

Cabinet

**Date & time**

Tuesday, 27 June
2017 at 2.00 pm

Place

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

Contact

Vicky Hibbert or Anne
Gowing
Room 122, County Hall
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**We're on Twitter:**

@SCCdemocracy

Cabinet Members: Mr David Hodge CBE, Mrs Helyn Clack, Mrs Clare Curran, Mr Mel Few, Mr John Furey, Mr Mike Goodman, Mrs Mary Lewis, Mr Colin Kemp, Mr Tim Oliver and Ms Denise Turner-Stewart

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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 Anne Gowing on 020 8541 9229 or 020 8541 9938.

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If you have any queries regarding this, please contact the representative of Legal and Democratic Services at the meeting

1 APOLOGIES FOR ABSENCE

2 MINUTES OF PREVIOUS MEETING: 30 MAY 2017

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

3 DECLARATIONS OF INTEREST

All Members present are required to declare, at this point in the meeting or as soon as possible thereafter

- (i) Any disclosable pecuniary interests and / or
- (ii) Other interests arising under the Code of Conduct in respect of any item(s) of business being considered at this meeting

NOTES:

- Members are reminded that they must not participate in any item where they have a disclosable pecuniary interest
- As well as an interest of the Member, this includes any interest, of which the Member is aware, that relates to the Member's spouse or civil partner (or any person with whom the Member is living as a spouse or civil partner)
- Members with a significant personal interest may participate in the discussion and vote on that matter unless that interest could be reasonably regarded as prejudicial.

4 PROCEDURAL MATTERS

a Members' Questions

The deadline for Member's questions is 12pm four working days before the meeting (*21 June 2017*).

b Public Questions

The deadline for public questions is seven days before the meeting (*20 June 2017*).

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 SELECT COMMITTEES, TASK GROUPS, LOCAL COMMITTEES AND OTHER COMMITTEES OF THE COUNCIL

None received.

CORPORATE PRIORITIES: 1. WELLBEING

6 SURREY SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2016 - 17 (Pages 1 - 60)

The Surrey Safeguarding Adults Board (SSAB) is a statutory Board with responsibilities set out in the Care Act 2014.

The Board is chaired by an independent chair, Simon Turpitt.

Safeguarding Adults Boards have a statutory duty to publish an annual report.

To support the transparency of the work of the Board, the Annual Report (Annex 1) is presented to Cabinet.

The recommendations of this report support the Council's Strategic priority of Wellbeing.

[The decisions on this item can be called in by the Adults and Health Select Committee]

7 CONTRACT AWARD - COUNTYWIDE CARERS SUPPORT (Pages 61 - 88)

Ensuring there is adequate support for carers is a key priority for both Adult Social Care (ASC) and the Clinical Commissioning Groups (CCGs) in Surrey. This is a result of increased statutory requirements to support carers in the Care Act 2014, young carers in the Children and Families Act 2014 and a range of national policies including the Government's National Carers Strategy.

According to the 2011 Census there are 108,433 carers in Surrey. Of these 52,050 carers were providing over 20 hours care a week. (48% of the carers) The above total also includes 64,884 carers who are also juggling work with caring. Carers also save the public purse approximately £1.8 billion per annum in Surrey alone by caring for individuals who would otherwise need more support from the state. (Valuing Carers 2015 – Leeds and Sheffield Universities). As such carers must be suitably supported in their caring role.

To ensure effective delivery, the CCGs and SCC have undertaken joint procurement exercises for four support services for Carers:

- Specialist Young Carers Service
- Giving carers a voice and multi-agency awareness raising for carers
- Back Care Services
- Welfare Benefits Advice for carers

The services are currently delivered as eight individual grant agreements ending on 31 July 2017. There are both quality and financial efficiency

gains to be achieved through a consolidated contract process rather than grant funding. Each proposed contract supports the corporate aim of promoting wellbeing and provides invaluable support to carers and young carers in a preventative way, reducing stress to individuals and the need for more expensive reactive interventions. The report seeks approval from Cabinet to award four new contracts to deliver this.

Due to the commercial sensitivity involved in the contract award process, the financial details of the successful providers and the scoring summary are detailed in the Part 2 report – item 14.

[The decision on this item may be called in by the Adults and Health Select Committee]

CORPORATE PRIORITIES: 2. ECONOMIC PROSPERITY

- 8 ANNUAL GOVERNANCE STATEMENT 2016/17** (Pages 89 - 102)
- The Annual Governance Statement provides a comprehensive assessment of the council's governance arrangements. Once signed by the Leader of the Council and the Chief Executive, the Annual Governance Statement is incorporated in the Statement of Accounts.
- [The decisions on this item can be called in by the Corporate Services Select Committee]*
- 9 FINANCE AND BUDGET MONITORING REPORT: 31 MAY 2017** (Pages 103 - 106)
- Surrey County 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 31 May 2017 (month two).
- The Section 151 Officer states in her report of February 2017 to Full Council on the 2017/18 to 2019/20 budget and Medium Term Financial Plan (MTFP) that the financial challenges facing the Council have become even more serious in the last year. During 2017/18, the Council must deliver already stretching service reduction plans of £104m, including £9m savings it has yet to identify, to balance the 2017/18 budget and move towards a sustainable budget for future years.
- Please note that the Annex to this report will be circulated separately prior to the Cabinet meeting.
- [The decisions on this item can be called in by the Corporate Services Select Committee]*
- 10 SURREY COUNTY COUNCIL PUBLIC BUS CONTRACT RETENDERING 2017** (Pages 107 - 112)
- Surrey County Council is responsible for sourcing sustainable, safe, secure and reliable local bus services as defined by the Transport Acts 1985 and 2000. These services enable residents to access employment, education, medical appointments, essential food shopping and other key services.

The report seeks to award twenty four contracts to nine operators, for the provision of Public Bus Services to commence on Saturday 2 September 2017. Of these, twenty two contracts relate to north Surrey, principally in the Elmbridge, Runnymede, Spelthorne and Woking areas, for services currently or formerly operated by Abellio. The remaining two contracts are for services in the rural area between Guildford and Cranleigh. The report provides details of the procurement process, including the results of the evaluation process, and, in conjunction with the Part 2 report (item 15) demonstrates why the recommended contract award delivers best value for money.

The current contracts which expire on 1 September 2017 have been retendered and if awarded will commence on 2 September 2017.

Overall, these proposals seek to maintain the existing network of bus provision, with some improvements proposed in certain areas.

[The decision on this item may be called in by either the Corporate Services Select Committee or the Environment and Infrastructure Select Committee]

11 APPROVAL TO APPOINT BUILDING CONTRACTORS TO ORBIS CONSTRUCTION FRAMEWORK AGREEMENT (Pages 113 - 118)

Following a competitive tender exercise Procurement and Property Services seek Cabinet approval to appoint selected building contractors to the Orbis Construction Framework.

The new Orbis Construction Framework will supplement a number of procurement arrangements which are available to SCC to deliver capital construction projects.

The objectives of the Framework put an emphasis on the delivery of Social Value benefits in the local community such as creation of employment, training and apprenticeships opportunities for residents and sub-contracting opportunities for local contractors.

In order to reduce timescales for awarding construction contracts Cabinet approval is sought to delegate authority to award contracts over £500,000.

N.B. An Annex containing exempt information is contained in Part 2 of the agenda – item 16.

[The decision on this item may be called in by the Corporate Services Select Committee]

12 LEADER / DEPUTY LEADER / CABINET MEMBER/ INVESTMENT BOARD DECISIONS TAKEN SINCE THE LAST CABINET MEETING (Pages 119 - 136)

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

13 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

- 14 **CONTRACT AWARD - COUNTYWIDE CARERS SUPPORT** (Pages 137 - 146)

This is a part 2 annex relating to item 7.

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 Adults and Health Select Committee]

- 15 **SURREY COUNTY COUNCIL PUBLIC BUS CONTRACT RETENDERING 2017** (Pages 147 - 154)

This is a part 2 annex relating to item 10.

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 either the Corporate Services Select Committee or the Environment and Infrastructure Select Committee]

- 16 **APPROVAL TO APPOINT BUILDING CONTRACTORS TO ORBIS CONSTRUCTION FRAMEWORK AGREEMENT** (Pages 155 - 156)

This is a part 2 annex relating to item 11.

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 Corporate Services Select Committee]

- 17 **PROPERTY TRANSACTION - DISPOSAL** (Pages 157 - 164)

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 Corporate Services Select Committee]

- 18 PROPERTY TRANSACTION - UPDATE ON GATWICK DIAMOND SITE (PHASE 2)** (Pages 165 - 186)

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 Corporate Services Select Committee]

- 19 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, 19 June 2017

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.

MOBILE TECHNOLOGY AND FILMING – ACCEPTABLE USE

Those attending for the purpose of reporting on the meeting may use social media or mobile devices in silent mode to send electronic messages about the progress of the public parts of the meeting. To support this, County Hall has wifi available for visitors – please ask at reception for details.

Anyone is permitted to film, record or take photographs at council meetings. Please liaise with the council officer listed in the agenda prior to the start of the meeting so that those attending the meeting can be made aware of any filming taking place.

Use of mobile devices, including for the purpose of recording or filming a meeting, is subject to no interruptions, distractions or interference being caused to the PA or Induction Loop systems, or any general disturbance to proceedings. The Chairman may ask for mobile devices to be switched off in these circumstances.

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

SURREY COUNTY COUNCIL**CABINET****DATE: 27 JUNE 2017****REPORT OF: MR MEL FEW, CABINET MEMBER FOR ADULTS****LEAD OFFICER: HELEN ATKINSON, STRATEGIC DIRECTOR ADULT SOCIAL CARE AND PUBLIC HEALTH****SUBJECT: SURREY SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2016 - 2017****SUMMARY OF ISSUE:**

The Surrey Safeguarding Adults Board (SSAB) is a statutory Board with responsibilities set out in the Care Act 2014.

The Board is chaired by an independent chair, Simon Turpitt.

Safeguarding Adults Boards have a statutory duty to publish an annual report.

To support the transparency of the work of the Board, the Annual Report (Annex 1) is presented to Cabinet.

The recommendations of this report support the Council's Strategic priority of Wellbeing.

RECOMMENDATIONS:

It is recommended that Cabinet:

1. Considers and notes the attached Surrey Safeguarding Adults Board Annual Report prior to it being published.
2. Agrees the next steps for the publication of the Annual report.

REASON FOR RECOMMENDATIONS:

These recommendations demonstrate that the Council is well placed to fulfil its obligations under the Care Act to have an established Safeguarding Adults Board in its area.

It will support the SSAB to be transparent by providing information to the public on the performance of the Board in the delivery of its strategic plan.

DETAILS:

1. Surrey has had a Safeguarding Adults Board in place for over a decade. The Board has been statutory since the implementation of the Care Act in April 2015. It has had an independent chair whose primary duty is to ensure that the main statutory agencies work together to improve practice which protects and promotes the safety of adults at risk of abuse and neglect in Surrey.
2. Surrey Safeguarding Adults Board has presented its Annual Report to Cabinet for the last seven 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 Chairman of the Health and Wellbeing Board.
3. The Board would like to support elected Members as community leaders 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.

Care Act 2014

4. 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.
5. 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:

6. 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. It is not appropriate to consult on the content.

RISK MANAGEMENT AND IMPLICATIONS:

7. There are no implications within this report.

Financial and Value for Money Implications

8. The cost of running the Board is budgeted to be £290,000 per year. This includes costs for the Independent Chair, support staff, Safeguarding Adults Reviews (previously called Serious Case Reviews), training, conferences etc.

- 9. A pooled budget with financial contributions from Police, health services, District and Borough Councils has now been put in place. Prior to this, Adult Social Care paid all the costs. This new arrangement ensures partner agencies have greater responsibility for the functioning of the Board. This is similar to the way the Surrey Safeguarding Children’s Board is financed. Surrey County Council contributes £117,450 (40.5%) towards the Board’s overall running costs. This contribution is funded out of the Care Act revenue element of Surrey’s Better Care Fund.

Section 151 Officer Commentary

- 10. No significant financial issues arise from this report.

Legal Implications – Monitoring Officer

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

Equalities and Diversity

- 12. The publication of the report 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.
- 13. An Equality Impact Assessment (EIA) is not required for this Report.

Other Implications:

- 14. The potential implications for the following council priorities and policy areas have been considered. Where the impact is potentially significant a summary of the issues is set out in detail below.

Area assessed:	Direct Implications:
Corporate Parenting/Looked After Children	No significant implications arising from this report
Safeguarding responsibilities for vulnerable children and adults	Set out below.
Public Health	No significant implications arising from this report
Climate change	No significant implications arising from this report
Carbon emissions	No significant implications arising from this report

Safeguarding responsibilities for vulnerable children and adults 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:

The Board’s Annual Report will be:

- 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
- Sent electronically to 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 2016 – 2017

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
-



Surrey Safeguarding Adults Board

Annual Report

2016 – 2017

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 2016 – 2017



*Simon Turpitt
Independent Chair, Surrey Safeguarding Adults Board*

Foreword by the chair of the Board

This has been a year of change for agencies within the Board membership and initiatives taken last year have started to make an impact though later than expected due to complexities of implementation.

Our goal is always to ensure that those adults at risk are better protected. We do this by making sure they are at the centre of what we do, reviewing and improving our processes, getting better more reliable data that we can turn into knowledge and action, supporting partner agencies to improve the skills of their workforce to better deal with safeguarding concerns. This is a key part of the Care Act with Making Safeguarding Personal and is a central theme to support people.

The opening of the multi agency MASH has been a major positive milestone that allows us to respond more quickly to concerns, share information more effectively and improve multi agency working. Like all complex and ambitious projects it has taken longer than expected to establish itself but we are now seeing a real positive result that will continue to improve the way we deal with concerns.

Adult Social Care brought its new IT system on line halfway through the year, this is a major important step in supporting the safeguarding agenda not only because it is easier to log data but also gives us much better data that allows analysis that was not really possible before. As we get more used to the system and its capabilities the Board will be able to drive initiatives based upon good evidence that will improve prevention.

We have taken the opportunity and will continue to do so of working more with partner boards, primarily with the Children's Safeguarding Board, to look at ways of sharing initiatives where appropriate and ensure we are not duplicating areas that cause extra work for Board members. This will continue as we move forward.

We have improved our assurance from partners through a robust quarterly reporting system that gives us confidence that agencies are robustly managing Safeguarding in their organisations. All partners have been supportive in delivering this programme. This has been supported by a new set of data collection that is more current and relevant.

We started this year to look independently at the way the main agencies work, starting with Adult Social Care where the Board commissioned an independent audit of case files. This highlighted areas of good practice and opportunities to improve, and was positively received, a good action plan was put in place which is progressing well and is seen by the board on a regular basis. It is anticipated that we will do the same for the other statutory partners in the next year.

The Board has developed a really good newsletter that is circulated to all members and is available on our web site. This gives updated news, policy changes, links to good practice and learnings from Safeguarding Adults Reviews.

With a full support team of three people, the Board has been able to really develop its place at the centre of adult safeguarding and support all members in making sure safeguarding is at the centre of what we all do. I must thank them for their really good work.

We have participated strongly in the National Chairs Network, National Board Managers Network and started a regular meeting with Boards from West Sussex, East Sussex and Brighton and Hove. These networks allow us to look outside our own borders to learn, share and improve.

There are always challenges for us regarding the time people can give us in meetings but I must thank all agencies for their commitment and dedication to making the system work. The Board is made up of these groups and without their support would not function effectively.

It has been a year of progression and this will continue as set out in our Strategic Plan. We still have more to do to improve protection, improve practice and increase awareness of adult safeguarding and help those who most need protecting at an earlier stage. However, we are making really strong progress and have built better and stronger systems to support people earlier. We can now see how we are matching the outcomes of the adult at risk and drive the Making Safeguarding Personal more effectively.

Simon Turpitt

Independent Chair, Surrey Safeguarding Adults Board

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Executive Summary

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

- have needs for care and support (whether or not the local authority is meeting any of those needs) and
- are 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 in the Care Act 2014.

Physical abuse	Modern slavery
Domestic violence	Discriminatory abuse
Sexual abuse	Organisational abuse
Psychological abuse	Neglect and acts of omission
Financial or material abuse	Self-neglect

There are other types of harm and exploitation where Adult Social Care (ASC) have a discretion as to whether to conduct a safeguarding enquiry. This is sometimes called a non-statutory enquiry. There is more detail about the types of abuse and neglect in Appendix A.

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
 Text 07527 182861

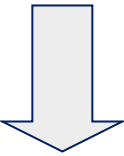



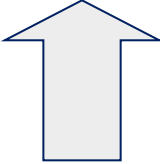

A Snapshot of Safeguarding adults in Surrey





Safeguarding adults data is collated throughout the year and presented to each Surrey Safeguarding Adults Board meeting. At the end of the year, the data goes through a structured process of verification with the Department of Health. The final data pack is published alongside the data from other Boards on the NHSdigital website. The publication usually takes place in late summer.

SSAB has seen information on the key trends in safeguarding data during the year. More detailed data will be available in the next few months and the Board will update this Annual Report when the data is released for publication by the Department of Health. A brief overview of the trends is as follows.

Safeguarding concerns		
<p>What it is:</p> <p>This is the first contact Adult Social Care (ASC) receive that an adult at risk of abuse and neglect may need safeguarding.</p>	<p>Why does it matter:</p> <p>It shows people know they need to raise a safeguarding concern if they think an adult may be at risk.</p>	
<p>What is the picture in Surrey:</p> <p>In previous years, the number of safeguarding concerns raised in Surrey has been noticeably higher than in similar Counties.</p> <p>The initial data for 2016 – 2017 shows the number of safeguarding concerns in Surrey is reducing. This will mean the number of safeguarding concerns is similar to other areas and that the MASH has helped ensure the concerns are genuine safeguarding issues which previously was not always the case. SSAB will continue to maintain strong links with the MASH to ensure everyone who needs to raise a concern knows how to contact the MASH and have their concern responded to within the agreed timescales.</p>		

<p>Safeguarding Enquiries – where action under section 42 of the Care Act is required</p>			
<p>What it is:</p> <p>This is the legal duty on ASC to make enquiries that an adult at risk needs safeguarding.</p>	<p>Why does it matter:</p> <p>This shows how many adults have needed help to protect themselves from abuse or neglect and that action has been taken ensure that the person needs support or the risks have been mitigated.</p>		
<p>What is the picture in Surrey:</p> <p>The initial safeguarding adults data shows the number of Safeguarding enquiries undertaken under Section 42 of the Care Act has increased. This shows ASC are taking action to keep adults safe.</p>			

<p>Proportion of safeguarding concerns that become safeguarding enquiries</p>		 <p>Increase protective factors</p>  <p>Reduce harm from abuse and neglect</p>
<p>What it is:</p> <p>It measures how many of the safeguarding concerns raised become safeguarding enquiries under Section 42 of the Care Act</p>	<p>Why does it matter:</p> <p>It shows whether the safeguarding concerns reveal someone is being abused or neglected and that the harm caused needs to be addressed with a statutory enquiry.</p>	
<p>What is the picture in Surrey:</p> <p>In Surrey the proportion of safeguarding concerns that become a safeguarding enquiry under section 42 of the Care Act is increasing. This means that ASC is taking formal action following receipt of the safeguarding concern. .</p>		

Making Safeguarding Personal

*Living the life I want,
free from harm*

What it is:

Making safeguarding personal focuses the safeguarding enquiry on achieving the outcomes that the adult experiencing the abuse/neglect has said they want.

Why does it matter:

Safeguarding aims to improve the lives of adults at risk. To do this, it must meet the adults agreed desired outcomes.

What is the picture in Surrey:

It is important that safeguarding achieves the agreed outcomes that the adult wants. Adults are asked what outcomes they want and at the end of the safeguarding pathway, they are asked whether those desired outcomes have been met. The initial data shows that in Surrey, the majority of adults had their desired outcomes fully or partially met.

Mental Capacity



What it is:


The Mental Capacity Act is designed specifically to empower and protect an individual who may be unable to make a decision because of the way their mind or brain works is affected, for example, by illness or disability.


Why does it matter:

People who lack mental capacity are some of the most vulnerable people in our society. They are therefore most in need of our protection.

What is the picture in Surrey:

When a person does not have the mental capacity for decision making, they need to be supported throughout the safeguarding enquiry. In Surrey most adults are supported by a member of their family. For some adults, an independent advocate is appointed for them. Occasionally, the person will have a friend supporting them.

<h2>Visits to the SSAB website</h2>		
<p>What it is:</p> <p>This is the central resource in Surrey where people can learn about safeguarding adults and how to protect them.</p>	<p>Why does it matter:</p> <p>Safeguarding adults improves people’s lives by helping them to live free from fear, abuse and neglect. It is a legal duty under the Care Act to raise awareness of safeguarding.</p>	
<p>What is the picture in Surrey:</p> <p>The SSAB website provides information for professionals and the public. There are resources, policies and tools available.</p> <p>Number of visitors to the SSAB webpages during the year:</p> <p style="text-align: center;">10,606 visits and 27,881 page views</p>		

<h2>Training</h2>		
<p>What it is:</p> <p>Training ensures the Board’s partners workforce has the correct skills and experience to safeguard adults.</p>	<p>Why does it matter:</p> <p>A competent workforce can ensure adults at risk are best protected from abuse and neglect.</p>	
<p>What is the picture in Surrey:</p> <p>SSAB has a comprehensive multi agency training programme. A range of courses at different levels and on a variety of safeguarding skills was delivered as set out at Annex D. In addition to the training, members of the workforce attended conferences and workshops to ensure they have the right competencies to safeguard adults.</p>		

Safeguarding adults – achievements this year



Multi Agency Safeguarding Hub (MASH) establishment

The MASH facilitates joined up working across services to better support vulnerable people of all ages.



Healthwatch Surrey joined the Board

Healthwatch Surrey is an independent organisation that gives people a voice to improve and shape services. They help the Board to hear how people have experienced health and care services.



Joint Strategic Needs Assessment (JSNA) chapter on safeguarding adults

The JSNA sets out the current and future health and social care needs of the local community. This is the first time there has been a chapter on Safeguarding adults. This will help inform the strategies of both health and social care.



New multi agency quality assurance programme

The programme enables agencies to identify what is working well and where improvements can be made.



New IT system in ASC to produce more detailed safeguarding information

ASC have introduced a new IT system to record information on services. This system will enable more detailed analysis of safeguarding in Surrey and a more focused prevention programme .



More briefings on the website providing information on safeguarding

By raising awareness of safeguarding we will encourage people to take early action and prevent concerns from escalating.



