fire and Rescue Service Incident Types

### Will be attended by and IRV:

Fire in the open - small  
 Advice given  
 Caravan / camping  
 Chimney  
 Co responder  
 Fire now out  
 Gas alarms  
 Late fire call  
 Lift persons shut in  
 Persons locked in

Persons locked out  
 Persons on fire  
 Post box  
 Abandoned call  
 Road furniture  
 Smoke alarm  
 Smoke in the open  
 Swill away  
 Vehicle leaking fuel  
 Vehicle small

### May be attended by an IRV:

Building Fire  
 Derelict property fire  
 Fire  
 RTC  
 RTC persons trapped (large vehicles)  
 RTC persons trapped (small vehicles)

Assist other agency  
 Fire safety issue  
 Inform other agency  
 Persons  
 Persons collapsed

### Will not be attended by an IRV:

Aircraft accident light  
 Aircraft in distress  
 Aircraft light  
 Animal rescue large  
 Animal rescue small  
 Bomb suspected  
 Building collapse  
 Building thatched  
 Call challenged mp - mobile phone  
 Call challenged ps - public subscriber line  
 Civil disturbance  
 Cylinder acetylene  
 Cylinder other  
 Dangerous structure  
 Electrical installations  
 Evacuation of persons  
 Explosion  
 Fire in the open - large  
 Flooding  
 Hazmat major  
 Hazmat minor  
 Oil pollution  
 Persons trapped  
 Pipeline

Railway accident  
 Railway embankment  
 Railway train passenger  
 Rescue from confined space  
 Rescue from entrapment (non-emergency)  
 Rescue from height  
 Rescue from mud  
 Rescue from water  
 Ship sinking  
 Suicide attempt  
 Supply water  
 Suspicious powder  
 Unidentified smell  
 Vehicle large





**SURREY COUNTY COUNCIL****CABINET****DATE:** 18 OCTOBER 2016**REPORT OF:** N/A**LEAD OFFICER:** ANN CHARLTON, DIRECTOR OF LEGAL, DEMOCRATIC AND CULTURAL SERVICES**SUBJECT:** LEADER/DEPUTY LEADER/CABINET MEMBER DECISIONS TAKEN SINCE THE LAST CABINET MEETING**SUMMARY OF ISSUE:**

To note the delegated decisions taken by Cabinet Members since the last meeting of the Cabinet.

**RECOMMENDATIONS:**

It is recommended that the Cabinet note the decisions taken by Cabinet Members since the last meeting as set out in Annex 1.

**REASON FOR RECOMMENDATIONS:**

To inform the Cabinet of decisions taken by Cabinet Members under delegated authority.

**DETAILS:**

1. The Leader has delegated responsibility for certain executive functions to the Deputy Leader and individual Cabinet Members, and reserved some functions to himself. These are set out in Table 2 in the Council's Scheme of Delegation.
2. Delegated decisions are scheduled to be taken on a monthly basis and will be reported to the next available Cabinet meeting for information.
3. **Annex 1** lists the details of decisions taken by Cabinet Members since the last Cabinet meeting.

**Contact Officer:**

Andrew Baird, Regulatory Committee Manager, Tel: 020 8541 7609

**Annexes:**

Annex 1 – List of Cabinet Member Decisions

**Sources/background papers:**

- Agenda and decision sheets from the Cabinet Member meetings (available on the Council's website)

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By virtue of paragraph(s) 3 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

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