Improving safeguarding practice

Closer working with the Surrey Safeguarding Children's Board and the Surrey Community Safety Partnership has enabled lessons to be learnt and recommendations implemented across partnerships from Reviews.

How has this made people safer?

Multi Agency Safeguarding Hub (MASH) establishment

By having agencies co-located in the hub information can be shared more easily and efficiently across agencies. There is one contact number all agencies can use for raising any safeguarding concern (adults and children).

Healthwatch Surrey joined the Board

The voices of service users will be heard more easily by the Board and priorities set to address the most pressing needs.

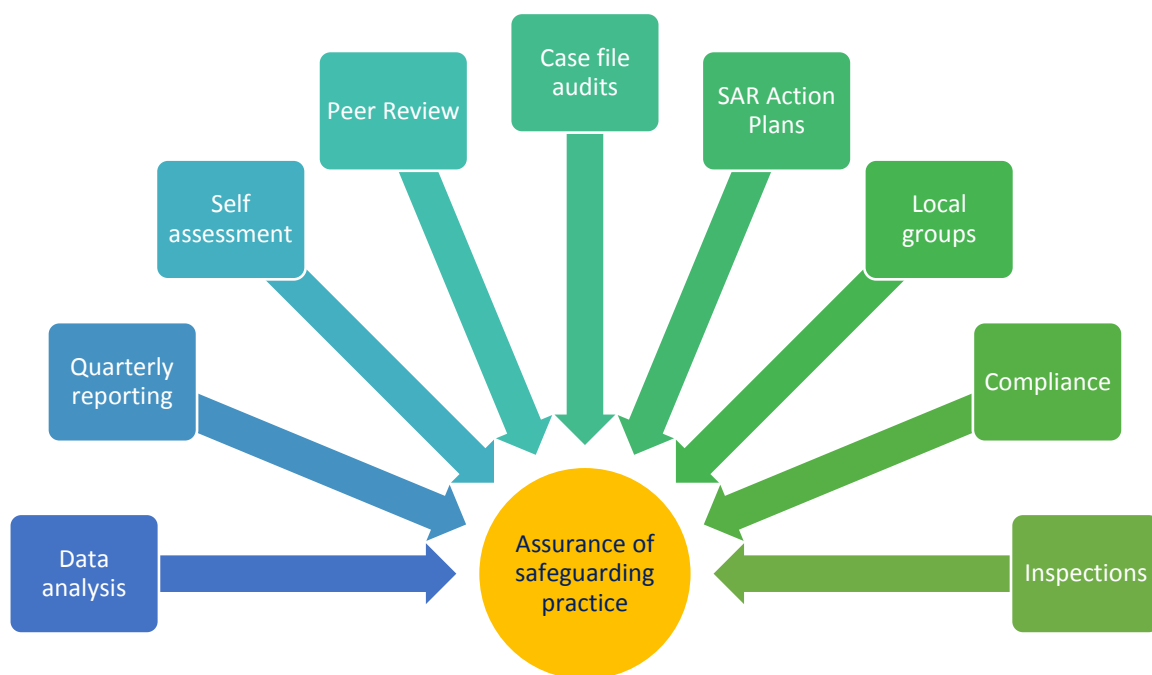


New IT system in ASC to produce more detailed information

ASC's new IT system will enable the Board to analyse information and prepare a data set that facilitates targeted prevention and safeguarding response activities

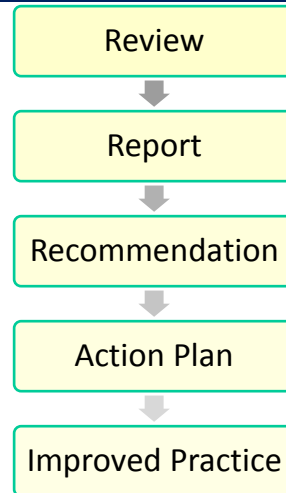
New multi agency quality assurance programme

Board members are now reporting quarterly on their safeguarding activity and this enables greater reassurance of safeguarding effectiveness. It supports agencies to identify and address issues which are a priority. Agencies share effective practice with similar agencies.



Improving safeguarding practice

Professionals have learnt lessons from safeguarding reviews and Domestic Homicide Reviews in other areas. They have been able to implement recommendations. This supports agencies to prevent abuse and neglect in Surrey.



Joint Strategic Needs Assessment (JSNA) chapter on safeguarding adults

Information on safeguarding adults is now easily available and can be used by agencies to develop effective services. It joins both health and Adult Social Care data in one location.



More briefings on the website providing information on safeguarding

It is now easier than ever for professionals, carers and adults at risk to understand safeguarding, how to keep safe and how to respond when there is a concern.

Briefings on:

- Self neglect
- Modern Slavery & Human Trafficking
- Honour Based Violence
- Female Genital Mutilation
- Financial Abuse & Scams
- Next of Kin
- Safeguarding Adults – quick guide
- List of national Safeguarding Adults Reviews
- Link to Hotel toolkit for staff in the hospitality trade

Safeguarding adults – areas the Board will continue to progress in the next year

2016 – 2017 was a year when there were many exciting developments in safeguarding adults in Surrey. ASC introduced a new IT system that increases the availability of data to identify priority issues. The Multi Agency Safeguarding Adults Hub was launched in October 2016. Several agencies undertook audits or had inspections and have shared their action plans with the Board. The new proposals for legislation to replace the Deprivation of Liberty Safeguards was made public in March 2017.

The Safeguarding Adults Board is working closer than ever with the Surrey Safeguarding Children's Board (SCB) and will be looking closely at the response to the Wood Review that sets out a proposal for radical changes of SCBs. Both Boards will be working jointly to consider how effective services are in relation to the transition between children's and adults services.

Whilst all of the above represent positive opportunities for change, they also require strategic oversight to ensure the anticipated benefits are realised and embedded. The Board will be providing that oversight as part of its statutory duties to ensure safeguarding adults is effective.

Further information on the priorities and actions for the Board in 2017 – 2018 are available in the Strategic Plan on the website at: [Surrey Safeguarding Adults Board Strategic Plan](#).

Full Report

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 B.

Living in Surrey

The safeguarding duties apply to adults who cannot protect themselves from abuse and neglect because they have care and support needs. The latest available safeguarding adults data (ASC data 2015 – 2016) tells us the following residents are those who have most frequently needed safeguarding.

Safeguarding enquiries in Surrey: (ASC data 2015 – 2016)	
	
<ul style="list-style-type: none"> ❖ People aged over 65 years who have physical support needs (41% of safeguarding enquiries) ❖ People with memory and cognition support needs aged 65 years and older (12% of safeguarding enquiries) 	<p>In Surrey there are: 216,700 people aged over 65 years (more than half of the safeguarding enquiries in Surrey are for people over the age of 65 years)</p>
<ul style="list-style-type: none"> ❖ People with physical support aged 18 – 64 years (6% of safeguarding enquiries) 	<p>In Surrey there are 115,216 carers who live and provide unpaid care for Surrey residents (estimate from Joint Strategic Needs Assessment)</p>
<ul style="list-style-type: none"> ❖ People with a learning disability aged 18 – 64 years (14% of safeguarding enquiries) 	<p>In Surrey there are: 16,914 people aged 18-64 have a learning disability</p>
<ul style="list-style-type: none"> ❖ People with mental health needs aged 18 – 64 years (7% of safeguarding enquiries) 	<p>In Surrey there are: 8,227 people on GP's registers have a history of depression.</p>

Deprivation: Surrey has significantly lower deprivation than England. Index of Multiple Deprivation score 9.4 compared to 21.8 for England (2015)

Unemployment: Surrey has a significantly lower percentage of people in long term unemployment than England 0.09% compared to 0.37% 2016.

Mental Health Benefit Claimants: Surrey has a slightly higher percentage of mental health incapacity benefit claimants than England. Incapacity benefit is a measure of the level of severity of mental illness in the community and a direct measure of socio-economic disadvantage in those 'not in work' because of mental illness.

Homelessness: Surrey has a significantly lower level of statutory homelessness acceptances per 1,000 households than England (2015/2016)

Housing: Surrey has a significantly lower percentage of houses that are overcrowded than England; 3.4% (Surrey) compared to 4.8% (England) (2011).

Alcohol: Alcohol-related hospital admissions in Surrey have risen by 24% since 2009/2010. However the level in Surrey is significantly lower than England.

Crime

- Surrey has a significantly lower rate of violent crime per 1000 population than England (2015/2016)
- Surrey has a lower rate of violent offences (including sexual violence) per 1000 than England (2015/2016).
- Surrey has a significantly lower rate of emergency hospital admissions per 100,000 population for violent crime (including sexual violence) than England.

Domestic Abuse

- Surrey has a lower rate of police recorded domestic abuse-related incidents and offences per 1,000 population than comparator police forces. (2015/2016)
- The percentage of convictions in domestic abuse-related prosecutions in Surrey is slightly lower than in comparator police force areas. (2015/2016)

Sources of data:

The [Surrey Joint Strategic Needs Assessment](#)

Data from the Office of National Statistics on [Domestic Abuse in England and Wales](#)

Why do some adults in Surrey need safeguarding?

The vision of the Surrey Safeguarding Adults Board is that all adults in Surrey will live their lives free from fear, harm and abuse. For most adults in Surrey this is true. Information from the national measuring of wellbeing shows the majority of adults in Surrey express high levels of happiness¹.

Some adults do, however, need safeguarding. These are adults whose care and support needs prevent them from protecting themselves from harm. Where there is a concern that the adult is experiencing, or at risk of abuse or neglect, then a response is required from professionals to safeguard them.

The safeguarding response in Surrey always aims to be proportionate, that is the least intrusive response appropriate to the risk presented and it aims to achieve the outcomes that the adult wants. This is called 'making safeguarding personal'. Safeguarding professionals will ask the adult what their desired outcome is from the safeguarding enquiry. Professionals will ensure the adult has the necessary support so they can be fully involved in what happens. This may involve an advocate providing support. A wide range of people may be supporting, representing and advocating for an individual. They may be a friend, family member or an independent advocate. At the end of the safeguarding enquiry, the professional will check whether the adult's desired outcomes have been achieved.

ASC collate information on how many times the safeguarding enquiry has achieved the outcomes desired by the adult. The final, verified data will not be available from the Department of Health until later in the year. Early indications are that a high proportion of adults in Surrey have an advocate where it is needed and achieve the outcomes they want from the safeguarding enquiry.

¹ [Measuring national well-being dataset](#)

The Multi Agency Safeguarding Hub

On 5 October 2016 Surrey launched the Multi Agency Safeguarding Hub (MASH). The MASH is the initial point of contact that improves the safeguarding response for children and adults at risk of abuse or neglect through better information sharing and high-quality and timely responses.

Surrey MASH is the largest integrated Adults' and Children's MASH in the UK - unique due to ASC with Surrey and Borders Partnership working in a joint collaborative way. The MASH is now the main 'front door' for both professionals and the public to report any concern about the safety of an adult or child.

Benefits the MASH is delivering include:

- MASH working as a true multi-agency service for day-to-day processing of referrals, sharing of information and risk assessment, with physical representation from Surrey County Council's Children Schools & Families directorate and ASC, Surrey and Borders Partnership, Surrey Police, health and education – all working in a collaborative multi-agency way; a number of agencies act like virtual partners such as Surrey Fire and Rescue Service, Trading Standards, Clinical Commissioning Groups, acute hospitals, schools, Districts & Boroughs.
- There is some early evidence that co-location of main safeguarding partners in the MASH has improved sharing of information and timeliness of decision making
- ASC and Children Schools & Families utilising the same methodology and working towards agreed levels of risk
- A seamless safeguarding service in Surrey with the Emergency Duty Team picking up MASH referrals out of hours.

Moving forward, the MASH will enable:

- faster, safer response times and an improved 'journey' for the child, adult and families as a whole
- improved interfaces between partners, with greater ability to identify potential vulnerability, enabling more preventative action to be taken in dealing with cases before they escalate
- a reduction in the number of inappropriate referrals and help prevent repeat referrals.

What SSAB has 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.

Priorities for Surrey Safeguarding Adults Board 2015 - 2016
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:

Action	How this has protected adults from abuse and neglect
Care Act implementation	Agencies have reviewed their practices in relation to the requirements of the Care Act and are now reporting quarterly into the Board. This enables agencies to provide assurance of the effectiveness of safeguarding.
SSAB Development Day	It enabled member agencies to jointly identify priorities for how adults at risk can be protected.
Effective Policies and Procedures in place	It provides agreed processes for agencies to work together to protect adults at risk and prevent abuse.
Making Safeguarding Personal by hearing what adults at risk say about health and care services	Healthwatch Surrey have joined the Board to better support the voices of adults at risk to be heard by strategic leaders in all the key agencies.
Empowerment - Making Safeguarding Personal (MSP) – publishing the Annual Report.	This empowers residents by providing information on what the Board is and what it does to support a reduction in abuse and neglect.

Action	How this has protected adults from abuse and neglect
Learning lessons from Reviews	By learning lessons from Safeguarding and Domestic Homicide Reviews, professionals in Surrey are better able to prevent abuse and neglect from happening.
Quality Assurance file audit	By undertaking an audit of safeguarding cases, lessons have been learnt. Practices that can be improved have been identified and addressed. Good practice has been highlighted and disseminated.
Workforce development and training	By reviewing and improving upon the training, staff (including volunteers) are better able to prevent, identify and respond to abuse.
Promoting awareness of hidden types of abuse and neglect	Professionals are more aware and better able to respond to types of abuse and neglect that is less familiar to them. They are better able to respond now there are policies in place specifically in relation to hidden types of abuse.
Multi Agency Safeguarding Hub (MASH) – maintaining effective links with the development of the new Surrey MASH.	SSAB has maintained effective links with the development of the MASH and that has enabled a co-ordinated programme of communications to take place. Board members have been informed of the MASH progress and this has supported them to cascade information through their agencies.
Mental Capacity Act - Professionals and residents will be supported to understand and implement the Mental Capacity Act.	The Board has produced an information sheet supporting people to better understand the role and remit of 'Next of Kin'. This will help adults have the right support when they are unable to make decisions for themselves.
Establish a formal engagement mechanism for work with District and Borough Councils (D&Bs)	District and Borough councils now have an established safeguarding group that focuses on safeguarding (adults and childrens). They have agreed a training pack that includes safeguarding adults information and will be given to large numbers of staff. This raises awareness of adult safeguarding and will support prevention and early intervention.

The following actions were started in the reporting year but were not fully completed and activities will continue next year:

Action	Impact and activities that will be undertaken in the next year
Multi agency data collection	Board members had planned to have a fully implemented multi agency data dashboard in place. Much progress has been made, however, it will not be finalised until early next year. The process of developing the dashboard has given us a valuable insight into what data is available and how it can be used. There has therefore been no impact from this delay.
Making safeguarding personal by ensuring the adult's desired outcomes are met.	The data available to the Board for much of the year has not provided evidence of how the adult's desired outcomes are being met. A new IT system is now able to collate more helpful data. This will enable the Board to understand how effective safeguarding is in meeting the adult's wishes.
Workforce development and training – reviewing the effectiveness of training by testing safeguarding practices after attending training.	It has not been possible for rigorous testing of knowledge and practices to take place. Board members remain committed to identifying an effective way of putting this in place.
Workforce development and training – quality assuring individual agencies training programmes.	It has not been possible to quality assure each agencies training but the Board has a robust multi agency training sub-group that shares information on training programmes. There is no evidence that there are currently gaps in individual agencies programmes.
Workforce development and training – accessibility of the SSAB programme.	Progress has been made to make the training programme easier to view. A new way of booking courses, online and with options to take electronic payments has been created. This will be put in place at the start of the new financial year. It is anticipated this will increase the take up of training.

Action	Impact and activities that will be undertaken in the next year
Multi Agency Safeguarding Hub (MASH) – whether information is shared between agencies effectively as a result of the MASH.	The establishment of the MASH was an ambitious project. It took time to get all the processes, people and infrastructure in place. A review is taking place to test the effectiveness of the new systems. When that review is complete there will be a better understanding of how effective the information sharing is.
Mental Capacity Act – ensuring adults who are being safeguarded, have an advocate when needed.	Insufficient information is currently available to provide full assurance this is happening in all cases. The Board will be provided with more detailed information on the provision of advocates at the end of the first quarter of the next financial year.
Mental Capacity Act - to provide assurance the Mental Capacity Act and Care Act requirements are being appropriately implemented by all relevant agencies.	Assessing mental capacity is a complex area, especially where an adult has fluctuating capacity. There is evidence of training being delivered, however, the effectiveness of decision making remains untested in some agencies. In the next year, more will be done by agencies to share their case file audits and to share effective practice.
Deprivation of Liberty Safeguards (DoLS) – to reduce the numbers of applications	The number of new applications under the Deprivation of Liberty Safeguards remains high. During the year, the number of outstanding cases increased, however, this has now started to decrease. The large number of applications remains a concern and it can be a challenge for agencies that have applications not yet authorised. It should be noted there is proposed new legislation to address the issue which is a national and not a local problem.
Working with Housing Providers to raise awareness of safeguarding	Progress was made to raise awareness of safeguarding. The head of MASH met with housing providers at the Surrey forum and discussed the development of the new MASH. Action next year will seek to take this work further and do more work with the housing sector.
Working with prisons to raise awareness of safeguarding	At the start of the year, the Board made progress and a Prison Governor agreed to join the Board. Unfortunately, that person has left his post and a replacement is being sought. It is anticipated progress will be made next year.

Action	Impact and activities that will be undertaken in the next year
Communications strategy including a campaign across Surrey to raise awareness of adult safeguarding	The Board undertook many activities to raise awareness of safeguarding adults. Improvements were made to the website and a new leaflet was produced explaining the purpose of the Board. It had been planned to work with the SCC Communications team on a safeguarding awareness campaign during this year. The campaign has been postponed until next year. The campaign will focus on identifying potential financial abuse. The board has produced additional materials on the website to raise awareness.
Working with faith groups and with voluntary groups	Whilst the Board have undertaken some generic work with the voluntary sector, there has not been specific work with faith groups. The Board will consider where it can make a difference with communications in the next year.

Some actions are not included above. These are listed below.

Self Assessment Audit - All statutory Board members to undertake a safeguarding self assessment and report the findings to the Board. This has been replaced in quarterly reporting which provides more timely assurance of activity.

Adults at risk who have a Learning Disability - Ensure lessons are learned, reviewed and embedded from Reviews and Reports in relation to adults who have a learning disability. The Board has ensured it is kept apprised of any new Reviews and Reports. No relevant publications have been made in relation to adults at risk who have a learning disability.

Transition from children to adults services – The planned work involved implementing recommendations from a Review that had been undertaken by the Surrey Safeguarding Children’s Board (SSCB). When the recommendations were made known, there were no specific actions for SSAB to take forward therefore this action was marked as closed. SSAB and SSCB are keen to undertake activity in the next financial year in relation to transition between the two services and this work will be scoped in the early months of the year.

What 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:

- Have undertaken an audit of hospital discharge processes across Surrey
- Have reviewed the agency quarterly safeguarding reports and provided feedback on safeguarding assurance.
- Have agreed the process for auditing the use of the Choking Prevention Policy and will use this to support the work of the Policy & Procedures group to review and revise the policy.

Key challenges: Some agencies had staffing issues that made it difficult for staff to attend the meetings. There were some gaps in data at the beginning of the year and this made data analysis difficult.

Training Group

At the start of the year the group was chaired by one of the acute hospital trusts, mid year this changed to the ASC adult safeguarding senior manager. 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:

- The group have reviewed the current training programme and agreed a revised offer for the next year.
- A new competency framework has been agreed.
- A training needs analysis has been undertaken.
- The next year's training programme will be better aligned to learning outcomes to support a competent workforce.

Key challenges: There were some difficulties in having a sufficiently flexible programme whilst ensuring all the courses were arranged at the beginning of the year. In the next financial year, some of the funding will be held back until mid year to address this.

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::

- One page briefing produced on human trafficking. Now on the website
- Prepared a new Surrey Police and Adult Social Care Position Statement for sign off
- Started the revision of the Choking Prevention Policy
- Revised all documents with details of the new MASH
- Completed section 3 of the Multi Agency Procedures
- Agreed to start revising the Self-Neglect and risk tool and framework

Key challenges: Some agencies had staffing issues that made it difficult for staff to attend the meetings.

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:

- The group have contributed to the new safeguarding performance dashboard for health providers that combines data in relation to both adults and children
- The group have discussed how they can contribute to the implementation of the recommendation in the Domestic Homicide Review from East Surrey Community Safety Partnership
- The group have produced a leaflet for members of the public explaining the responsibilities for people who are Next of Kin

Key challenges: Members capacity to undertake actions between the meetings has on occasions led to delays.

Safeguarding Adults Review Group – reported separately below

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.

Safeguarding Adults Reviews (previously called 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.

Notifications of cases that may meet the SAR criteria 2016 – 2017

There were 10 notifications received by the Board for cases that may meet the criteria for a SAR. Each case was investigated but did not meet the principles for a full SAR.

Where there are notifications which do not meet the SAR criteria, but there is an opportunity for learning, whether single agency or otherwise, a learning event can be run. This is to ensure that there is still an opportunity for other agencies to learn and benefit from good practice. The outcomes from these are then shared.

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, Safeguarding Adults Reviews and training / events. This was the second 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%
TOTAL	£290,005	

The expenditure of the Safeguarding Adults Board has been less than anticipated. This was due to a number of factors, namely, staff vacancies and the Board not requiring the funds allocated for Safeguarding Adults Reviews (previously called Serious Case Reviews).

The funds in the pooled partnership budget that were not spent, will be carried forward to the next year. Agencies that contribute to the budget will therefore be paying a smaller amount in 2017 – 2018.

Safeguarding Adults Board activities next year

- ❖ Utilising the Board structure to network, to share learning on safeguarding across all agencies and to work together in the most effective way
- ❖ Maintaining and develop effective links between other Boards / Partnerships / Functions (including the coroners office) in Surrey
- ❖ Sharing information on the availability of and changes to support services
- ❖ Being clear about roles of each agencies, myth busting on responsibilities
- ❖ Ensuring local processes support information sharing and effective risk management
- ❖ Scrutiny to drive service improvement
- ❖ Ensuring the voice of the service user drives service improvements
- ❖ Utilising training and feedback from safeguarding to improve services
- ❖ Supporting quality assurance / peer review processes within agencies
- ❖ Ensuring 'Making Safeguarding Personal' is fully meeting the expectations set out in the Care Act and that it improves the lives of adults at risk of abuse / neglect
- ❖ Creating a culture to support agencies to be transparent
- ❖ Raising awareness with public of safeguarding
- ❖ Ensuring people know safeguarding is everybody's business
- ❖ Engaging utilities and commercial companies - Identify individuals at an early stage
- ❖ Working with housing, housing support, the homeless to ensure adults at risk are not made more at risk due to their accommodation.

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 – Types of abuse and neglect including signs of harm

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

Appendix C – Raising awareness of safeguarding adults, events attended by SSAB staff

Appendix D – Training data

Appendix E – Surrey Safeguarding Adults Board Annual plan for 2017-2018

Appendix A – Types of abuse and neglect

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

<p>Physical abuse including:</p>	<ul style="list-style-type: none"> • Assault • hitting • slapping • pushing • misuse of medication • restraint • inappropriate physical sanctions
<p>Domestic violence including:</p>	<ul style="list-style-type: none"> • psychological • physical • sexual • financial • emotional abuse • so called ‘honour’ based violence
<p>Sexual abuse including:</p>	<ul style="list-style-type: none"> • rape • indecent exposure • sexual harassment • inappropriate looking or touching • sexual teasing or innuendo • sexual photography • subjection to pornography or witnessing sexual acts • indecent exposure • sexual assault • sexual acts to which the adult has not consented or was pressured into consenting
<p>Psychological abuse including:</p>	<ul style="list-style-type: none"> • emotional abuse • threats of harm or abandonment • deprivation of contact • humiliation • blaming • controlling • intimidation • coercion • harassment • verbal abuse • cyber bullying • isolation • unreasonable and unjustified withdrawal of services or supportive networks.

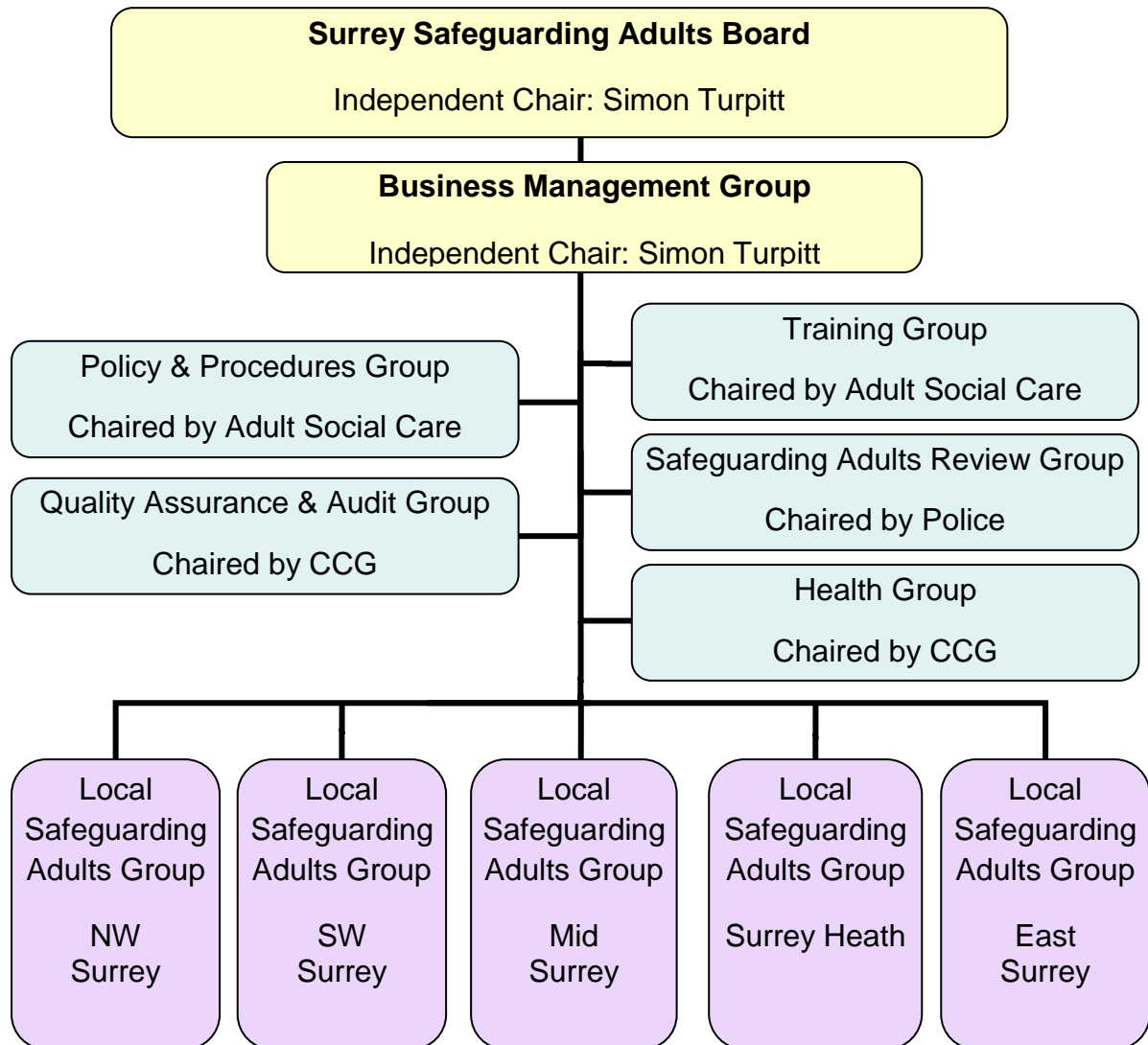
<p>Financial or material abuse including:</p>	<ul style="list-style-type: none"> • theft • fraud • internet scamming and postal fraud • coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions • the misuse or misappropriation of property, possessions or benefits
<p>Modern slavery encompasses:</p>	<ul style="list-style-type: none"> • slavery • human trafficking • forced labour and domestic servitude. • 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
<p>Discriminatory abuse</p>	<p>including forms of:</p> <ul style="list-style-type: none"> • harassment • slurs or similar treatment because of: race, gender and gender identity, age, disability, sexual orientation, religion.
<p>Organisational abuse</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>Neglect and acts of omission including:</p>	<ul style="list-style-type: none"> • ignoring medical • emotional or physical care needs • failure to provide access to appropriate health, care and support or educational services • the withholding of the necessities of life, such as medication, adequate nutrition and heating.

<p>Self-neglect</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>
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## Appendix B – Information about the Surrey Safeguarding Adults Board

### SSAB Organogram.



CCG = Clinical Commissioning Group



## SURREY SAFEGUARDING ADULTS BOARD

### TERMS OF REFERENCE

The Surrey Safeguarding Adults Board is a multi agency partnership that operates in accordance with the Care Act 2014 and the statutory guidance.

#### Scope of the Board

- 1) The Board will maintain strategic links with other Boards and partnerships including the Surrey Safeguarding Children's Board, Surrey Health and Wellbeing Board and Community Safety.
- 2) The Board will make materials available to assist members to raise awareness of safeguarding and how to respond to abuse / neglect. These will be available in a variety of formats to ensure the materials can be accessed by people with a range of protected characteristics.
- 3) The Board will involve adults at risk and carers in its work wherever possible.
- 4) The Board will promote the prevention of abuse and neglect in addition to implementing strategies to respond to concerns.
- 5) The Board will approve the terms of reference and work plans for its sub groups and task and finish groups. It endorses the work carried out by them, and oversees the implementation of subsequent developments.
- 6) The Board will produce multi-agency policies and protocols to support the delivery of safeguarding adults in Surrey. These will be kept up-to-date in response to local and national policies, guidance and reports.
- 7) The Board will collect and analyse information and activity data about safeguarding adults and formally report on its work in accordance with governance procedures. It will monitor quality outcomes and performance information to continuously improve practice
- 8) The Board will require member agencies to undertake audits in relation to safeguarding activity.
- 9) The Board will undertake reviews as required by the Board's Safeguarding Adults Review and Multi Agency Review Protocol.
- 10) The Board will promote learning from Safeguarding Adults Reviews, Serious Case Reviews, Domestic Homicide Reviews and any other review or report that offers opportunities to learn lessons and improve safeguarding practice.
- 11) The Board will implement a training programme to support the delivery of classroom based, multi-agency training.

## SSAB Membership

|                                                              |                                                                                                                                                                                                                                               |
|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Voluntary sector / User led organisations</b>             | Healthwatch Surrey<br>Action for Carers (Surrey)<br>Age UK, Surrey<br>Surrey Coalition of Disabled People<br>Surrey 50+                                                                                                                       |
| <b>Emergency Services</b>                                    | Ambulance Services<br>Surrey Police<br>Surrey Fire and Rescue Service                                                                                                                                                                         |
| <b>Housing</b>                                               | Anchor Trust - Housing                                                                                                                                                                                                                        |
| <b>Hospital / Acute Trusts</b>                               | Ashford & St Peters NHS Foundation Trust<br>Frimley Park Hospital NHS Foundation Trust<br>Royal Surrey County Hospital NHS Foundation Trust<br>St Helier & Epsom University Hospitals NHS Trust<br>Surrey & Sussex Healthcare NHS Trust       |
| <b>Community Health providers</b>                            | CSH Surrey<br>First Community Health & Care<br>Sensory Services by Sight for Surrey<br>Virgin Care<br>Surrey and Borders Partnership NHS Foundation Trust                                                                                     |
| <b>Regulators, regional and representative organisations</b> | Care Quality Commission<br>NHS England<br>Surrey Care Association                                                                                                                                                                             |
| <b>District and Borough Councils</b>                         | Guildford<br>Spelthorne<br>Tandridge                                                                                                                                                                                                          |
| <b>Surrey County Council</b>                                 | Director of Adult Social Services, Interim Assistant<br>Director for Service Delivery, ASC Business<br>Intelligence Manager, ASC Area Directors, Interim<br>Head of Safeguarding and Quality Assurance, legal<br>services, Trading Standards. |

|                                                                  |                                                                                                                                                                         |
|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Clinical Commissioning Groups</b>                             | Surrey Downs CCG<br>Guildford & Waverley CCG<br>East Surrey, North West and Surrey Heath CCGs<br>attend in their capacity as chairs of Local Safeguarding Adults Groups |
| <b>Probation Service</b>                                         | Kent Surrey & Sussex Community Rehabilitation Company Ltd (formerly Probation)<br>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 C – Raising awareness of safeguarding adults

### Events attended by SSAB 2016 – 2017

Where events attended an overview and information is presented at Board and relevant items cascaded to all Board members

| Date         | Event                                      | Type                                                                                                             | Sector / agenda                                              |
|--------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| 24 May 2016  | Behind Closed Doors                        | Domestic Abuse conference – opportunity to network                                                               | Domestic Abuse                                               |
| 1 Sept 2016  | Learning Disability (LD) Partnership Board | LD Board to present on what SSAB does and how it supports people with LD.                                        | Learning Disability                                          |
| 8 Sept 2016  | MASH Stakeholder forum                     | Event to learn & contribute to MASH development                                                                  | Multi-agency integration                                     |
| 21 Sept 2016 | Surrey Community Action                    | Annual event – opportunity to raise awareness of SSAB with community & voluntary sector                          | Community & Faith                                            |
| 6 Oct 2016   | Surrey Care Association                    | Annual conference – opportunity to network and supply information on safeguarding and SSAB                       | Care Homes and home care                                     |
| 16 Nov 2016  | SSCB – Beneath the Radar                   | Conference looking at hidden types of harm. Opportunity to network & demonstrate Board's working in partnership. | Safeguarding (especially around transition between services) |
| 25 Jan 2017  | Scams conference                           | Trading standards event to raise awareness of the risks and actions in relation to financial abuse.              | Financial Abuse                                              |



## 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 and attendance from each sector in this reporting year. The Board allocated £30,000 from the partnership pooled budget for external trainers to lead the courses.

| Name of Course               | Course date | Sector             | Nos. attending from each sector |
|------------------------------|-------------|--------------------|---------------------------------|
| Making Safeguarding Personal | 26/09/2016  | Borough Council    | 1                               |
|                              |             | SABP               | 1                               |
|                              |             | Care Home          | 2                               |
|                              |             | Probation Services | 1                               |
|                              |             | Voluntary sector   | 1                               |
|                              |             | Surrey Police      | 1                               |
|                              |             | NHS                | 1                               |
|                              |             | ASC                | 1                               |
| Self Neglect Awareness       | 25/04/2016  | ASC                | 10                              |
|                              |             | Not recorded       | 3                               |
| Self Neglect Awareness       | 01/06/2016  | ASC                | 4                               |
|                              |             | Care Home          | 1                               |
|                              |             | NHS                | 1                               |
|                              |             | Voluntary sector   | 1                               |
| Self Neglect Awareness       | 13/07/2016  | ASC                | 9                               |
|                              |             | Hospital (private) | 1                               |
|                              |             | NHS                | 1                               |
| Self Neglect Awareness       | 06/10/2016  | ASC                | 16                              |
|                              |             | SABP               | 1                               |
|                              |             | Borough Council    | 1                               |
|                              |             | NHS                | 1                               |

|                        |            |                     |    |
|------------------------|------------|---------------------|----|
| Self Neglect Awareness | 26/01/2017 | ASC                 | 14 |
|                        |            |                     |    |
| Self Neglect Awareness | 17/03/2017 | Not recorded        | 2  |
|                        |            | ASC                 | 15 |
|                        |            |                     |    |
| Provider Led Enquiries | 07/11/2016 | ASC                 | 5  |
|                        |            | Hospital (private)  | 2  |
|                        |            | Care Home           | 2  |
|                        |            | NHS                 | 1  |
|                        |            | Voluntary sector    | 1  |
|                        |            |                     |    |
| Provider Led Enquiries | 13/02/2017 | Home Care           | 1  |
|                        |            | NHS                 | 2  |
|                        |            | Not recorded        | 1  |
|                        |            | SABP                | 1  |
|                        |            |                     |    |
| Provider Led Enquiries | 20/03/2017 | Voluntary sector    | 1  |
|                        |            | Not recorded        | 1  |
|                        |            | ASC                 | 3  |
|                        |            |                     |    |
| Provider Led Enquiries | 30/06/2016 | Care                | 1  |
|                        |            | NHS                 | 1  |
|                        |            | Care Home           | 4  |
|                        |            | Home Care           | 1  |
|                        |            | Voluntary sector    | 1  |
|                        |            |                     |    |
| Managing Safely        | 14/06/2016 | Trading Standards   | 1  |
|                        |            | Hospital (private)  | 7  |
|                        |            | NHS                 | 1  |
|                        |            | Care Home           | 2  |
|                        |            | SABP                | 1  |
|                        |            | Voluntary sector    | 1  |
|                        |            |                     |    |
| Managing Safely        | 22/08/2016 | ASC                 | 1  |
|                        |            | GP surgery          | 1  |
|                        |            | Hospital (private)  | 3  |
|                        |            | Care Home           | 3  |
|                        |            | Ministry of Defence | 1  |
|                        |            | Probation Services  | 1  |
|                        |            | Home Care           | 2  |
|                        |            |                     |    |
| Managing Safely        | 05/09/2016 | NHS                 | 1  |
|                        |            | Home Care           | 2  |
|                        |            | Hospice             | 1  |
|                        |            | Not recorded        | 4  |
|                        |            |                     |    |
| Managing Safely        | 28/11/2016 | Care Home           | 1  |
|                        |            | ASC                 | 1  |
|                        |            | Not recorded        | 5  |
|                        |            | GP surgery          | 1  |
|                        |            | NHS                 | 1  |

|                                      |            |                        |    |
|--------------------------------------|------------|------------------------|----|
|                                      |            |                        |    |
| Managing Safely                      | 15/03/2017 | ASC                    | 7  |
|                                      |            | Not recorded           | 6  |
|                                      |            | NHS                    | 1  |
|                                      |            | Hospice                | 1  |
|                                      |            | Hospital (private)     | 1  |
|                                      |            | Voluntary sector       | 1  |
|                                      |            | Ministry of Defence    | 1  |
|                                      |            |                        |    |
| Supporting the Process               | 11/07/2016 | ASC                    | 4  |
|                                      |            | Hospital (private)     | 2  |
|                                      |            | SABP                   | 1  |
|                                      |            | Care Home              | 1  |
|                                      |            | Voluntary sector       | 1  |
|                                      |            | Home Care              | 1  |
|                                      |            |                        |    |
| Supporting the Process               | 17/10/2016 | Hospices               | 1  |
|                                      |            | Hospital (private)     | 2  |
|                                      |            | Probation Services     | 1  |
|                                      |            | Care Home              | 2  |
|                                      |            | Not recorded           | 3  |
|                                      |            |                        |    |
| Supporting the Process               | 12/12/2016 | Not recorded           | 2  |
|                                      |            | NHS                    | 1  |
|                                      |            | Police                 | 1  |
|                                      |            | Borough Council        | 1  |
|                                      |            |                        |    |
| Supporting the Process               | 26/01/2017 | Not recorded           | 18 |
|                                      |            |                        |    |
| Supporting the Process               | 13/03/2017 | ASC                    | 6  |
|                                      |            | Voluntary sector       | 2  |
|                                      |            | Not recorded           | 1  |
|                                      |            | NHS                    | 2  |
|                                      |            | Ministry of Defence    | 1  |
|                                      |            |                        |    |
| Modern Slavery and Human Trafficking | 05/07/2016 | ASC                    | 7  |
|                                      |            | Not recorded           | 1  |
|                                      |            |                        |    |
| Modern Slavery and Human Trafficking | 21/09/2016 | Not recorded           | 1  |
|                                      |            | NHS                    | 2  |
|                                      |            | ASC                    | 1  |
|                                      |            | SCC Childrens Services | 1  |
|                                      |            |                        |    |
| Modern Slavery and Human Trafficking | 05/10/2016 | ASC                    | 7  |
|                                      |            | Not recorded           | 2  |
|                                      |            | SCC Childrens Services | 1  |
|                                      |            |                        |    |
| Modern Slavery and Human Trafficking | 05/10/2016 | ASC                    | 2  |
|                                      |            |                        |    |

|                                                                                            |            |                        |                             |
|--------------------------------------------------------------------------------------------|------------|------------------------|-----------------------------|
| Modern Slavery and Human Trafficking                                                       | 23/11/2016 | ASC                    | 9                           |
|                                                                                            |            | NHS                    | 1                           |
| Modern Slavery and Human Trafficking                                                       | 23/11/2016 | ASC                    | 9                           |
|                                                                                            |            | SCC Childrens Services | 2                           |
|                                                                                            |            | Not recorded           | 1                           |
| Modern Slavery and Human Trafficking                                                       | 16/02/2017 | ASC                    | 12                          |
|                                                                                            |            | Not recorded           | 1                           |
|                                                                                            |            | NHS                    | 1                           |
| Modern Slavery and Human Trafficking                                                       | 16/02/2017 | SABP                   | 1                           |
|                                                                                            |            | ASC                    | 6                           |
| Internal Management Reviews                                                                | 18/11/2016 | Voluntary sector       | 1                           |
|                                                                                            |            | NHS                    | 1                           |
|                                                                                            |            | SABP                   | 1                           |
|                                                                                            |            | ASC                    | 2                           |
|                                                                                            |            | SCC Cultural Services  | 1                           |
| Internal Management Reviews                                                                | 17/02/2017 | ASC                    | 2                           |
|                                                                                            |            | Not recorded           | 1                           |
|                                                                                            |            | TOTAL                  | 310 people trained by SSAB. |
| NOTE – in addition to this multi agency training, agencies run their own training courses. |            |                        |                             |







# Surrey Safeguarding Adults Board

## Annual Plan 2017 – 2018

| Key Priorities for Surrey Safeguarding Adults Board                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------|
| 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>#</b>       | <b>Action</b>                                                                                                                                                                                                                                                                                  | <b>What does success look like</b>                                                                                                                        | <b>Measure / evidence</b>                                                                                                                                                                                      |
| 1.             | <p><b>Care Act Implementation</b><br/>To ensure the Board and all its members are fully compliant with the requirements in the Care Act.</p>                                                                                                                                                   | All agencies and the Board will be able to evidence through auditing, full compliance and embedding of the statutory requirements.                        | <ol style="list-style-type: none"> <li>1. Quarterly reporting to the SSAB.</li> <li>2. Data submissions to the SSAB.</li> </ol>                                                                                |
| 2.             | <p><b>Strategic Partnerships in Surrey</b><br/>To maintain and develop effective links between other Boards / Partnerships / Functions in Surrey. Including the Surrey Safeguarding Children's Board, Community Safety Partnership, Health &amp; Wellbeing Board and the Coroner's office.</p> | Members on the different Boards / Partnerships will be well informed of priorities and activities taking place. Activities will reflect joint priorities. | <ol style="list-style-type: none"> <li>1. Agendas will reflect joint priorities of the different boards/partnerships</li> <li>2. Information will be shared between Board/Partnership support staff</li> </ol> |

| <b>ACTIONS</b> |                                                                                                                                                                                          |                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>#</b>       | <b>Action</b>                                                                                                                                                                            | <b>What does success look like</b>                                                                                                                                | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 3.             | <p><b>Working better together</b><br/>Utilising the Board structure to network, to share learning on safeguarding across all agencies and to work together in the most effective way</p> | Members will feel well informed of what other board agencies are doing. They will be able to implement resources and learning that has been identified by others. | <ol style="list-style-type: none"> <li>1. Agendas will reflect items being led by a variety of different agencies.</li> <li>2. There will be actions taken forward by Board members in response to information from other members.</li> <li>3. Members will be sharing information on the availability of and changes to support services at meetings.</li> <li>4. Members will have a clear understanding of each other's roles and responsibilities.</li> <li>5. Members will work together, creating a culture to support each other to be transparent and open with the challenges, inspections and reviews they are experiencing.</li> </ol> |
| 4.             | <p><b>Performance Framework - Data</b><br/>To further develop the multi agency dashboard so it delivers data that can effectively inform and drive the Board's work.</p>                 | An up to date dashboard will be available at each Board meeting that contains relevant                                                                            | <ol style="list-style-type: none"> <li>1. A data set will be identified.</li> <li>2. Data submissions will be agreed by each relevant agency.</li> <li>3. Board members will be informed on safeguarding activity by receiving a multi agency safeguarding dashboard.</li> </ol>                                                                                                                                                                                                                                                                                                                                                                  |

| <b>ACTIONS</b> |                                                                                                                                                                                                                                                       |                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                    |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>#</b>       | <b>Action</b>                                                                                                                                                                                                                                         | <b>What does success look like</b>                                                                                                                            | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                          |
| 5.             | <p><b>Performance Framework - Reports</b><br/>To further develop the multi agency performance framework so it provides the Board with assurance that safeguarding practices are effective.</p>                                                        | A detailed framework will be available at each Board meeting that contains relevant information on safeguarding practice and priorities.                      | <ol style="list-style-type: none"> <li>1. Each relevant agency will submit high quality quarterly reports to SSAB.</li> <li>2. SSAB members will be informed on safeguarding key themes, issues and actions.</li> </ol>                                                                                            |
| 6.             | <p><b>Scrutiny to drive service improvement</b></p> <p>The Board will undertake multi-agency case file audits and share the learning from these with the Board. These will be themed to provide the Board with information on appropriate issues.</p> | Good practice and recommendations will be available from in-depth reviews. Good practice will be shared and improvements implemented.                         | <ol style="list-style-type: none"> <li>1. A process for undertaking case file audits will be agreed.</li> <li>2. A timeline of audits will be agreed.</li> <li>3. The audits will be undertaken.</li> <li>4. Recommendations and good practice will be reported back to the relevant agencies and SSAB.</li> </ol> |
| 7.             | <p><b>Using feedback to drive improvements in practice</b></p> <p>Utilising feedback from safeguarding concerns to improve services</p>                                                                                                               | Safeguarding practices will have improved and agencies will demonstrate how they have changed their practices in response to the feedback they have received. | <ol style="list-style-type: none"> <li>1. Feedback will be given to the person raising the concern in response to both safeguarding concerns and enquiries</li> <li>2. Agencies will be able to demonstrate changes made to practices in their own agencies in response to the feedback.</li> </ol>                |

| <b>ACTIONS</b> |                                                                                                                                                                                              |                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>#</b>       | <b>Action</b>                                                                                                                                                                                | <b>What does success look like</b>                                                                                                                | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                                                                                                                                         |
| 8.             | <p><b>Annual SSAB Development Day</b><br/>To actively engage in the Board's development day to identify priorities and actions for the following year.</p>                                   | <p>Board members will have all actively contributed to the day.<br/>Priorities for the next year's Action Plan will be identified and agreed.</p> | <p>3. There will be attendance from all the statutory agencies and the majority of voluntary sector agencies on SSAB.<br/>4. SSAB members will be fully engaged in discussions on themes, issues and priorities.<br/>5. A draft Action Plan will be produced that is agreed by SSAB members.</p>                                                                                                                                  |
| 9.             | <p><b>Policies &amp; Procedures</b><br/>The Board will ensure its policies and procedures are kept up to date in line with guidance, Reviews and lessons learned from existing practice.</p> | <p>SSAB's Policies and Procedures will be up to date and easily available.</p>                                                                    | <p>1. The Multi Agency Procedures will be fully complete and up to date following the revision of the Care Act in March 2016.<br/>2. Other Policies and Procedures will be updated when relevant guidance or Reviews are published.<br/>3. New Policies will be introduced when required.<br/>4. Local policy and processes will support information sharing and effective risk management – this will link to MASH activity.</p> |

| <b>ACTIONS</b> |                                                                                                                                                                                                                                        |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>#</b>       | <b>Action</b>                                                                                                                                                                                                                          | <b>What does success look like</b>                                                                                                                                                 | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 10.            | <p><b>Empowerment - Making Safeguarding Personal (MSP)</b><br/>Ensure 'Making Safeguarding Personal' is fully meeting the expectations set out in the Care Act and that it improves the lives of adults at risk of abuse / neglect</p> | <p>The voice of the service user to drive improvement</p> <p>Practices will develop in response to feedback received from adults and carers who have experienced safeguarding.</p> | <ol style="list-style-type: none"> <li>1. There will be evidence of changes in practice in response to feedback received from adults at risk and carers.</li> <li>2. Board members and staff will support the full engagement of Healthwatch Surrey who joined the Board in February 2017.</li> <li>3. Share information and issues between Healthwatch Surrey and SSAB.</li> <li>4. Demonstrate a response from SSAB to issues raised by Healthwatch Surrey.</li> </ol> |
| 11.            | <p><b>Empowerment - Making Safeguarding Personal (MSP)</b><br/>The Board will review whether adults at risk are having their outcomes met when they experience the safeguarding pathway.</p>                                           | <p>SSAB will be meeting its statutory requirement to be assured safeguarding adults is effectively in place.</p>                                                                   | <ol style="list-style-type: none"> <li>5. Data and reports will be submitted quarterly to SSAB to show how agencies are responding to the requirements in the Care Act.</li> <li>6. ASC will be able to demonstrate their response to MSP when undertaking or requesting others to undertake safeguarding enquiries under section 42.</li> </ol>                                                                                                                         |

| <b>ACTIONS</b> |                                                                                                                                                                         |                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>#</b>       | <b>Action</b>                                                                                                                                                           | <b>What does success look like</b>                                                                                                                                                         | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 12.            | <p><b>Workforce development and training</b><br/>To quality assure the existing training programme and respond to issues raised.</p>                                    | <p>A high quality training programme will have been delivered that has given staff the competencies needed to safeguard adults.</p>                                                        | <ol style="list-style-type: none"> <li>1. Quality assurance activities will be undertaken in relation to the delivery of courses.</li> <li>2. Feedback will be given to people who have raised safeguarding concerns to identify what went well and what competencies staff need further training or information on.</li> </ol>                                                                                                                                                                                         |
| 13.            | <p><b>Workforce development and training</b><br/>To review the effectiveness of safeguarding knowledge and evaluation of practices following safeguarding training.</p> | <p>Safeguarding concerns will be appropriately raised.<br/>100% of senior safeguarding leads will have accessed the correct Level of training as set in the SSAB Competency Framework.</p> | <ol style="list-style-type: none"> <li>1. There will be a smaller difference between the numbers of safeguarding concern raised and the numbers taken forward as an enquiry.</li> <li>2. Case file audits will evidence safeguarding knowledge and policies have been followed.</li> <li>3. The numbers of adults who have repeat referrals in a 12 month period will be reduced.</li> <li>4. Training will be promoted to senior managers in agencies to support their leadership of safeguarding training.</li> </ol> |

| <b>ACTIONS</b> |                                                                                                                                                                                                                                                                            |                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                          |
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| <b>#</b>       | <b>Action</b>                                                                                                                                                                                                                                                              | <b>What does success look like</b>                                                                                  | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                                                                                |
| 14.            | <p><b>Workforce development and training</b></p> <p>To support other agencies in the development and quality assurance of their training programmes.</p>                                                                                                                   | Agencies will have shared good practice in quality assurance processes.                                             | <ol style="list-style-type: none"> <li>1. Evidence of good practice being shared.</li> <li>2. Evidence of good practice being implemented.</li> <li>3. Evidence that changes have had a beneficial impact.</li> </ol>                                                                                                                                                    |
| 15.            | <p><b>Multi Agency Safeguarding Hub (MASH) - Information Sharing</b></p> <p>Review whether information sharing is working as effectively as predicted with the development of the MASH.</p>                                                                                | <p>Adults at risk will be receiving a faster response.</p> <p>Prevention of abuse and neglect will be improved.</p> | <ol style="list-style-type: none"> <li>1. Risk is being identified at an earlier stage than before the new MASH was started.</li> <li>2. Adults have experienced a quicker response after a concern has been raised.</li> <li>3. The MASH will demonstrate the capability and implementation of risk management by gathering intelligence on low level risks.</li> </ol> |
| 16.            | <p><b>Multi Agency Safeguarding Hub (MASH)</b></p> <p>Maintain effective links with the MASH developments. Attending meetings and working on communications that ensure professionals and residents are well informed of developments and safeguarding contact points.</p> | Safeguarding adults will be as firmly established in the MASH as children's safeguarding.                           | <ol style="list-style-type: none"> <li>1. The structure and processes of the MASH will demonstrate its capabilities in responding to adult safeguarding concerns.</li> <li>2. Intelligence from the MASH will be available and presented to the Board as themes and learning.</li> </ol>                                                                                 |



| <b>ACTIONS</b> |                                                                                                                                                                                                            |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                               |
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| <b>#</b>       | <b>Action</b>                                                                                                                                                                                              | <b>What does success look like</b>                                                                                                                                                 | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                                     |
| 17.            | <p><b>Mental Capacity Act</b><br/>To provide assurance the Mental Capacity Act and Care Act requirements are being appropriately implemented following the raising of a safeguarding concern with ASC.</p> | <p>The Board will be assured professionals have the competencies to recognise and respond to Mental Capacity issues in accordance with the Mental Capacity Act and Care Act.</p>   | <ol style="list-style-type: none"> <li>1. ASC will provide the Board with data to show how many people subject of a safeguarding enquiry have been assessed as lacking mental capacity.</li> <li>2. ASC will provide the Board data to show how many times advocates have been involved in safeguarding enquiries.</li> </ol> |
| 18.            | <p><b>Mental Capacity Act</b><br/>To provide assurance the Mental Capacity Act and Care Act requirements are being appropriately implemented by all relevant agencies.</p>                                 | <p>The Board will be assured professionals have the competencies to recognise and respond to Mental Capacity issues in accordance with the Mental Capacity Act and Care Act.</p>   | <ol style="list-style-type: none"> <li>1. Agencies will provide the Board with evidence of auditing mental capacity competences.</li> </ol>                                                                                                                                                                                   |
| 19.            | <p><b>Deprivation of Liberty Safeguards (DoLS)</b><br/>To ensure adults are not being deprived of their liberty unless it is within the statutory framework.</p>                                           | <p>The number of challenges to DoLS applications will be reduced.<br/>Agencies will be submitting DoLS applications that contain all the relevant and appropriate information.</p> | <ol style="list-style-type: none"> <li>1. Assurance will be given to the Board that DoLS applications are being responded to appropriately.</li> <li>2. Feedback will be given to agencies submitting DoLS applications to support them quality assure their processes.</li> </ol>                                            |

| <b>ACTIONS</b> |                                                                                                                                                                                                   |                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                             |
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| <b>#</b>       | <b>Action</b>                                                                                                                                                                                     | <b>What does success look like</b>                                                                                                                                 | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                                                                                                   |
| 20.            | <p><b>Housing and safeguarding</b><br/>Work with housing providers, housing support, services for the homeless to ensure adults at risk are not made more at risk due to their accommodation.</p> | All housing providers aware of what safeguarding is and the role of the SSAB.                                                                                      | <ol style="list-style-type: none"> <li>1. Newsletter from SSAB sent out to all housing providers</li> <li>2. Half day awareness event held specifically for all housing providers</li> <li>3. Safeguarding leads identified by all 25% of all housing providers</li> <li>4. Raise awareness of lessons learned in different types of review where housing provision is an issue.</li> </ol> |
| 21.            | <p><b>To continue working with the District and Borough Councils (D&amp;Bs) to support their implementation of safeguarding adults responsibilities</b></p>                                       | <p>All D&amp;Bs aware of their responsibilities under Care Act 2014</p> <p>Current D&amp;B lead officer's group part of the governance structure of the Board.</p> | <ol style="list-style-type: none"> <li>1. Quarterly returns to SSAB</li> <li>2. No. of safeguarding concerns raised by D&amp;Bs.</li> <li>3. All staff trained to competency level 1 by March 2018</li> </ol>                                                                                                                                                                               |
| 22.            | <p><b>Responding effectively to self-neglect in adults at risk</b></p>                                                                                                                            | Agencies will be working together effectively to support adults who are experiencing self-neglect.                                                                 | <ol style="list-style-type: none"> <li>1. All agencies will be aware of and implementing the SSAB policy on self-neglect.</li> <li>2. Lessons will be learned from cases/Reviews of self-neglect.</li> </ol>                                                                                                                                                                                |

| <b>ACTIONS</b> |                                                                                                                                                   |                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
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| <b>#</b>       | <b>Action</b>                                                                                                                                     | <b>What does success look like</b>                                                                                                                   | <b>Measure / evidence</b>                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 23.            | <b>Publicity materials in a range of formats</b>                                                                                                  | A range of materials are available to raise awareness of adult safeguarding that meets the needs of Surrey residents and professionals.              | <ol style="list-style-type: none"> <li>1. The range of formats will increase and be available for a wider range of needs.</li> <li>2. Board materials will be measured against compliance with NHS accessibility standards and will aim to meet those standards unless there is a good reason not to.</li> </ol>                                                                                                                                   |
| 24.            | <b>Raising awareness of adult safeguarding</b><br>To include engaging utilities and commercial companies - Identify individuals at an early stage | Adult safeguarding materials will have been made available through a range of opportunities. Ensure people know safeguarding is everybody's business | <ol style="list-style-type: none"> <li>1. Board members and support staff will distribute SSAB materials at forums, events and relevant meetings.</li> <li>2. Board staff will work with ASC and the MASH to develop new materials for distribution.</li> <li>3. Targeted initiatives will take place during the year for specific services, functions or adults eg. housing, faith groups, utility companies and the voluntary sector.</li> </ol> |

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**SURREY COUNTY COUNCIL**

**CABINET**

**DATE: 27 JUNE 2017**



**REPORT OF: MR MEL FEW, CABINET MEMBER FOR ADULTS**

**LEAD OFFICER: HELEN ATKINSON, STRATEGIC DIRECTOR FOR ADULT SOCIAL CARE AND PUBLIC HEALTH**

**JULIE FISHER – DEPUTY CHIEF EXECUTIVE**

**SUBJECT: CONTRACT AWARD - COUNTYWIDE CARERS SUPPORT**

**SUMMARY OF ISSUE:**

Ensuring there is adequate support for carers is a key priority for both Adult Social Care (ASC) and the Clinical Commissioning Groups (CCGs) in Surrey. This is a result of increased statutory requirements to support carers in the Care Act 2014, young carers in the Children and Families Act 2014 and a range of national policies including the Government's National Carers Strategy.

According to the 2011 Census there are 108,433 carers in Surrey. Of these 52,050 carers were providing over 20 hours care a week. (48% of the carers) The above total also includes 64,884 carers who are also juggling work with caring. Carers also save the public purse approximately £1.8 billion per annum in Surrey alone by caring for individuals who would otherwise need more support from the state. (Valuing Carers 2015 – Leeds and Sheffield Universities). As such carers must be suitably supported in their caring role.

To ensure effective delivery, the CCGs and SCC have undertaken joint procurement exercises for four support services for Carers:

- Specialist Young Carers Service
- Giving carers a voice and multi-agency awareness raising for carers
- Back Care Services
- Welfare Benefits Advice for carers

The services are currently delivered as eight individual grant agreements ending on 31 July 2017. There are both quality and financial efficiency gains to be achieved through a consolidated contract process rather than grant funding. Each proposed contract supports the corporate aim of promoting wellbeing and provides invaluable support to carers and young carers in a preventative way, reducing stress to individuals and the need for more expensive reactive interventions. The report seeks approval from Cabinet to award four new contracts to deliver this.

Due to the commercial sensitivity involved in the contract award process, the financial details of the successful providers and the scoring summary are detailed in the Part 2 annex to this report.

## **RECOMMENDATIONS:**

It is recommended that Cabinet approve the award of four contracts for the provision of specialist countywide carers support services:

- Young Carers and Young Adult Carers awarded to Action for Carers Surrey
- “Giving Carers A Voice” And Multi Agency Awareness Raising awarded to Action for Carers Surrey
- Back Care Services awarded to Action for Carers Surrey
- Benefits Advice for Carers awarded to Surrey Welfare Rights Unit

Each contract is for a period of two years commencing 1 August 2017 with an option to extend on one or more occasions for up to a total period of two years.

## **REASON FOR RECOMMENDATIONS:**

Local Authorities have a statutory duty to support adult and young carers in case of need, which could be met through a variety of approaches. There are also specific key objectives in the National Carers Strategy to engage with carers and young carers in co-design and to ensure staff are properly briefed about carers needs. Following an assessment of several service delivery and procurement options, it was concluded that a full competitive tender based on subject specific lots was the most appropriate approach. The project is funded from the Better Care Fund and forms part of the Surrey Better Care Plan.

This procurement exercise was carried out in collaboration with Surrey’s six NHS Clinical Commissioning Groups (CCGs). The objective being to secure the best supplier(s) delivering cost effective, high quality services against agreed specifications that will improve the quality of life for carers.

An open, fair and transparent tender process was undertaken and potential providers were invited to bid for one lot for each service. Following a thorough evaluation process suppliers were selected for each area.

The recommended bidders have demonstrated that they can deliver high quality services expected by Surrey County Council (SCC) and the CCGs.

There is strong evidence from national cost modelling, that support to carers helps prevent breakdown of caring situations and avoids far greater cost for the provision of more expensive, more intrusive “care packages” or interventions. Although no accurate calculation of the benefits can be made it is estimated £17.2 million of additional care and support costs will be prevented over the life of these contracts.

## **DETAILS:**

### **Background**

1. The Care Act 2014 created new obligations for carers based on the principle of “equality of esteem for carers”. This requires that carers with identified needs are either be offered preventative support or services following a statutory carers’ assessment. This means that nearly all the carers supported by SCC’s early intervention services would otherwise be entitled to a statutory assessment and this would have major resource implications for Adult Social

Care Teams. The Children and Families Act 2014 has also substantially increased our obligations to young carers with requirements to provide them with early intervention support. Under both sets of legislation, there is a duty to have an effective range of preventative services.

2. Surrey Carers have told us that they hugely value such services. Providing support for carers through early interventions greatly reduces the risk of a break down in caring situations and prevents a need for more intrusive and costly interventions. This also supports Surrey residents with caring responsibilities to have a life outside of caring and contribute to the Surrey economy and local communities.
3. The Local Authority has a duty to ensure carers are supported but there is discretion as whether to deliver the support through preventative services (such as help for young carers and advice about safe moving and handling techniques) or following a carers' assessment or young carers' needs assessment. Without the proposed services, many carers would come directly to the Council for additional support. This would have a very significant impact on demand of our Adult Social Care and Children's Services Teams and as highlighted below in the report would lead to greater costs and additional burdens placed upon SCC staff.
4. The legislation also enhances CCGs' obligations to work in partnership with the SCC to support carers. This is reinforced by key objectives in the National Carers Strategy to engage with carers and young carers in co-design of services and to ensure staff are properly briefed about carers needs. Statutory Guidance also requires CCGs to collaborate through the Better Care Fund and also to engage with patients and carers. These requirements have been amplified through the new Carers Memorandum of Understanding developed by NHS England and a local version of this "Together for Carers" has been agreed by the Surrey Health and Wellbeing Board.
5. The need for such support is also emphasised in the Government's National Carers Strategy 2010. This strategy has recently been subject to widespread government consultation about its renewal. It is set to be refreshed and re published by the new Government later this year and is expected to call for increased effort across the whole system to identify and support carers and young carers.
6. SCC and the CCGs have reviewed the whole range of funding arrangements for supporting carers delivered through the Better Care Fund. Working together, the commissioners have identified how to support an increasing number of carers within a reduced cost envelope. As part of this review, the Adult Social Care leadership team recommended continued investment for the provision of the countywide carers support services identified in this report including services for young carers; as a key preventative offer to deliver obligations under the National Carers Strategy, the Care Act 2014 and Children and Families Act 2014. Support services for carers have been shown to:
  - maintain the physical and mental health of carers and their families
  - maintain their independence and reduce carer break down
  - empower carers to manage their caring roles and have a life outside of caring
  - avoid the need for more expensive interventions via care packages
  - improve outcomes for young carers
7. The proposed contracts provide a more robust form of agreement and replace existing grant agreements for support to young carers and young adult carers, giving carers a voice, multi-agency awareness raising, back care services and benefits advice for carers.

8. It should also be noted that if these services were to cease both Adult and Children's Social Care teams would need significantly more staff to deal with substantially increased volumes of referrals and assessments. The provision of these services forms a central part of Surrey's Multi Agency Carers Commissioning Strategy which is a joint plan agreed between SCC, CCGs, carers and other stakeholders. The services support a wide range of carers; some with eligible needs and many who would rapidly develop eligible needs without support.
9. Surrey has a strong national reputation for innovative support for carers and young carers and have been identified as an exemplar area by NHS England (NHSE) result SCC and CCG partners will be working with NHSE in the coming year to disseminate learning and good practice from our work in Surrey. The services described in this report will have a key role in helping deliver this.

### **Available Funding**

10. The services are funded by Adult Social Care but with contributions from the Department of Health's "Better Care Fund." Surrey County Council (SCC) is the pooled budget holder for the Better Care Fund and use of this funding is by mutual agreement with Surrey's six NHS Clinical Commissioning Groups (CCGs). The funding proposed for these services totals £1,458,500 a year and a breakdown of this is provided in the part 2 Annex.
11. The services are currently delivered as eight individual grant agreements that end on 31 July 2017. There were two grant agreements for Young Carers and Young Adult Carers, two for "Giving Carers a Voice," three for Back Care Services and one for Benefits Advice for Carers. The services will instead be delivered via four contracts that will enable efficiency gains to be made and also ensure more regular and detailed monitoring arrangements are in place. Details of the service requirements for each contract are described below.

### **Young Carers Support Service**

12. The service is to maintain a high quality service supporting over 2000 Young Carers (under 18) and 200 Young Adult Carers (aged 18 to 24). The support provided includes:
  - A wide range of one to one support, information and advice provision
  - Group activities that enable young carers to take time out from caring; having fun and benefitting from peer support
  - Work in Surrey schools in collaboration with teaching staff and other professionals to identify and support young carers in schools
  - Supporting these young people in their transition to adult hood including facilitating a Young Adult Carers Network
  - Raising awareness with professionals and local communities to increase identification of young carers
13. The existing grants for young carers and young adult carers have been merged to promote greater reach without increasing costs. The proposed contract will support 15% more carers than at present (increasing the reach by an additional 300 young / young adult carers) but at the same cost.

### **Giving Carers a Voice**

14. Combining existing grants for giving carers a voice and multi-agency awareness raising for carers and young adult carers has allowed for savings to be made while achieving similar outcomes in promoting carer friendly



communities and a carer friendly NHS. This work is of critical importance in supporting co-design and further integration and includes

- Programme of activities to give carers a voice
- Provide informed carer views to commissioners and service providers and support carer engagement across the whole system
- Provide a programme of activities to raise awareness amongst professionals about the needs of carers and young carers
- Ensuring carers engaging with the programme have the information they need and are put in touch with appropriate support

### **Back Care Service Need**

15. Back Care Services to provide advice to carers on safe moving and handling techniques that help avoid risk of serious injury and complete breakdown of the caring situation. The service is delivered in people's own homes as both research and feedback from carers shows that it is essential for advice to be specific to the specific circumstances in each person's home. If not undertaken by these services, the cases would all need to be supported by the local authority at greater expense. Were this support not provided, many cases would result in injury to the carer leading to expensive care packages for those they look after. Three local grants have been replaced by a single contract to ensure best value. The support provided include:

- To provide advice to carers in their own homes on safe moving and handling techniques and back care
- To ensure service is provided by suitably qualified staff
- Awareness raising about service and how to make referrals so that carers needing such advice have access to this

### **Welfare Benefits Service**

16. A Welfare Benefits Advice service is designed to give "second tier" advice on benefits issues in complex cases where the independent carers support service needs an expert opinion. It forms part of our response to the requirements of Clause 4 of the Care Act concerning information provision for carers and ensuring carers have the right benefits is important in preventing breakdown of caring situations. The council has recently made savings in the provision of benefits advice that can be obtained elsewhere. However, it has been felt essential to maintain this service that deals with enquiries that are too complicated for the independent carers support service to resolve. This is a highly complex area and hence the separate specialist commission designed:

- To provide expert specialist benefits advice to carers who have been referred by carers organisations (where the case is too complex for carers support advisers to deal with)
- To provide regularly updated information for carers on benefits for carers; both online and through printed materials
- Provide briefings for people working with carers

### **Procurement Strategy and Options**

17. An open tender procedure compliant with the requirements of Public Contracts Regulations 2015 and the council's Procurement Standing Orders, was carried out for each service. The procurement was completed, using the council e-

Procurement system, with the opportunity advertised within the Official Journal of the European Union, and on Contracts Finder. Following a thorough evaluation process the recommendation provides best value for money for this contract.

18. Details of the options considered for both tendering processes and the evaluations undertaken are attached as the Part 2 report.

### **Key Implications**

19. The Care Act requires a more proactive approach to early intervention and prevention for carers as well as increasing responsibilities to meet their assessed eligible needs. The legislation also highlights a need for greater cooperation with Health Services and this is likely to lead to further increases in referrals from GP practices and NHS providers to carers support organisations including young carers support.
20. New mandatory statutory guidance also requires CCGs to undertake stakeholder engagement including with carers. The county council also has a strong commitment to Carer engagement and co-design and this is best and most cost effectively achieved through shared processes.
21. Supporting increased numbers of carers is a key priority for both Adult Social Care and the NHS in Surrey. This is also essential if the “Family Friends and Communities” approach is to be fully effective as supporting carers to continue to care (where this is their wish) helps underpin community’s ability to support vulnerable people.
22. This range of carers support is designed to support carers in their caring role and to have a life outside of caring and to help protect children and young people from inappropriate levels of caring. It will also help ensure that carers have timely information and are referred for Carers Assessments and Young Carers Needs Assessments where appropriate.
23. It is proposed that contractual agreements are offered for each service for periods of up to four years. This will entail an allocation for initial 2-year contracts with the option to extend for two further periods of one year. This is to balance the need to ensure that service providers have longer-term stability in their business plans while maximising value for money.
24. The proposed contractual agreements are designed to reflect that the support is community based, to facilitate flexible and locally responsive delivery and a focus on outcomes. The agreements will be focused on achieving outcomes for carers, with guidance in the service specification about the type of service and levels of support expected and more details about quality standards.

|                      |
|----------------------|
| <b>CONSULTATION:</b> |
|----------------------|

25. External consultation has been undertaken with our partners from Clinical Commissioning Groups and the Carers Commissioning Group. The specification for the service was developed through a co-design process involving a number of carers’ organisations. When the Multi Agency Carers Commissioning Strategy was refreshed in 2015, carers indicated strong support for prioritising provision of these services. Internal consultation has been undertaken with officers from Children, Schools and Families and Adult Social Care.

## **RISK MANAGEMENT AND IMPLICATIONS:**

26. The non-provision of support to carers would have severe reputational, legal risks. After an extensive co-design undertaken together with CCGs, we gleaned from discussions and feedback that the withdrawal of the service would seriously harm Surrey's reputation with carers, health partners and staff.
27. Risks were appropriately identified and have been satisfactorily mitigated.

These include:

- i. Costs may rise - the provider has won the tender on a fixed rate price, therefore the total annual amount paid to the supplier will not change.
- ii. Poor performance - a series of performance measures have been included in the contract covering timeliness of services delivery, carer satisfaction, quality assurance. They will be monitored on a quarterly basis.
- iii. The Council's ability to exit the contract if required - the agreement includes termination provisions to allow the council to terminate the agreement should circumstances change, by giving 3 months' notice.
- iv. Providers' ability to deliver - the providers were assessed as satisfactory for all financial checks in relation to the value of the proposed awards for each lot.
- v. Budget pressures -the element of funding drawn from the Better Care Fund is currently only in Government spending plans for 2017/18 and 2018/19. The availability of funding beyond that date would be dependent upon a future Comprehensive Spending Review. This risk is mitigated by adopting a two year contract with options to extend if funding is still available.

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

28. There is strong evidence that supporting carers helps prevent breakdown of caring situations and avoids far greater cost for the provision of more expensive, more intrusive "care packages". The "*Economic Case for Local Investment in Carer Support – Dept Health and ADASS: March 2015*" which includes a case study based on cost modelling in Surrey suggests that each pound spent on supporting carers has a cost avoidance effect of £2.97. This is where the service provided reduces the need for more expensive and intrusive care packages. A new study "The Economic Case for Supporting Young Carers" – Ecorys May 2017 shows very similar cost avoidance through preventing the need for social care support as "Children in Need". Based on this calculation, an estimated £17.2 million will be saved via cost avoidance over the full term of these contracts.
29. In this context, the investment through the Better Care Fund to support carers and young carers is good value in terms of cost avoidance. It has been demonstrated that should investment in carers support cease there would be far higher costs arising from care packages to respond to a break down in the caring situation. The process therefore was focused on getting maximum support from available resources rather than cost reduction.
30. This procurement forms part of a bigger piece of work undertaken by Surrey County Council and the Clinical Commissioning Groups in Surrey to review their funding arrangements for supporting carers delivered; including through

the Better Care Fund. Working together, the commissioners have identified how to support increasing numbers of carers whilst achieving efficiency.

31. A detailed performance and quality monitoring process will be put in place by the carers Commissioning Group to support the winning bidder and ensure that the targets for increased support for carers and young carers are achieved.

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

32. The County Council is facing a very serious financial situation, whereby there are still substantial savings to be identified and delivered to achieve a balanced budget in the current year and a sustainable budget plan for future years.
33. The Section 151 Officer can confirm that the costs of the proposed carers contracts set out in this paper are within the budget envelope for these services that has been included within the current Medium Term Financial Plan. It is also recognised that these services form an important part of Surrey's health and social care prevention strategy and help to mitigate costs across the whole system.
34. In spite of these factors, it is important to recognise that agreeing to this recommendation will reduce the council's options to balance the budget, although the national cost modelling conducted in relation to the provision of support to carers indicates that the cost to the council of not maintaining these services would likely be higher – certainly in long term.

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

35. The Council's award of the 4 contracts and the services provided under them will help it to comply with the duties placed upon it under the Care Act 2014 and the Children and Families Act 2014.
36. The Council advertised its requirements for the services to be provided in the Official Journal of the European Union. Bids were evaluated to achieve best value. . The procurements are legally compliant with the Public Contracts Regulations 2015 and the Procurement Standing Orders.

#### **Equalities and Diversity**

37. The scope of this commissioning and procurement exercise is to respond to the needs of Surrey carers. It is designed to seek to maintain and extend the reach of preventative support services while achieving savings through efficiencies.
38. The proposed Support for Young Carers contract maintains current support for carers and indeed will increase the numbers supported. There are therefore there are no negative impacts to address.
39. However, an Equality Impact Assessments (EIA) has been undertaken to test this and is attached as Annex 1.

#### **Other Implications:**

40. The potential implications for the following council priorities and policy areas have been considered and are summarised below:

| Area assessed:                                                   | Direct Implications: |
|------------------------------------------------------------------|----------------------|
| Corporate Parenting/Looked After Children                        | Set out below.       |
| Safeguarding responsibilities for vulnerable children and adults | Set out below.       |

|                  |                                                      |
|------------------|------------------------------------------------------|
| Public Health    | Set out below.                                       |
| Climate change   | No significant implications arising from this report |
| Carbon emissions | No significant implications arising from this report |

**Corporate Parenting/Looked After Children implications**

41. Support for young carers has considerable preventive benefits, helping reduce the risk of harm to these children and young people and reduce the likelihood of them being taken into care. Services working with adult carers do so as part of a whole family approach and will identify children in the household who may be young carers and will refer them to appropriate sources of help.

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

42. Providing timely information, advice and support to carers helps reduce stress for carers; which in turn reduces the risk of incidents requiring safeguarding interventions. Identification and support of young carers and referring them to appropriate sources of assistance helps reduce the risk of harm to the children and young people in question and diminishes the risk of them being left to undertake inappropriate levels of caring.
43. As part of the delivery of these contracts all workers that will be assigned to work with or have exposure to vulnerable adults or children will be subject to an enhanced DBS check. The suppliers will have in place robust DBS procedures that are in keeping with the Council's policies.

**Public Health implications**

44. The support to carers and young carers delivered through these services are designed to promote the health and wellbeing of carers and reduces the risks of stress related illness.
45. Support for young carers assists with approaches to promote healthy schools.

**WHAT HAPPENS NEXT:**

46. Following agreement by Cabinet:
- Contracts will be formerly offered to the successful bidders
  - Regular Monitoring Meetings will be held with successful bidder to ensure that the targets for increased volume of support are achieved

**Contact Officers:**

|                                                                     |
|---------------------------------------------------------------------|
| <b>Independent Carers Support</b>                                   |
| John Bangs - Carers Strategy and Development Manager (01483 519145) |
| Rachel Maloney, Strategic Procurement Manager (020 8541 7529)       |

**Consulted:**

**Internal** – Adult Social Care Senior Management Team, Orbis Procurement and Commissioning, Orbis Legal and Finance Departments.

**External** The specification was developed jointly with the 6 CCGs in Surrey. This was based on continued delivery of objectives in the co-designed Surrey carers Commissioning Strategy.

**Informed:**

Members of the Carers Commissioning Group were a part of the evaluation panel and are aware of the outcome of the bidding process.

Bidders have also informed of the evaluation panel's recommendations, and that the recommendation is subject to approval by Cabinet.

**Annexes:**

Annex 1 - EIA Countywide Carers Support Services

**Sources/background papers:**

- "Recognised, Valued and supported: Next steps for the Carers Strategy" (Department of Health Nov 2010)
  - "*Valuing Carers 2015*" Leeds and Sheffield Universities and Carers UK
  - Economic Case for Investment in Local Carers Support (Dept Health & others 2015)
  - Economic Case for Supporting Young Carers Ecorys (May 2017)
  - Impact Assessment for the Care Act Department of Health (October 2014)<sup>2</sup>
  - Joint Strategic Needs Assessment for Surrey
  - Surrey Joint Carers Commissioning Strategy
  - Making It Real for Young Carers (Young Carers Strategy for Surrey)
-

# Equality Impact Assessment (EIA)

## 1. Topic of assessment

|                  |                           |
|------------------|---------------------------|
| <b>EIA title</b> | Countywide Carers Support |
|------------------|---------------------------|

|                   |                                                    |
|-------------------|----------------------------------------------------|
| <b>EIA author</b> | John Bangs – Carers Strategy & Development Manager |
|-------------------|----------------------------------------------------|

## 2. Approval

|                    | Name         | Date approved |
|--------------------|--------------|---------------|
| <b>Approved by</b> | Sonya Sellar | 1 June 2017   |

## 3. Quality control

|                       |             |                      |             |
|-----------------------|-------------|----------------------|-------------|
| <b>Version number</b> | Version 3   | <b>EIA completed</b> | 1 June 2017 |
| <b>Date saved</b>     | 1 June 2017 | <b>EIA published</b> |             |

## 4. EIA team

| Name            | Job title                               | Organisation               | Team role         |
|-----------------|-----------------------------------------|----------------------------|-------------------|
| John Bangs      | Carers Strategy and Development manager | Adult Social Care          | Lead Commissioner |
| Debbie Hustings | Carers Partnership Manager              | Guildford and Waverley CCG | EIA Team Member   |
| Ron Critcher    | Carers Policy Officer                   | Adult Social Care          | EIA Team Member   |

## 5. Explaining the matter being assessed

### What policy, function or service is being introduced or reviewed?

Surrey County Council and the Clinical Commissioning Groups in Surrey have reviewed their whole range of funding arrangements for supporting carers delivered through the Better Care Fund. Working together, the commissioners have identified how to support an increasing numbers of carers within a reduced cost envelop. As part of this review, continued investment was recommended for the provision of countywide carers support services including for young carers; as a key preventative offer to deliver obligations under the National Carers Strategy, the Care Act 2014 and Children and Families Act 2014.

The proposed contracts provide a more robust form of agreement and replace existing grant funding for support to young carers and young adult carers, giving carers a voice, multi-agency awareness raising, back care services and benefits advice for carers:

These services support a wide range of carers and young carers; some with eligible needs and many who would develop eligible needs without support. The proposed contracts are expected to save the council more than £17.2 million over the life of the contract in terms of cost avoidance by reducing risk of carer breakdown leading to a needed for funded support packages; or in the case of young carers, support as Children in Need. It should also be noted that if these services were to cease, both Adult and Children's Social Care teams would need significantly more staff to deal with substantially increased volumes of referrals and assessments for adult carers and young carers. There would also be significant reputational damage if ceased and it should be noted that any changes to the Better care Fund spending plans would require discussion with CCGs and NHS England.

The proposal is for contracts of up to four years, being for two years in the first instance with the opportunity for this to be extended by mutual agreement for two further periods of one year.

The aim is to provide preventative support for carers in line with the Care Act 2014, the Children and Families Act 2014, the Government's National Carers Strategy and the NHS England "Integrated approach to identifying and assessing carer' health and wellbeing" (2016).

To ensure effective delivery, the CCGs and the council have undertaken joint procurement exercises for four support services for Carers:

- Specialist Young Carers Service
- Giving carers a voice and multi-agency awareness raising for carers



- Back Care Services
- Welfare Benefits Advice for carers

Support services for carers have been shown to:

- maintain the physical and mental health of carers and their families
- maintain their independence and reduce carer break down
- empower carers to manage their caring roles and have a life outside of caring
- avoid the need for more expensive interventions via care packages
- Improve the life chances of young carers

The care provided by carers in Surrey alone saves public funded authorities in Surrey an estimated £1.8 billion a year (Leeds and Sheffield Universities 2015). A study published by ADASS and the Department of Health has shown that there are clear financial benefits in supporting carers in terms of cost avoidance with each pound spent saving the local authority an estimated £2.97.

**What proposals are you assessing?**

**A) Specialist young carers support service.**

Existing grants for young carers (under 18 and young adult carers (aged 18 to 24) have been merged to promote greater reach without increasing costs. The proposed contract will support 15% more carers than at present (increasing the reach by 300 young / young adult carers) but at the same cost.

There is no loss of service but rather a greater reach for the service and so no negative impacts identified. However, were this service not to continue there would be a risk of serious harm to many of the children and young people concerned that would inevitably lead to greater cost due to them becoming “children in need”

**B) Giving carers a voice and multi-agency awareness raising**

Combining existing giving carers a voice and multi-agency awareness raising for carers and young carers has allowed for savings to be made while achieving similar outcomes in promoting carer friendly communities and a carer friendly NHS. This work is of critical importance in supporting co-design and further integration and an agreement to work with NHS England in the coming year working as a national exemplar.

**C) Back Care Services**

The back care service provides advice to carers on safe moving and handling techniques that help avoid risk of serious injury and complete breakdown of the caring situation. If not undertaken by these services, the cases would all need to be supported by the local

|                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                | <p>authority at greater expense.</p> <p><b>D) Welfare Benefits Advice</b></p> <p>A Welfare Benefits Advice service for carers is designed to give “second tier” advice on benefits issues in complex cases where the independent carers support service needs an expert opinion. Local authorities have a duty to ensure carers have access to appropriate information and advice and this includes the provision of benefits advice. This is a highly complex area and hence the separate specialist commission.</p> |
| <p><b>Who is affected by the proposals outlined above?</b></p> | <p>The proposals will affect</p> <ul style="list-style-type: none"> <li>• Carers, including young carers</li> <li>• The families of people who use the service</li> <li>• Surrey County Council staff, particularly those involved in care planning</li> <li>• External organisations we commission to deliver services on behalf of the Council or in partnership.</li> <li>• Broader Community based organisations with an interest in the needs of carers and/or young carers</li> </ul>                           |

## 6. Sources of information

### Engagement carried out

Commissioners from Surrey County Council Adult Social Care and 6 Clinical Commissioning Groups (CCGs) jointly undertook a tendering exercise for these services. This of itself involved extensive engagement with CCG partners.

In each case the specification was based on priorities contained within the co-designed Surrey Carers Commissioning Strategy and young carers' strategy and in both cases these strategies had been adopted following extensive engagement and consultation.

### Data used

Commissioners had regard to the key data sets that underpin the multi-agency Carers Commissioning Strategy and Young Carers Strategy:

- Surrey JSNA chapters on Carers and Young Carers/Young Adult Carers
- “*Valuing Carers 2015*” Leeds and Sheffield Universities and Carers UK
- Performance monitoring data collected for the carers Commissioning Group
- Economic Case for Investment in Local Carers Support (Department Health, ADASS & others 2015)
- Economic Case for Supporting Young Carers Ecorys (May 2017)

## 7. Impact of the new/amended policy, service or function

See table on page 6 to 17.

## 7a. Impact of the proposals on residents and service users and carers with protected characteristics

| Protected characteristic  | Potential positive impacts                                                                                                                                                                                                                                                                                                                                                  | Potential negative impacts                               | Evidence                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|---------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Page 76<br><br><b>Age</b> | <p>Maintaining the services will help ensure support continues to be available for carers of older people and for young adult carers. As such it beneficial for older people as well as those who look after them</p> <p>Active support to carers helps avoid a risk of any associative discrimination to family members of people with this “protected characteristic”</p> | <p>None identified as services are being maintained.</p> | <p>In 2017, there are an estimated 224,200 people over 65 living in Surrey – approximately 18.8% of the county’s population. Of these, 23,858 individuals and carers were in receipt of direct support from Surrey County Council Adult Social Care during 2015-16.</p> <p>By 2023 the number of people over 65 living in Surrey is expected to rise to 248,600 - a projected rise of 20%. By 2030 the number of older people living in Surrey is expected to rise to 292,000 - a projected rise of 30%. The population aged over 85 is expected to increase by 20% by 2023 and by 55% by 2030. This is expected to result in increased numbers of people becoming carers and requiring support</p> <p>For some years the Council has had a Transition team to support disabled young people in their transition to adult hood. The ASC Transition Team 18+ had a caseload as at 3 Feb 2017<sup>1</sup> of 1,103.</p> <p>The Care Act has extended local authority obligations around transition to cover young carers’ transition to adulthood. Carers aged 18 to 24 are now known as Young Adult Carers. According to the 2011 Census there are about 3500 young adult carers in Surrey</p> |
| <b>Disability</b>         | This service is open to everyone with different                                                                                                                                                                                                                                                                                                                             | None identified as services are being                    | In Surrey the predicted number of people with impairments in the 18-64 years population in 2017 are below. Individuals may have more than                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

<sup>1</sup> ASC LAS system [accessed 03/02/2017]

| <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 77</p>            | <p>disability types. Active support to carers and young carers helps avoid a risk of any associative discrimination to family members of people with a “protected characteristic.</p> <p>Support to young carers supports disabled parents in their parenting role and therefore has a very positive effect for this group of disabled people. There will be a 15% increase in numbers of young carers which is expected to have a positive impact on those they help look after.</p> | <p>maintained.</p> | <p>one type of impairment.</p> <table border="1" data-bbox="1086 215 2056 922"> <thead> <tr> <th>Predicted numbers of people aged 18-64 by impairment<sup>2</sup></th> <th>2017</th> </tr> </thead> <tbody> <tr> <td>People aged 18-64 predicted to have a borderline personality disorder</td> <td>3,172</td> </tr> <tr> <td>People aged 18-64 predicted to have an antisocial personality disorder</td> <td>2,446</td> </tr> <tr> <td>People aged 18-64 predicted to have psychotic disorder</td> <td>2,817</td> </tr> <tr> <td>Total people aged 30-64 predicted to have early onset dementia</td> <td>309</td> </tr> <tr> <td>Total population aged 18-64 predicted to have a learning disability (Baseline estimate)</td> <td>17,069</td> </tr> <tr> <td>Total population aged 18-64 predicted to have a moderate or severe hearing impairment</td> <td>29,179</td> </tr> <tr> <td>Total population aged 18-64 predicted to have a moderate physical disability</td> <td>56,534</td> </tr> <tr> <td>Total population aged 18-64 predicted to have a profound hearing impairment</td> <td>257</td> </tr> <tr> <td>Total population aged 18-64 predicted to have a serious physical disability</td> <td>16,954</td> </tr> <tr> <td>Total population aged 18-64 predicted to have a serious visual impairment</td> <td>457</td> </tr> </tbody> </table> | Predicted numbers of people aged 18-64 by impairment <sup>2</sup> | 2017 | People aged 18-64 predicted to have a borderline personality disorder | 3,172 | People aged 18-64 predicted to have an antisocial personality disorder | 2,446 | People aged 18-64 predicted to have psychotic disorder | 2,817 | Total people aged 30-64 predicted to have early onset dementia | 309 | Total population aged 18-64 predicted to have a learning disability (Baseline estimate) | 17,069 | Total population aged 18-64 predicted to have a moderate or severe hearing impairment | 29,179 | Total population aged 18-64 predicted to have a moderate physical disability | 56,534 | Total population aged 18-64 predicted to have a profound hearing impairment | 257 | Total population aged 18-64 predicted to have a serious physical disability | 16,954 | Total population aged 18-64 predicted to have a serious visual impairment | 457 |
|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|------|-----------------------------------------------------------------------|-------|------------------------------------------------------------------------|-------|--------------------------------------------------------|-------|----------------------------------------------------------------|-----|-----------------------------------------------------------------------------------------|--------|---------------------------------------------------------------------------------------|--------|------------------------------------------------------------------------------|--------|-----------------------------------------------------------------------------|-----|-----------------------------------------------------------------------------|--------|---------------------------------------------------------------------------|-----|
|                                                                                         | Predicted numbers of people aged 18-64 by impairment <sup>2</sup>                                                                                                                                                                                                                                                                                                                                                                                                                     | 2017               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| People aged 18-64 predicted to have a borderline personality disorder                   | 3,172                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| People aged 18-64 predicted to have an antisocial personality disorder                  | 2,446                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| People aged 18-64 predicted to have psychotic disorder                                  | 2,817                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| Total people aged 30-64 predicted to have early onset dementia                          | 309                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| Total population aged 18-64 predicted to have a learning disability (Baseline estimate) | 17,069                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| Total population aged 18-64 predicted to have a moderate or severe hearing impairment   | 29,179                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| Total population aged 18-64 predicted to have a moderate physical disability            | 56,534                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| Total population aged 18-64 predicted to have a profound hearing impairment             | 257                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| Total population aged 18-64 predicted to have a serious physical disability             | 16,954                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| Total population aged 18-64 predicted to have a serious visual impairment               | 457                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |
| <p><b>Gender reassignment</b></p>                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    | <p>The report “Gender Variance in the UK: Prevalence, Incidence, Growth and Geographic Distribution (June 2009)” includes information on the geographical distribution of the transsexual community. This distribution is based on an estimation of the implied prevalence of people who have presented with gender dysphoria (a condition where a person feels that they are trapped within a body of the wrong sex) in individual police authorities. For Surrey, the estimation is 37 per</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                   |      |                                                                       |       |                                                                        |       |                                                        |       |                                                                |     |                                                                                         |        |                                                                                       |        |                                                                              |        |                                                                             |     |                                                                             |        |                                                                           |     |

<sup>2</sup> PANSI 2017



|         |                                |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|---------|--------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|         |                                |                                   | <p>100,000 persons 16 and over. If this figure is applied to the 2015 estimate of Surrey's 16+ population then the estimated number is 348<sup>3</sup>. On the matter of issues faced by trans people Gender Identity Research and Education Society (GIRES) state in their literature<sup>4</sup> that:</p> <ul style="list-style-type: none"> <li>• Many find that their families reject them</li> <li>• Sometimes, despite being protected by employment law, they are made to feel very uncomfortable at work, as well as elsewhere</li> </ul> <p>It takes great courage for trans people to reveal their true gender identities.</p> <p>There is no available data on carers within this group but it can be assumed that there are carers amongst this cohort.</p>                                                                                                                                                                                                                                                                           |
| Page 78 | <b>Pregnancy and maternity</b> | The service is open to all carers | <p>None identified</p> <p>There were 13,542 live births in Surrey in 2015. The national average birth rate in 2015 was 62.5 per 1,000 population and in Surrey it was 63 per 1,000 population. Whilst we are seeing a decline or levelling off in terms of numbers of births, the proportion of high risk and complex pregnancies continues to grow due to an increase in maternal age, raised body mass index and a number of long term conditions.</p> <p>29.9% of women giving birth in the area in 2012/13 were aged 35 or above, this has risen to 31.3% in 2015 and which compares to 19.2% nationally in 2012/13. So there are increasing numbers of older mothers in the Surrey population, although again this varies within different district and boroughs. A few studies on the outcomes in pregnancy of healthy, older mothers suggest some health problems that increase with age.</p> <p>There are lower numbers of young mothers, 0.4% of pregnant women were under 18 (in 2014/15), which compares to 1% nationally, although</p> |

<sup>3</sup> <http://www.gires.org.uk/assets/Medpro-Assets/GenderVarianceUK-report.pdf>

<sup>4</sup> <http://www.gires.org.uk/assets/supporting-families.pdf>

|                    |                                                                                                                                                                                                            |                                                                                                                                                                                                                            | <p>these figures also vary across Surrey, with higher numbers in some boroughs. These young parents also may need more support<sup>5</sup></p> <p>There is no research evidence to suggest that there is any different impacts on carers during pregnancy although parent carers who are expecting a further child may need additional help</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                 |                                   |                                                 |                                     |                                                                 |                                   |       |         |        |        |       |       |            |        |       |       |       |       |     |         |     |       |     |     |          |        |       |       |       |       |
|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------|-------------------------------------------------|-------------------------------------|-----------------------------------------------------------------|-----------------------------------|-------|---------|--------|--------|-------|-------|------------|--------|-------|-------|-------|-------|-----|---------|-----|-------|-----|-----|----------|--------|-------|-------|-------|-------|
| <p><b>Race</b></p> | <p>This service is open to all races and new contracts include requirements for active approaches to identifying and supporting those from hard to reach groups including those from BAME communities.</p> | <p>None specifically identified as the level of service is being maintained.</p> <p>However, there is recognised to be a risk that carers from “hard to reach” or marginalised groups could be unaware of the service.</p> | <p>The service specifications and contracts will require the successful service provider to work with the Council to ensure that publicity and referrals systems help ensure that the service is fully accessible to all including those from “hard to reach groups”.</p> <p>This will include a particular focus on increasing the numbers of carers supported from BAME backgrounds</p> <p>In the 2011 census, the proportion of the Surrey population who do not describe themselves as white was 8.6%. This proportion is currently concentrated amongst those below the age of 65<sup>6</sup>.</p> <table border="1" data-bbox="1086 845 2049 1284"> <thead> <tr> <th></th> <th><b>White</b></th> <th><b>Mixed/<br/>multiple<br/>ethnic<br/>group</b></th> <th><b>Asian/<br/>Asian<br/>British</b></th> <th><b>Black/<br/>African/<br/>Caribbean/<br/>Black<br/>British</b></th> <th><b>Other<br/>Ethnic<br/>Group</b></th> </tr> </thead> <tbody> <tr> <td>18-64</td> <td>620,578</td> <td>10,472</td> <td>44,546</td> <td>9,163</td> <td>6,529</td> </tr> <tr> <td>18-65 as %</td> <td>89.77%</td> <td>1.51%</td> <td>6.44%</td> <td>1.33%</td> <td>0.94%</td> </tr> <tr> <td>65+</td> <td>189,260</td> <td>676</td> <td>3,532</td> <td>437</td> <td>561</td> </tr> <tr> <td>65+ as %</td> <td>97.32%</td> <td>0.35%</td> <td>1.82%</td> <td>0.22%</td> <td>0.29%</td> </tr> </tbody> </table> |                                                                 | <b>White</b>                      | <b>Mixed/<br/>multiple<br/>ethnic<br/>group</b> | <b>Asian/<br/>Asian<br/>British</b> | <b>Black/<br/>African/<br/>Caribbean/<br/>Black<br/>British</b> | <b>Other<br/>Ethnic<br/>Group</b> | 18-64 | 620,578 | 10,472 | 44,546 | 9,163 | 6,529 | 18-65 as % | 89.77% | 1.51% | 6.44% | 1.33% | 0.94% | 65+ | 189,260 | 676 | 3,532 | 437 | 561 | 65+ as % | 97.32% | 0.35% | 1.82% | 0.22% | 0.29% |
|                    | <b>White</b>                                                                                                                                                                                               | <b>Mixed/<br/>multiple<br/>ethnic<br/>group</b>                                                                                                                                                                            | <b>Asian/<br/>Asian<br/>British</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Black/<br/>African/<br/>Caribbean/<br/>Black<br/>British</b> | <b>Other<br/>Ethnic<br/>Group</b> |                                                 |                                     |                                                                 |                                   |       |         |        |        |       |       |            |        |       |       |       |       |     |         |     |       |     |     |          |        |       |       |       |       |
| 18-64              | 620,578                                                                                                                                                                                                    | 10,472                                                                                                                                                                                                                     | 44,546                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 9,163                                                           | 6,529                             |                                                 |                                     |                                                                 |                                   |       |         |        |        |       |       |            |        |       |       |       |       |     |         |     |       |     |     |          |        |       |       |       |       |
| 18-65 as %         | 89.77%                                                                                                                                                                                                     | 1.51%                                                                                                                                                                                                                      | 6.44%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1.33%                                                           | 0.94%                             |                                                 |                                     |                                                                 |                                   |       |         |        |        |       |       |            |        |       |       |       |       |     |         |     |       |     |     |          |        |       |       |       |       |
| 65+                | 189,260                                                                                                                                                                                                    | 676                                                                                                                                                                                                                        | 3,532                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 437                                                             | 561                               |                                                 |                                     |                                                                 |                                   |       |         |        |        |       |       |            |        |       |       |       |       |     |         |     |       |     |     |          |        |       |       |       |       |
| 65+ as %           | 97.32%                                                                                                                                                                                                     | 0.35%                                                                                                                                                                                                                      | 1.82%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 0.22%                                                           | 0.29%                             |                                                 |                                     |                                                                 |                                   |       |         |        |        |       |       |            |        |       |       |       |       |     |         |     |       |     |     |          |        |       |       |       |       |

<sup>5</sup> JSNA Chapter: Maternity

<sup>6</sup> POPPI/PANSI 2011



There are significant pockets of black and minority ethnic groups, for example in Elmbridge, Epsom and Ewell and Woking. Access to services for black and minority ethnic older people and their carers may be challenging. Barriers might include language, knowledge of what services are available, attitudes and practices of service providers and cultural factors in perceiving and understanding mental illness.

The portion of carers supported from BAME backgrounds currently identified and supported by preventative services for carers in Surrey are adult carers 7.9% and young carers 10%

Gypsies Roma and Travellers (GRT) are some of the most disadvantaged and excluded communities in our society. Historically, GRT needs have often not been fully considered when developing the services intended to support them. This has the effect of making universal services 'hard to reach' for the GRT community, compounding poor outcomes and perpetuating intergenerational patterns of exclusion and deprivation. As at July 2016 there were 694 Gypsy and Traveller Caravans in Surrey.<sup>7</sup>

A number of barriers exist for the GRT community in accessing universal health provision. These include a lack of cultural sensitivity by service providers, for example use of inappropriate written communication. For some sectors of the GRT population difficulties in maintaining contact with health services are compounded due to their transient lifestyles. If someone is labelled as No Fixed Abode, they are often denied services.

A number of BME outreach groups exist in Surrey to bring support services to minority groups. Surrey Minority Ethnic forum is a collective of community and voluntary groups from Black, Asian and Minority Ethnic (BAME) backgrounds. Through the Forum, members can access information and resources to support their work in Surrey.

<sup>7</sup> Gypsy and Traveller Caravan Count DCLG on Surrey.



|                                   |                                                                                                                                                                                             |                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>Religion and belief</b></p> | <p>The service is open to all and new contracts include requirements for active approaches to identifying and supporting those from hard to reach groups and to be culturally sensitive</p> | <p>None specifically identified as the level of service is being maintained.</p> <p>However, there is recognised to be a risk that carers from “hard to reach” or marginalised groups could be unaware of the service.</p> | <p>Over the last decade the proportion of Christians in Surrey has decreased from 74.6% in 2001 to 62.8% in 2011. The proportion of people reporting “No religion” increased from 15.2% to 24.8%. There was an increase in all other main religions. The number of Muslims increased the most from 1.3% in 2001 to 2.2% in 2011<sup>8</sup>.</p> <p>Surrey County Council has compiled an online database showing over 250 places of worship in the county at <a href="http://www.surreyplacesofworship.org.uk">www.surreyplacesofworship.org.uk</a>.</p> <p>The Carers Commissioning Group has representation from the faith sector via the Guildford Diocese’s Community Engagement teams including links to it’s multi faith network</p> |
| <p>Page 81</p> <p><b>Sex</b></p>  | <p>The service is open to all. As the majority of carers are female, the support for carers can help gender equality</p>                                                                    | <p>None identified as the level of service is being maintained.</p>                                                                                                                                                        | <p>51% of Surrey residents are female, while 49% are male. This is aligned with the UK as a whole.<sup>9</sup> According to the 2011 census 80% of Surrey males are economically active compared to 68% of women.</p> <p>However, the Surrey JSNA indicates that there is a greater preponderance of female carers with 58% of carers being female and 42% of carers male.</p>                                                                                                                                                                                                                                                                                                                                                              |

<sup>8</sup> Surrey-i Dataset Census People Characteristics Ethnicity and Religion

<sup>9</sup> ONS Population estimates 2015 by gender



**Sexual orientation**

The service is open to all.

None identified as the level of service is being maintained.

The UK Government estimates that 7% of the population are lesbian, gay, bisexual, transgender or questioning (LGBTQ). Applying this to current population estimates for Surrey, there may be around 81,800 people who identify as LGBTQ. It is likely this is a conservative estimate as the true number of people identifying themselves as lesbian, gay or bisexual, is more realistically estimated as being 9-10% of the population. According to the 2011 census 0.7% of Surrey residents identified themselves as same sex couples.

LGBTQ face barriers to accessing health care – many young people feel that health care professionals treat LGBTQ people differently which has prevented them from visiting regularly. Specific services for transgender young people are particularly oversubscribed.

LGBTQ experience poorer health outcomes than their peers – through the effects of bullying and social stigma associated with their sexuality, and through adoption of risky behaviours that are often used as a coping strategy<sup>10</sup>.

The lesbian, gay and bisexual organisation Polari, published a report<sup>11</sup> showing that many of the issues and concerns of older lesbian, gay and bisexual people are broadly similar to older heterosexual people:

- There is a desire to stay in one’s own home as long as possible, with support provided in a ‘home help’ format.
- There is a recognition that help and support will be needed and should be available, as an individual ages.
- There is recognition that suitable accommodation and support is important to an individual’s health and well-being.

However, more lesbian, gay and bisexual-specific concerns were identified:

- Concerns about to having to ‘come out’ again or ‘returning to the closet’ in a care/ residential setting.
- Concerns about accessing the lesbian, gay and bisexual community and maintaining lifestyles and friendships.

Fears about being isolated in a ‘heterosexual environment’.

Lesbians and Gay Men (source Polari – 2009)

There is little published research on gay and lesbian carers either nationally or in Surrey so the impacts on carers in this group are assumed to be similar. 12

<sup>10</sup> JSNA Chapter: Lesbian, gay, bisexual and transgender

<sup>11</sup> ‘As We Grow Older’ – A Study of the Housing and Support Needs of Older

|                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                             |                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Marriage and civil partnerships</b>                                                                                                                   |                                                                                                                                                                                                                                                                                                                             | None identified                            | According to census data from 2011 there are 482,257 people in Surrey who are married or in a civil partnership 1,602 of whom are in same-sex civil partnerships <sup>12</sup> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 83</p> <p style="text-align: center;"><b>Carers (protected by association)</b></p> | <p>Greater use is made of online consultations and e-learning.</p> <p>Work has been undertaken with the provider to adapt the delivery model to enable them to support more young carers within the available funding.</p> <p>To ensure that there is not a “cliff edge” for young carers as they turn 18 years of age.</p> | None identified as services are continuing | <p>Taking the number of carers from the 2011 Census as a percentage of the total Surrey population, and applying that to future population projections, we can estimate that in 2016 there were 115,216 carers of all ages living in Surrey. This equated to 10% of the population. An estimated 17% of carers provided more than 50 hours unpaid care per week and 28% provided more than 20 hours unpaid care per week.<sup>13</sup> There are estimated to be approximately 14,000 young carers living in Surrey.<sup>14</sup></p> <p>Carers are supported by a variety of joint health and social care funded commissioned support services. According to the 2015/16 Surrey Carers Commissioning Group report, 28,243 carers were supported through jointly funded services. The report also showed that during 2015/16 these services helped 1,545 carers who were primarily supporting a person with mental health problems, and 2,592 were carers of people with dementia.</p> <p>According to Carers UK’s analysis of the 2001 Census findings, those caring for 50 hours a week or more are twice as likely to be in poor health as those not caring (21% against 11%). This can be due to a range of factors including stress related illness and physical injury<sup>15</sup></p> <p>The ‘Healthy Lives Healthy People’ 2010 report stated that carers who care for 50 hours a week or more are 80% more likely to have health</p> |

<sup>12</sup> Surrey-i Census 2011 dataset

<sup>13</sup> Census 2011 population projections

<sup>14</sup> Census 2011 population projections and University of Nottingham. *Kids who Care*, 2010. Available from: <http://www.bbc.co.uk/news/education-11757907>

<sup>15</sup> Carers UK. *In Poor Health*, 2004. Available from: <http://static.carers.org/files/in-poor-health-carers-uk-report-1674.pdf>

impacts. It also stated that carers providing 20 hours per week or more are likely to sustain a physical injury such as back strain.<sup>16</sup>

|                                                                       |       |
|-----------------------------------------------------------------------|-------|
| <b>Number of carers known to ASC as at February 2017<sup>17</sup></b> | 7,824 |
|-----------------------------------------------------------------------|-------|

In 2016/2017 the Surrey Welfare Rights Unit service provided advice to 774 carers referred to them by carers support organisations ( an increase of 12.7% on 2015/16).

In 2015/2016 information was given to 3010 carers engaging with A Voice for Carers/ Carer Awareness/ Training service (an increase of 11% from the previous year).

1300 carers a year are supported around moving and handling, reducing the risk of injury to carers and the person they look after. This service is a priority for both health and social care partners. Without this support many of the carers supported would be at risk of harm through back or other injuries.

This is a key priority and developing area of responsibility because of Care Act requirements for young carers in “transition” .In 2015/16 this new service supported 200 young adult carers (age 18 to 24). The Government have also indicated that this is an area to be given greater priority within a new National Carers Strategy.

<sup>16</sup> Department of Health. *Healthy Lives Healthy People*, 2010. Available from: <https://www.gov.uk/government/publications/healthy-lives-healthy-people-our-strategy-for-public-health-in-england>

<sup>17</sup> ASC LAS system [accessed February 2017]

## 7b. Impact of the proposals on staff with protected characteristics

| Protected characteristic               | Potential positive impacts | Potential negative impacts | Evidence                                                                                                              |
|----------------------------------------|----------------------------|----------------------------|-----------------------------------------------------------------------------------------------------------------------|
| <b>Age</b>                             | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
| <b>Disability</b>                      | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
| <b>Gender reassignment</b>             | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
| <b>Pregnancy and maternity</b>         | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
| <b>Race</b>                            | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
| <b>Religion and belief</b>             | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
| <b>Sex</b>                             | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
| <b>Sexual orientation</b>              | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
| <b>Marriage and civil partnerships</b> | N/A                        | N/A                        | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |



|                                                  |     |     |                                                                                                                       |
|--------------------------------------------------|-----|-----|-----------------------------------------------------------------------------------------------------------------------|
| <b>Carers<br/>(protected by<br/>association)</b> | N/A | N/A | The proposals maintain services delivered by voluntary sector partners. There are no impacts identified for SCC staff |
|--------------------------------------------------|-----|-----|-----------------------------------------------------------------------------------------------------------------------|

## 8. Amendments to the proposals

| Change          | Reason for change |
|-----------------|-------------------|
| None identified | -                 |

## 9. Action plan

| Potential impact (positive or negative)                                                               | Action needed to maximise positive impact or mitigate negative impact                                                                                                | By when                             | Owner      |
|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|------------|
| Greater use is made of online consultations and e-learning                                            | Where carers do not have computer skills work will be undertaken with the Surrey Library Service which offers help to Surrey residents in improving computer skill   | Throughout the life of the contract | John Bangs |
| New Contracts require a clear approach to identifying and supporting carers from hard to reach groups | A BAME task group has been established by the Carers Commissioning Group to ensure that there is an improved multi agency action to identify and support BAME carers | Throughout the life of the contract | John Bangs |
| To ensure that there is not a "cliff edge" for young carers as they turn 18 years of age.             | Monitor service provision for young carers approaching 18 and work collaboratively within the Council and with partners to ensure appropriate services are available | Throughout the life of the contract | John Bangs |

## 10. Potential negative impacts that cannot be mitigated

| Potential negative impact | Protected characteristic(s) that could be affected |
|---------------------------|----------------------------------------------------|
| None identified           |                                                    |
|                           |                                                    |

## 11. Summary of key impacts and actions

|                                                                                        |                                                                                                                                                                                          |
|----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Information and engagement underpinning equalities analysis</b>                     | <p>The need for these services have been identified in the co-designed Surrey Carers Commissioning Strategy</p>                                                                          |
| <b>Key impacts (positive and/or negative) on people with protected characteristics</b> | <p>Maintenance of these services is beneficial to people with a protected characteristic who rely on support of a carer (as support for carers helps enable them to continue to care</p> |
| <b>Changes you have made to the proposal as a result of the EIA</b>                    | <p>A BAME task group has been established by the Surrey carers Commissioning Group</p>                                                                                                   |
| <b>Key mitigating actions planned to address any outstanding negative impacts</b>      | <p>BAME task group will support providers to ensure carers of ethnic minority groups are being effectively identified and supported</p>                                                  |
| <b>Potential negative impacts that cannot be mitigated</b>                             | <p>None identified</p>                                                                                                                                                                   |



**SURREY COUNTY COUNCIL****CABINET****DATE: 27 JUNE 2017****REPORT OF: MR TIM OLIVER, CABINET MEMBER FOR PROPERTY AND BUSINESS SERVICES****LEAD OFFICER: SHEILA LITTLE, DIRECTOR OF FINANCE****SUBJECT: ANNUAL GOVERNANCE STATEMENT 2016/17****SUMMARY OF ISSUE:**

The Annual Governance Statement provides a comprehensive assessment of the council's governance arrangements. Once signed by the Leader of the Council and the Chief Executive, the Annual Governance Statement is incorporated in the Statement of Accounts.

**RECOMMENDATIONS:**

It is recommended that:

1. The 2016/17 Annual Governance Statement (Annex 1) is approved and signed by the Leader of the Council and the Chief Executive for inclusion in the Statement of Accounts; and
2. The Audit and Governance Committee continue to monitor the governance environment and report to the Cabinet, Cabinet Member or Select Committees as appropriate.

**REASON FOR RECOMMENDATIONS:**

There is a statutory duty to annually review and report on governance through an Annual Governance Statement. The identification of areas for focus and continuous improvement ensures high standards of governance.

**INTRODUCTION:**

1. Surrey County Council's Governance Strategy and Code of Corporate Governance describe the good governance principles adopted by the council and by which the governance arrangements are assessed. The Code of Corporate Governance also details the methodology by which the annual review of governance is undertaken.
2. The review of governance is overseen by the Governance Panel (Director of Legal, Democratic and Cultural Services [Chair], senior representatives from Finance, HR, Internal Audit and Strategy and Performance, Risk and Governance Manager), which has responsibility for the development and maintenance of the governance environment and the production of the Annual Governance Statement.

3. The annual review of governance has provided a satisfactory level of assurance on the governance arrangements for the financial year ending 31 March 2017.

#### **ANNUAL GOVERNANCE STATEMENT 2016/17:**

4. The Annual Governance Statement (attached at Annex 1) has two main sections:
  - The governance environment – pages 3 to 8 (summarises the council's key policies, procedures and arrangements that evidence good governance; and includes the overall opinion of the Chief Internal Auditor)
  - Focus for 2017/18 – page 9 (outlines areas that the council will focus on during the year ahead to ensure continued good governance).

#### **CONSULTATION:**

5. The Statutory Responsibilities Network, Chief Executive and the Leader of the Council have been consulted and their comments are incorporated into the Annual Governance Statement.
6. The Audit and Governance Committee considered the draft Annual Governance Statement at its meeting on 13 June 2017. The Chief Executive introduced the draft Annual Governance Statement and commended it to the Committee. During the discussion a minor change was agreed.
7. At the end of the discussion, the Committee made the following resolutions:
  - i. That the Committee is satisfied that the governance arrangements are represented correctly in the Annual Governance Statement; and
  - ii. That the Committee COMMENDS the draft Annual Governance Statement to the Cabinet, subject to the additional amendment, for publication with the council's Statement of Accounts.

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

8. Strong governance arrangements support the council in the effective delivery of services, the achievement of objectives and enhances the council's ability to mitigate risk.

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

9. There are no direct financial implications. Continued improvements in governance will help to deliver value for money for residents.

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

10. The Section 151 Officer is a member of the council's Governance Panel, as well as the Statutory Responsibilities Network. She is well sighted of key risks and the governance environment and confirms that all relevant matters are considered in the Annual Governance Statement.

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

11. The Annual Governance Statement is a requirement of the Accounts and Audit Regulations 2015 and forms part of the Statement of Accounts. The Monitoring Officer is chair of the Governance Panel.

### **Equalities and Diversity**

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

### **WHAT HAPPENS NEXT:**

13. The Annual Governance Statement will be signed by the Leader of the Council and the Chief Executive and incorporated into the council's 2016/17 Statement of Accounts.

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#### **Contact Officer:**

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

#### **Consulted:**

Governance Panel, Statutory Responsibilities Network, Chief Executive, Audit and Governance Committee, Leader of the Council.

#### **Annexes:**

Annex 1 – Annual Governance Statement 2016/17.

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

- Governance Panel minutes, governance review working papers, CIPFA/SOLACE Delivering Good Governance in Local Government Framework, Code of Corporate Governance, Surrey County Council Governance Strategy.
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# **Annual Governance Statement 2016/17**

# OVERVIEW

**The 2016/17 review has provided a satisfactory level of assurance on the governance arrangements for the year**



*Our Corporate Strategy: Ensuring Surrey residents remain healthy, safe and confident about their future*



Listen



Responsibility



Trust



Respect

Surrey County Council (the council) has a responsibility for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for. We also have responsibility for ensuring there is a sound system of governance and appropriate internal controls in place. We are committed to fulfilling our responsibilities in accordance with the highest standards of good governance to support our Corporate Strategy. The council's Governance Strategy sets out our approach to good governance and is supplemented by our Code of Corporate Governance.

The annual review of governance is overseen by the Governance Panel (the panel) which comprises the Director of Legal, Democratic and Cultural Services [chair], senior representatives from Finance, HR and Organisational Development and Strategy and Performance, the Chief Internal Auditor and the Risk and Governance Manager. The panel meets four times a year and reports to the Statutory Responsibilities Network and the Audit and Governance Committee. The 2016/17 annual review of governance has provided a satisfactory level of assurance on the governance arrangements for the year.

We are pleased to present the Surrey County Council Annual Governance Statement for 2016/17, which outlines the council's governance arrangements and achievements during the year and highlights areas to continue to strengthen governance in 2017/18.

# THE GOVERNANCE ENVIRONMENT

## Purpose and outcome

Surrey County Council's Corporate Strategy provides clear direction for staff as well as a signpost for residents, businesses and partner organisations and incorporates the council's four values of Listen, Responsibility, Trust and Respect at its heart. It is underpinned by a suite of supporting documents such as the Medium Term Financial Plan and the Investment Strategy. Performance is measured through a variety of key indicators relating to wellbeing, economic prosperity and resident experience and progress is published on the external website. The Chief Executive also reports progress to full County Council twice a year.

To provide the basis for longer term sustainability, the council established a transformation programme in February 2016. A Public Value Transformation (PVT) Board comprising the Leader of the Council (Chair), the Chief Executive and the Director of Finance provided strategic oversight and challenge to ensure the transformation programme is driven by public value and contributes significantly to the council's financial sustainability. In September 2016 the PVT Board reported to Cabinet that the transformation programme had increased the level of confidence in delivery of the current year budget savings but also confirmed that the programme would not produce the level of additional savings required to ensure a sustainable budget for 2017/18 onwards.

As a result of this and the increased budgetary pressures the council faces, the Cabinet agreed in January 2017 to set up a task and finish Sustainability Review Board to include three cross party Members, the Strategic Director for Adult Social Care and Public Health, the Deputy Chief Executive and the Director of Finance. The Board focused on identifying permanent service reductions to help inform the council's longer term financial strategy and reported back to Cabinet its recommendations on 28 March 2017.

In addition, the council has continued throughout 2016/17 to try to influence strategy and raise awareness nationally of the demands on services and the challenges posed by this and the current Government funding methodology.

Boards are in place to provide oversight on the council's continuing commercial activity. A Shareholder Board monitors the activity and performance of the trading companies created and owned by the council. An Investment Advisory Board provides strategic oversight of the Investment Strategy and evaluates investment opportunities prior to presentation to Cabinet. Both these Boards are member led and are supported by relevant internal and external professional advisors.

The Statutory Responsibilities Network, chaired by the Chief Executive, continues to meet on a fortnightly basis and provides a forum for statutory officers to discuss key issues, share knowledge and offer challenge. The network provides governance oversight and ensures statutory responsibilities are managed effectively by reviewing the key risks and issues of the organisation and focussing on progress of key strategies and implementation plans.

The council's external auditors' 2015/16 report on value for money published in July 2016 concluded that 'in all significant respects, the Authority put in place proper arrangements to secure value for money through economic, efficient and effective use of its resources,' with the exception of the arrangements in place within the council's Children's Services directorate. A Children's Improvement Plan, including a member led Children's Services Improvement Board, is being delivered to address the January 2016 improvement notice issued by the Department for Education following the Ofsted inspection report published in June 2015.

# THE GOVERNANCE ENVIRONMENT

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As part of this work, Childrens' Services have adopted a 'Safer Surrey' approach that focuses on building relationships with families and puts practitioners in the role of supporting and helping rather than as directors of change. Following a monitoring visit at the end of August 2016, Ofsted confirmed that the pace of improvement has picked up as a direct result of teams embedding the Safer Surrey approach, but there is still more to do to ensure consistency in all our practice.

In October 2016, an inspection was carried out by OFSTED and the Care Quality Commission to judge the effectiveness of the Surrey area in implementing the disability and special educational needs (SEND) reforms as set out in the Children and Families Act 2014. As a result, the local authority and the area's Clinical Commissioning Groups (CCGs) were required to submit a Written Statement of Action (the Statement) because of significant areas of weakness in the local area's practice. The Statement sets out a clear vision for how the local area will address the five key weaknesses raised in the inspection and sustain improvement for children and families at scale and pace. It was developed with the contribution of partners in schools and family representatives.

Progress will be monitored monthly by the council's and CCGs leadership teams and reported to the SEND Partnership Board, SEND Scrutiny Task Group and lead Cabinet Members. The Children's Services Improvement Board will provide formal oversight of delivery of the actions in this Statement and will review progress quarterly.

In March 2017, the council underwent a Corporate Peer Challenge, run by the Local Government Association. A team of peers were assigned to use their expertise and knowledge of local government to provide feedback as critical friends. The challenges and recommendations for consideration are tailored specifically for the council and are designed to complement and add value to the council's own performance and improvement focus. A follow up visit is scheduled for March 2018.

## Leadership and behaviour

The functions of the Monitoring Officer (Director of Legal, Democratic and Cultural Services) and Section 151 Officer (Director of Finance) are specified by statute and between them they are responsible for ensuring lawfulness, fairness and financial prudence in decision-making.

The council's financial management arrangements fully comply with the Chartered Institute of Public Finance and Accountancy's Statement on the Role of the Chief Financial Officer (CIPFA, 2010). The Director of Finance meets her financial responsibilities and ensures fully effective financial management arrangements are in place. She reports directly to the Chief Executive and is a member of Chief Executive's Direct Reports, the Statutory Responsibilities

Network and sat on the Sustainability Review Board. She has regular meetings with and has direct access to the Leader and key Members, Chief Executive, Monitoring Officer, Chief Internal Auditor, External Auditor and other key Members and strategic directors. The Director of Finance and the Chief Executive have regular support meetings with the strategic directors.

In September 2016, the Leader's report to Cabinet highlighted a projected overspend for the current financial year and required a recovery action plan to be put in place to address this. Measures taken over the remaining months of the financial year by the council's leadership, monitored monthly by Cabinet, succeeded in bringing the budget back into balance. Actions included one-off measures, delays in spend, as well as genuine on-going efficiencies, Page 26  
Page 26



# THE GOVERNANCE ENVIRONMENT

In addition, Cabinet's strategic budget planning workshops, led by the Director of Finance are held with the Leadership Team on a regular basis. Finance briefings for all members have been held throughout the year to support the preparation of the budget for future years. Additional meetings have also been held, as deemed necessary, in light of the financial challenges emerging from the Local Government financial settlement and the increased pressure and demand for our services.

The roles, responsibilities and delegated functions for officers and members are set out in the Constitution of the Council. The Scheme of Delegation for members and officers is regularly reviewed and updated in consultation with services and the Cabinet, before being approved by full County Council. The Cabinet Comprises the Leader, Deputy Leader and eight additional Cabinet Members, with each Member holding the brief for a particular portfolio of services. Four Associate Cabinet Members support Cabinet portfolio holders in the most complex areas but do not have voting rights. Decisions can be taken by individual members of the Cabinet or collectively by the full Cabinet (excluding Associates).

The Staff and Member Codes of Conduct set out the expected high standards of conduct and include the 7 Standards of Public Life. The Codes of Conduct are supplemented by the Member/Officer Protocol, which provides principles and guidance for good working relations, and the Strategy Against Fraud and Corruption. The Monitoring Officer and the Member Conduct Panel, in consultation with the Independent Person, deal with allegations of breaches of the Member Code of Conduct.

The Members Code of Conduct also includes provisions for the registration and disclosure of pecuniary and other interests. In July 2016 Council agreed to widen the registration requirement of its members to include a new category of significant personal interests and to include a new requirement to declare prejudicial interests in addition to disclosable pecuniary interests and significant personal interest at meetings of the council and its committees. The register of pecuniary interests for all members can be viewed online.

## Transparency and stewardship

The council's Whistle-blowing policy encourages staff to raise concerns, such as bullying or harassment or fraud, through an anonymous, confidential and independent hotline. A range of communication channels are used to publicise the policy and the supporting arrangements.

The gifts and hospitality register is held on the internal website and provides a means for staff to register anything offered or accepted. As a result of an internal audit report in this area, a review of the policy, arrangements for recording and monitoring of gifts and hospitality was undertaken during the year. Gifts and hospitality now has its own policy, all declarations are electronic and these are reviewed regularly.

The Investment Panel, chaired by the Director of Finance, continues to ensure all proposed service capital investments have robust business cases before formal decision by Cabinet or Cabinet Member as appropriate.

The Strategic Risk Forum, chaired by the Director of Finance, brings together lead officers from across the council to review and challenge risk and ensure a consistent approach is adopted. The Leadership risk register is regularly reviewed by the Statutory Responsibilities Network, Audit and Governance Committee and Cabinet.

# THE GOVERNANCE ENVIRONMENT

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The Director of Finance also chairs the Information and Risk Governance Board and holds the role of Senior Information Risk Officer. The Board provides strategic oversight and ensures that the council has effective information and risk governance policies and management arrangements including breaches of confidentiality and information security.

The council has six member scrutiny boards which provide challenge to the Cabinet. The Council Overview Board, comprising the Board chairmen, takes a council-wide view and leads on collaborative scrutiny issues. Every County Council, Cabinet and Planning and Regulatory Committee meeting is webcast to enable people to watch meetings online.

The Audit and Governance Committee comprises six councillors who have been specifically chosen to enable robust challenge and assurance from a position of knowledge and experience. The committee provides independent assurance on the council's control environment, the adequacy of the risk and governance arrangements, financial reporting and ethical standards.

The Surrey Pension Fund Committee takes decisions on behalf of the council as the administering body for the Local Government Pension Scheme and meets four times a year. The Surrey Local Pension Board assists the Surrey Pension Fund Committee in the exercise of its functions but has no decision making powers. A Local Fire Pension Board also assists the Surrey Fire and Rescue Authority in the administration of its Firefighters' Pension Scheme. In March 2017, the council agreed to participate in a national pool of 12 Local Government Pension Schemes to be known as the Border to Coast Pensions Partnership.

The annual review of the effectiveness of the system of internal audit concluded that appropriate controls were in place during 2016/17 to ensure an effective internal audit service was provided. As part of the effectiveness review, a self assessment against the UK Public Sector Internal Auditing Standards was completed by the Chief Internal Auditor. The conclusions of the assessment are that Internal Audit substantially complies with the requirements and there are no significant areas of non conformance.

The overall opinion of the Chief Internal Auditor on the internal control environment for 2016/17 is "some improvement needed." A few specific control weaknesses were noted; generally however, controls evaluated are adequate, appropriate and effective to provide reasonable assurance that risks are being managed and objectives met. Controls over the council's key financial systems continue to be sound.

At the end of February 2017, the Chief Internal Auditor left the Council. Interim arrangements are in place to cover the responsibilities of this role and a new Chief Internal Auditor for Surrey County Council will be appointed by June 2017 as part of the Orbis Finance leadership team integration.



# THE GOVERNANCE ENVIRONMENT

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## People

As part of the recent review of pay and reward, a new behaviours framework was developed. This was designed with colleagues and Members to ensure it is representative of the kind of organisation we need to be to achieve the right outcomes for residents. These behaviours are aimed at strengthening our appraisals and performance management, help shape how we learn and develop and how we attract and recruit the right people.

In February 2017 the Officer Code of Conduct was amended to make more explicit mention of the ethical behaviours expected of staff as well as strengthening references to the council's value statement.

Approximately 700 colleagues have attended the high performance development programme since it was launched in 2014. Managers are now better equipped to challenge unacceptable behaviour, address conflict and poor performance, seek feedback on performance, be open to constructive challenge and be aware of their impact on others.

During October and November 2016 staff participated in a staff survey, the second of three annual surveys commissioned from an external organisation, which has provided evidence of how colleagues feel about working for our organisation. Positive messages have come out of the survey but also some areas that we need to work on over the next few months.

During the year, an external organisation was commissioned to carry out a review of the security at County Hall. The result is a targeted management action plan to address the concerns raised specifically at County Hall, although some security actions result in improvements across all Council properties.



# THE GOVERNANCE ENVIRONMENT

## Engagement and collaboration

The council continues to build on the strong relationships with key partners such as Surrey's Districts and Boroughs and other public bodies. Our public service transformation projects are progressing, including health and social care integration and the Transforming Justice Programme.

We continue to work with East Sussex County Council, West Sussex County Council, 23 districts and boroughs and many other partners to secure greater devolution of powers and functions from central government and are working with a range of partners to develop a Strategic Transport Authority for the South East.

Surrey County Council and East Sussex County Council's business and support services partnership, known as Orbis, continues to develop. In October 2016, Brighton & Hove City Council approved a recommendation to join the Orbis partnership. In addition, Orbis Public Law, a legal services partnership between Surrey County Council, East Sussex County Council, West Sussex County Council and Brighton & Hove City Council, launched in April 2016 and will provide a sustainable and cost effective legal service. The implementation is underway, starting with the commercial areas of law – property, contract and procurement.

We have continued to work closely with the health sector throughout 2016 in the development of three Sustainability and Transformation Plans across Surrey. These plans will play a pivotal role in shaping the future health and care priorities and landscape across Surrey.

Working with our partners, including social care, Surrey police and public health, our Multi Agency Safeguarding Hub, known as the MASH, went live in October 2016. The vision is to provide a single point of contact for safeguarding concerns relating to children, young people and adults in Surrey. A Board, consisting of leaders from the partner organisations, oversees the operation of the MASH.



# FOCUS FOR 2017/18

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**Strong governance arrangements will support the significant challenges we are facing**

In May 2017, County Council elections will be held and the new County Council will set the future political direction. The following areas of focus remain priority areas for the Council, based on existing circumstances.

The Council's Corporate Strategy 2017-22 highlights the council's strategic challenges that stem from two significant and persisting trends of population changes and the continuing reduction in real terms of the total financial resource available to deliver our functions. The trends of increasing demographic demand alongside declining funding require us to continue to focus on the sustainability of our resources. The level of savings required to produce a balanced budget in 2017/18 and beyond are significant and higher than ever before. There will be focused monitoring of the delivery of the necessary savings identified, to avoid

the depletion of levels of reserves below minimum acceptable levels.

In addition, we will continue to work to ensure Government understands the impact of current funding mechanisms on Surrey. We will be working with our Boroughs and Districts to proactively respond to any potential opportunities to be part of a pilot on changes to the business rate retention scheme.

We will continue to focus on improving Services for Children, by building on the work that is already being done by embedding the Safer Surrey approach across the whole Childrens', Schools and Families directorate, as well as with our partners. We will also continue our focus on improving our services for children and young people with special educational needs and disabilities.

Collaboration is integral to the work that is being done in Health and Social Care as we begin to implement our Sustainability and Transformation Plans. These have been worked on with our health partners and present us with a great opportunity to re-design services and provide better outcomes for residents.

As we work increasingly in partnership with others, we will increase our focus on partnership governance arrangements and ensuring appropriate measures are in place to manage complex joint procurement arrangements with suppliers.

To ensure that we effectively lead the scale of changes that we will need to make over the coming months and years with confidence and continue to provide high standards of customer care for all our residents/stakeholders, we will:

- continue to develop a strong organisational culture that supports effective leadership, with a focus on capacity and capability.
- broaden our governance arrangements relating to the engagement of residents, to ensure they have an effective mechanism for contributing to shaping services in Surrey.

Other areas of focus include:

- Delivering a comprehensive training and guidance programme to our new and returning Councillors, to equip them to scrutinise and make decisions to best represent their residents.
- Working with the Public Sector Auditor Appointments to ensure we meet our responsibilities within the new Local Audit and Accountability Act 2014 regarding appointing an external auditor.
- Forming the new pensions pooling company, building its investment structure and obtaining Financial Conduct Authority approval for its operation.

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**SURREY COUNTY COUNCIL**

**CABINET**

**DATE: 27 JUNE 2017**



**REPORT OF: MR DAVID HODGE, LEADER OF THE COUNCIL**

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

**SUBJECT: FINANCE AND BUDGET MONITORING REPORT TO  
31 MAY 2017**

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

Surrey County 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 31 May 2017 (month two).

The Section 151 Officer states in her report of February 2017 to Full Council on the 2017/18 to 2019/20 budget and Medium Term Financial Plan (MTFP) that the financial challenges facing the Council have become even more serious in the last year. During 2017/18, the Council must deliver already stretching service reduction plans of £104m, including £9m savings it has yet to identify, to balance the 2017/18 budget and move towards a sustainable budget for future years.

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 set its gross expenditure budget for the 2017/18 financial year at £1,672m. A key objective of MTFP 2017-20 is to increase the Council's overall financial resilience. As part of this, the Council's 2017/18 budget requires it to make efficiencies totalling £104m including £9m savings it has yet to identify.
2. The Council aims to smooth resource fluctuations over its three year medium term planning period. To support the 2017/18 budget, Cabinet approved use of £11.8m from the Budget Equalisation Reserve and carry forward up to £1.6m to fund continuing planned service commitments. The Council currently has £21.3m in general balances.
3. In January 2017, Cabinet approved the Council's Financial Strategy 2017-20. The Financial Strategy aims to:

- secure the stewardship of public money;
- ensure financial sustainability
- enable the transformation of the council's services and
- build partnerships to achieve better value outcomes.

### **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 its £387m capital programme in MTFP 2017-20 and £186m budget for 2017/18.

### **Budget monitoring overview**

5. The Council's 2017/18 financial year began on 1 April 2017. This budget monitoring report covers the financial position at the end of the second month of 2017/18 (31 May 2017). 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 the Council focuses effort 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 31 May 2017. The forecast is based upon year to date income and expenditure and financial year end projections using information available as at 31 May 2017.
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.

#### **SECTION 151 OFFICER COMMENTARY**

15. The Section 151 Officer confirms the financial information presented in this report is consistent with the council's general accounting ledger and forecasts have been based on reasonable assumptions, taking into account all material, financial and business issues and risks.
16. During 2017/18, the Council must deliver already stretching service reduction plans of £95m, plus it must identify a further £9m of service reductions to balance the 2017/18 budget and move towards a sustainable budget for future years.
17. The Council's reserves are already at minimum safe levels and these should be retained to mitigate the risk of non-delivery of significant savings targets.

#### **LEGAL IMPLICATIONS – MONITORING OFFICER**

18. The Local Government Finance Act requires the Council to take steps to ensure that the Council's expenditure (that is expenditure incurred already in year and anticipated to be incurred) does not exceed the resources available. Cabinet should be aware that if the Section 151 Officer, at any time, is not satisfied that appropriate strategies and controls are in place to manage expenditure within the in-year budget she must formally draw this to the attention of the Cabinet and Council and they must take immediate steps to ensure a balanced in-year budget.

#### **EQUALITIES AND DIVERSITY**

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

#### **OTHER IMPLICATIONS:**

20. The potential implications for the following Council priorities and policy areas have been considered. Where the impact is potentially significant a summary of the issues is set out in detail below.

| <b>Area assessed:</b>                                            | <b>Direct implications:</b>                           |
|------------------------------------------------------------------|-------------------------------------------------------|
| Corporate Parenting / Looked After Children                      | No significant implications arising from this report. |
| Safeguarding responsibilities for vulnerable children and adults | No significant implications arising from this report. |
| Public Health                                                    | No significant implications arising from this report. |
| Climate change                                                   | No significant implications arising from this report. |
| Carbon emissions                                                 | No significant implications arising from this report. |

|                                  |
|----------------------------------|
| <b><u>WHAT HAPPENS NEXT:</u></b> |
|----------------------------------|

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

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**Contact Officer:** Sheila Little, Director of Finance, Tel: 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.

**Sources/background papers:**

None

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**SURREY COUNTY COUNCIL****CABINET****DATE: 27 JUNE 2017****REPORT OF: MR MIKE GOODMAN, CABINET MEMBER FOR ENVIRONMENT AND TRANSPORT****MR TIM OLIVER, CABINET MEMBER FOR PROPERTY AND BUSINESS SERVICES****LEAD OFFICER: LAURA FORZANI, ASSISTANT DIRECTOR, PROCUREMENT AND COMMISSIONING****TREVOR PUGH, STRATEGIC DIRECTOR ENVIRONMENT & INFRASTRUCTURE****SUBJECT: SURREY COUNTY COUNCIL PUBLIC BUS CONTRACT RETENDERING 2017****SUMMARY OF ISSUE:**

Surrey County Council is responsible for sourcing sustainable, safe, secure and reliable local bus services as defined by the Transport Acts 1985 and 2000. These services enable residents to access employment, education, medical appointments, essential food shopping and other key services.

The report seeks to award twenty four contracts to nine operators, for the provision of Public Bus Services to commence on Saturday 2 September 2017. Of these, twenty two contracts relate to north Surrey, principally in the Elmbridge, Runnymede, Spelthorne and Woking areas, for services currently or formerly operated by Abellio. The remaining two contracts are for services in the rural area between Guildford and Cranleigh. The report provides details of the procurement process, including the results of the evaluation process, and, in conjunction with the Part 2 report demonstrates why the recommended contract award delivers best value for money.

The current contracts which expire on 1 September 2017 have been retendered and if awarded will commence on 2 September 2017.

Overall, these proposals seek to maintain the existing network of bus provision, with some improvements proposed in certain areas.

**RECOMMENDATIONS:**

It is recommended that:

1. the background information set out in this report be noted: and
2. following consideration of the results of the procurement process in Part 2 of the meeting, the award of contracts to the following nine operators be

agreed:- Hallmark Connections, Falcon Coaches, Stagecoach South, Cardinal Buses, Reptons Coaches, C E Jeatt & Son, London United Busways, Carlone Buses and Compass Travel. The contract length will be three years with the option to extend up to a maximum of eight years as permitted by the 1985 Transport Act. The total annual value of these contracts will be £2.827m of which £2.619m relates to the services in north Surrey.

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

This recommendation will enable SCC to achieve:

- A net full year saving of £0.7m compared to the previous aggregated cost of the routes
- A robust bus network delivery of essential public transport to residents of Surrey.
- Services delivered by Operators who are reputable and meet the Council's minimum level of quality.
- Funding arrangements with Operators that are sustainable
- Ensuring the Council complies with the Procurement Standing Orders (PSO), requiring Cabinet approval for those contracts that reach a specified value.

#### **DETAILS:**

##### **Business Case**

1. Whilst some bus services are provided by operators on a commercial, non-contracted basis, there are many services that are not commercially-viable, being only sustainable with funding support from a local authority. The required funding to support these services is established through a competitive tendering exercise.
2. Bus routes funded by the County Council serve communities across Surrey. Providing these routes helps residents to access employment, education and essential food shopping. They also reduce social isolation and support independent living, whilst also offering access to medical appointments and health care. The majority of the contracts within this procurement exercise form the core of the essential bus network in north Surrey, essentially in a triangular area bordered by Kingston, Staines and Woking.

##### **Background**

3. In 2016, Abellio Surrey, a major supplier of supported bus services, decided that for commercial and operational reasons, they wished to downsize their Surrey business, thereby resigning from the contracts to provide certain services, effective 31 December 2016. Having conducted a full independent evaluation of the business, it was concluded that, on balance, these resignations should be accepted. Emergency arrangements were made to secure alternative suppliers for these services, pending a procurement exercise to test the market in respect of those contracts that Abellio retained, as well as those awarded to alternative suppliers. In addition, this procurement tranche was expanded to include the routine retendering of two contracts in the Guildford/Godalming/Cranleigh area.

4. The contracts now being awarded were previously retendered on various occasions between 2012 and 2016. The current procurement is to test the market to ensure best value to the Council on twenty four bus routes for which current contracts expire on the 1 September 2017.

### **Procurement Strategy**

5. A number of options were considered when completing the Strategic Procurement Plan (SPP) outlining the best route to market, prior to starting the procurement exercise. These were: (i) conduct a full open OJEU tender, (ii) conduct a mini competition using the Public Bus Dynamic Purchasing System (DPS), (iii) do not deliver any service.
6. After a full and detailed options analysis it was decided to conduct a mini competition using the DPS as this demonstrated best value for money from the options appraisal completed.
7. A DPS is similar to an electronic framework agreement, with two exceptions, new suppliers can join at any time and it is to be run as a completely electronic process. Operators are requested to submit a tender and are evaluated against strict quality standard set by the Council's Travel & Transport Group (T&TG).
8. Successful Operators are placed on an approved supplier list attached to the DPS and will have the opportunity to quote for any future work the Council is advertising.
9. The DPS was subject to the full OJEU process which reduces the resources required to conduct the mini competition. Bus Operator feedback has also been welcoming of the DPS process. Additionally, the award process has been designed on a price only basis which would drive commercial competition within the supply base.
10. A joint Procurement and project team was set up to include representatives from the T&TG.
11. By awarding a contract to the suppliers recommended for the provision of Public Bus Services to commence on 2 September 2017, the Council will be meeting its duties and ensuring bus routes serve communities across Surrey.
12. Performance will be monitored through a series of Key Performance Indicators as detailed in the contract and reviewed at monthly operations meetings.
13. The T&TG arrange regular Continuous Improvement Meetings to promote continuous improvement in the delivery of the Services provided under the Contract.
14. The T&TG also check on insurances, operating licences, concessionary travel scheme claims, that the delivery of the service is consistent with that in the specification, the operator complies with Surrey County Councils (SCC) Code of practice, operators deliver 100% of the mileage / routes to the timetables submitted at tender, health and safety issues are addressed and that information about services is made available by the operators to the necessary agencies for access by members of the public.

15. The management responsibility for the contracts lies with the Bus Service Planning Team Manager and within the T&TG.

### **Competitive Tendering Process**

16. The Dynamic Purchasing system was established in 2015. The objective was to establish an approved supplier list of Operators who have met strict quality standards and a more efficient method of tendering.
17. In January 2017 East Sussex County Council and West Sussex County Council joined SCC on the Public Bus DPS making it more attractive to suppliers, increasing competition and using one set of contract terms and service levels across a region.
18. The DPS is open permanently and new bids can be submitted at any time.
19. There are currently twenty five Operators on the DPS.
20. The DPS was designed to evaluate Operator quality at stage 1. Therefore all subsequent mini competitions are based entirely on price evaluation. This process ensures that suppliers achieve the quality rating required to deliver the service and achieve maximum value for money.
21. Prices were submitted on a fixed basis for the duration of the contract and in line with other bus contracts. However, upon agreement by the T&TG, prices may be amended in line with RPIX at the applicable rate, to a maximum of 3%, if requested but not before 1 September 2018 and annually thereafter.
22. An invitation to tender was sent to the twenty five suppliers on the DPS who were given 32 days to complete and submit their tender.
23. Twelve Operators submitted bids for individual or bundled services with an aim to offer the most cost-effective bid.
24. Of these twelve Operators, it is recommended that nine are awarded contract(s).

### **CONSULTATION:**

25. The Procurement department have worked alongside the T&TG colleagues at all stages of the commissioning and procurement process.
26. The T&TG have strong relationships with Operators through the current contract management process. This has led to the avoidance of price increases and good communication between SCC and Operators.
27. Any changes will be outlined to the public and interested parties during the summer in advance of the new contract start.

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

28. The contract terms and conditions have been drafted by SCC Legal Services and were updated in December 2016 when East Sussex County Council and West Sussex County Council joined the DPS.

29. Default procedures are comprehensively addressed in the terms and conditions. Furthermore, both The Council and Operator can terminate the contract with 90 days written notice.
30. All operators successfully completed satisfactory financial checks prior to acceptance onto the DPS.
31. The Operators will use their own assets to perform the contract and will retain so upon contract expiry.
32. TUPE may apply with the transition of employees from incumbent firms to the new Operator and, if applicable, will do so in line with TUPE regulations.

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

33. Full details of the contract value and financial implications are set out in the Part 2 report.
34. The procurement activity has delivered a solution within budget and generated significant savings which are essential to cover additional pressures that have arisen since the MTFP was agreed and to help achieve a sustainable means of delivering savings which are currently met from one-off resources.
35. The new contract will mean a decrease in the overall cost of the contracts, as well as certain service improvements being delivered under some of the contracts.

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

36. The County Council is facing a very serious financial situation, whereby there are still substantial savings to be identified and delivered to achieve a balanced budget in the current year and a sustainable budget plan for future years.
37. The Section 151 Officer can confirm that the costs of the proposed Bus Subsidies Contracts set out in this paper are within the budget envelope for these services that has been included within the current Medium Term Financial Plan.

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

38. The procurement is in accordance with the Public Contract Regulations 2015 and the Procurement Standing Orders (PSO).
39. Under Section 63(1)(a) of the Transport Act 1985, Local Transport Authorities must secure the provision of such public passenger transport services as the Council consider it appropriate to secure to meet any public transport requirements within the County which would not in their view be met apart from any action taken by them for that purpose.

#### **Equalities and Diversity**

40. The procurement process was undertaken through a transparent tender procedure. The contract document stipulates that the supplier will comply with the relevant Equality and Diversity legislation.

|                           |
|---------------------------|
| <b>WHAT HAPPENS NEXT:</b> |
|---------------------------|

41. The timetable for implementation is as follows:

| Action                                                 | Date                  |
|--------------------------------------------------------|-----------------------|
| Cabinet decision to award (including 'call in' period) | 27 June – 6 July 2017 |
| Contract Signature                                     | 7 July 2017           |
| Contract Commencement Date                             | 2 September 2017      |

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**Contact Officer:**

Prue Timms, Procurement Specialist, Tel: 020 8541 8774

**Consulted:**

Shona Snow – Category and Commercial Manager – Tel: 020 8213 2743

Paul Millin – Travel and Transport Group Manager – Tel: 020 8541 9365

Laura Forzani – Assistant Director, Procurement – Tel: 020 8541 8597

**Annexes:**

None.

**Sources/background papers:**

None

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**SURREY COUNTY COUNCIL**

**CABINET**

**DATE: 27 JUNE 2017**



**REPORT OF: MR TIM OLIVER, CABINET MEMBER FOR PROPERTY AND BUSINESS SERVICES**

**LEAD**

**OFFICER: MR JOHN STEBBINGS, CHIEF PROPERTY OFFICER**

**SUBJECT: APPROVAL TO APPOINT BUILDING CONTRACTORS TO ORBIS CONSTRUCTION FRAMEWORK AGREEMENT**

**SUMMARY OF ISSUE:**

Following a competitive tender exercise Procurement and Property Services seek Cabinet approval to appoint selected building contractors to the Orbis Construction Framework.

The new Orbis Construction Framework will supplement a number of procurement arrangements which are available to SCC to deliver capital construction projects.

The objectives of the Framework put an emphasis on the delivery of Social Value benefits in the local community such as creation of employment, training and apprenticeships opportunities for residents and sub-contracting opportunities for local contractors.

In order to reduce timescales for awarding construction contracts Cabinet approval is sought to delegate authority to award contracts over £500,000.

**RECOMMENDATIONS:**

It is recommended that:

1. The Cabinet approves the appointment of selected building contractors to the Orbis Construction Framework.
2. In order to reduce timescales for awarding contracts under the Orbis Construction Framework the Cabinet delegates authority to award contracts above £500,000 in value, where a mini-competition tender procedure has been followed, to the Chief Property Officer in consultation with the Leader of the Council, Cabinet Portfolio Holder, Assistant Director of Procurement and Section 151 Officer.

**REASON FOR RECOMMENDATIONS:**

Property Services are responsible for delivery of SCC capital construction projects which are estimated to be £200m over the next 4 years.

In order to deliver these projects Property and Procurement Services developed a Delivery Model for Major Capital Projects which involves the use of a suite of complementary procurement arrangements. The Delivery Model includes existing

regional frameworks and other frameworks for construction works and services which are used by the Council. Where local markets exist for construction contracts the Delivery Model allows for tendering local building contractors in accordance with the Council's Procurement Standing Orders.

The use of a combination of complementary procurement arrangements will ensure best value is obtained particularly in terms of quality of service and reduced contract award timescales.

Sussex Cluster Construction Framework which formed part of the Delivery Model expired on 28 February 2017. Sussex Cluster Construction Framework will be replaced with a new Orbis Construction Framework which will supplement the Delivery Model with a flexible procurement arrangement.

Procurement and Property Services undertook a restricted tender procedure to select a group of building contractors with demonstrable experience and capacity to deliver construction projects between £1,000,000 and £10,000,000 in value. The tender for the new Orbis Construction Framework is at a stage where Cabinet approval is required in order to conclude the tender procedure and appoint successful building contractors to the Framework.

This new Orbis Construction Framework will enable rapid contractor deployment via mini-competition route. In order to reduce timescales for awarding contracts above £500,000 in value Cabinet is requested to delegate authority to award contracts to Chief Property Officer in consultation with the Leader of the Council, Cabinet Portfolio Holder, Assistant Director of Procurement and Section 151 Officer.

This proposed schedule of delegation is the same as the previous schedule which was approved by Cabinet on 31 January 2017 for Assets & Infrastructure contracts over £500,000 in value.

Cabinet will exercise control over commitment of expenditure via a forward plan tracker, member updates and by the continuing need for Cabinet approval for the Business Case of projects before they are formally tendered.

#### **DETAILS:**

##### **Business Case**

1. SCC's Construction Capital Programme is anticipated to be £200m over the next 4 years. Schools Basic Needs projects form significant part of the Capital Programme as it is estimated that SCC will have to provide 11,000 primary and secondary school places over the next five years to meet growing demand.
2. Property and Procurement Services have been developing the strategy for the procurement arrangements for the management and delivery of construction projects and programmes across the two Founding Partners East Sussex County Council and Surrey County Council.
3. The resulting Orbis Delivery Model for Major Projects consists of the range of complementary procurement arrangements. The Delivery Model is scalable to incorporate wider requirements of future Partner and Client Organisations who choose to adopt Orbis as their preferred partner of choice.
4. The Delivery Model for Capital Projects includes existing regional construction frameworks and other frameworks for construction works and services which are currently used by SCC, namely:

- The Southern Construction Framework

- The Southern Modular Buildings Framework
  - The South East Consortium Framework
5. The Sussex Cluster Construction Framework formed part of the Delivery Model until it expired on 28 February 2017. In order to replace this Framework, Property and Procurement Services carried out a restricted tender procedure in accordance with the Public Contracts Regulations 2015 in order to set up a new construction framework.
  6. During the tender procedure the building contractors were scrutinised to demonstrate robust experience, capacity as well as competitiveness in delivering construction projects. The tender has been led by Surrey County Council for and on behalf of Orbis Partners and future Clients. The Evaluating Panel which comprised of colleagues from Property and Procurement Services across Orbis has completed assessing tender responses and recommends that Cabinet approves the appointment of the building contractors which are listed in the confidential Part 2 of this Cabinet Report.
  7. In accordance with Orbis Partnership's priorities the Orbis Construction Framework will be delivered by a range of contractors including SMEs. The Framework is split into 2 value banded Lots:-
    - Lot 1 for works between £3m and £10m
    - Lot 2 for works between £1m and £3m

There is no guaranteed minimum level of spend or volume of work under the Framework.
  8. The new Orbis Framework will supplement the Delivery Model (see paragraph 4 above) with a flexible procurement arrangement which will enable rapid building contractor deployment via a mini-competition route.
  9. The method of selection of a contractor from the Framework will be a mini-competition. The Contracting Authority may invite all Framework Providers in each Lot to tender in a mini-competition. Alternatively, the Contracting Authority may choose to use a short listing process to limit the number of Providers who would be invited to a mini-competition in order to reduce the cost to suppliers and the Council of abortive tendering.
  10. In order to enable rapid contractor deployment and to reduce timescales for awarding contracts under the Orbis Construction Framework, an approval is sought from Cabinet to delegate its authority to award contracts above £500,000 in value, where a mini-competition tender procedure has been followed, to the Chief Property Officer in consultation with the Leader of the Council, Cabinet Portfolio Holder, Assistant Director of Procurement and Section 151 Officer.
  11. This proposed delegation is the same as that approved by Cabinet on 31 January 2017 for Assets & Infrastructure contracts over £500,000 in value.
  12. Cabinet will exercise control over commitment of expenditure via a forward plan tracker, member updates and by the continuing need for Cabinet approval for the Business Case of projects before they are formally tendered.
  13. There is an upper limit of £10m on the value of individual contract which can be awarded under this Framework.

14. Concurrently to the tender for Orbis Construction Framework, East Sussex County Council has been leading on the procurement of Orbis Professional and Technical Services Framework on behalf of Orbis Partners and future Clients. Once the tender for Professional and Technical Services Framework Agreement is concluded the Professional and Technical Services Framework will become part of the Delivery Model for Major Capital Projects for Orbis and it will be available to for use by SCC to deliver its capital construction projects.
15. These Frameworks and local arrangements which form the Delivery Model will ensure that the most appropriate route to market is available for projects of different types in order to deliver construction as required and an effective assets and infrastructure programme over the next four years.

#### **CONSULTATION:**

16. No formal consultation was required. However, various members of Procurement and Property Services across Surrey and East Sussex County Councils have been involved in the procurement of the framework, feeding in their expert knowledge around the design of the specification and evaluating tenders and agreeing contract award. Legal Services were also consulted to ensure that what was being proposed was legally compliant. Financial Services were consulted to determine minimum acceptable level of tenderers' financial stability.

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

17. This framework agreement is not a commitment by SCC to purchase any works or services. Commitment to purchase will only be made by SCC when it issues into a legally binding contract under the terms of the framework agreement.
18. SCC does not guarantee the value or volume of instructions it may place with any of the contractor under this framework.
19. Should the service requirements change the new Orbis Construction Framework Agreement can be terminated by SCC giving 3 months' notice.
20. All framework contractors have successfully completed satisfactory financial checks as well as checks on competency in delivery of similar contracts at the pre-qualification stage in order to be awarded a place on a framework. Framework Management Team will be carrying out financial and insurance checks regularly in order to ensure that the Framework Contractors meet the minimum criteria during the life of the Framework.

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

21. Of the total estimated spend of £200m on capital construction projects over the next 4 years, between £20m and £40m per annum will be spent via this Framework. The balance of the contracts will be procured using other frameworks or local arrangements (see paragraph 4 above).
22. The use of a combination of complementary procurement arrangements will ensure best value is obtained particularly in terms of quality of service and reduced contract award timescales.
23. Control will be exercised over commitment of expenditure via a forward plan tracker, member updates and by the continuing need for Cabinet approval for the Business Case of projects before they are formally tendered. In this way, should financial issues arise a project can be stopped at an early stage. In addition, the Leader and Cabinet Portfolio Holder can choose not to approve

the award of a contract under this proposed delegated authority should financial circumstances change between Business Case approval and contract award stage.

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

24. The Section 151 Officer notes the delegation of authority and that any award of contract will be on the basis of prior approval by Cabinet or Cabinet Member of the business case to proceed with each project. Further control and oversight is provided by the requirement for the Section 151 Officer to be consulted prior to the award of contract.

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

25. The procurement process was carried out in accordance with the Public Contracts Regulations 2015.
26. Tenders were evaluated using selection criteria that identified the most economically advantageous tenders and best value.

#### **Equalities and Diversity**

27. All works done will be compliant with the Equalities Act 2010.
28. Framework Providers appointed to construction contracts will be required to deliver a minimum of 5% of the call off contract sum as Social Value, as calculated by reference to the Social Value Charter. This will result in employment, training and apprenticeships opportunities for residents.
29. Where appropriate for individual projects an Equalities Impact Assessment will be carried out with information included in the Contract Award report when presented for delegated authority approval.

#### **Other Implications:**

30. The potential implications for the following council priorities and policy areas have been considered. Where the impact is potentially significant a summary of the issues is set out in detail below.

| Area assessed:                                                   | Direct Implications:                                  |
|------------------------------------------------------------------|-------------------------------------------------------|
| Corporate Parenting/Looked After Children                        | No significant implications arising from this report. |
| Safeguarding responsibilities for vulnerable children and adults | No significant implications arising from this report. |
| Public Health                                                    | No significant implications arising from this report. |
| Climate change                                                   | No significant implications arising from this report. |
| Carbon emissions                                                 | Set out below.                                        |

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

- 11
31. The design philosophy used for assets and infrastructure projects is to create new build elements that will support low energy buildings to meet or exceed the requirements of Building Regulations in terms of thermal insulation and energy consumption and this will be achieved by a high performance thermal envelope which will reduce the overall heating demand with minimal heating provided to compensate for fabric losses only.

## **WHAT HAPPENS NEXT:**

32. The proposed delegated authority will be used to award contracts for School Basic Needs and other major Assets and Infrastructure projects totalling approximately £200m over the next 4 years. Exercise of the delegated authority will facilitate timely and speedy delivery of these projects over the next four years.

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### **Contact Officer:**

Artur Krzyzanski (Strategic Procurement Manager – Procurement Services)  
Tel: 020 8541 8080

### **Consulted:**

Consultation has been undertaken with senior representatives of Property, Legal and Procurement Services.

### **Annexes:**

Annex 1 – Tender evaluation summary

**SURREY COUNTY COUNCIL****CABINET****DATE: 27 JUNE 2017****REPORT OF: N/A****LEAD OFFICER: ANN CHARLTON, DIRECTOR OF LEGAL, DEMOCRATIC AND CULTURAL SERVICES****SUBJECT: LEADER/DEPUTY LEADER/CABINET MEMBER DECISIONS/  
INVESTMENT BOARD DECISIONS TAKEN SINCE THE LAST  
CABINET MEETING****SUMMARY OF ISSUE:**

To note the delegated decisions taken since the last meeting of the Cabinet.

**RECOMMENDATIONS:**

It is recommended that the Cabinet note the decisions taken by Cabinet Members / Investment Board since the last meeting as set out in Annex 1.

**REASON FOR RECOMMENDATIONS:**

To inform the Cabinet of decisions taken by Cabinet Members / Investment Board 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. The Leader has also delegated authority to the Investment Board to approve property investment acquisitions, property investment management expenditure, property investment disposals and the provision of finance to its wholly owned property company, Halsey Garton Property Ltd.
3. Delegated decisions are scheduled to be taken on a monthly basis and will be reported to the next available Cabinet meeting for information.
4. **Annex 1** lists the details of decisions taken by Cabinet Members / Investment Board 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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**CABINET MEMBER DECISIONS**

**June 2017**

**LEADER OF THE COUNCIL**

**(I) PROPOSED AMALGAMATION OF STARHURST AND CHART WOOD SCHOOLS**

**Details of decision**

The Leader of the Council:

1. approved the closure of Starhurst School as part of the proposed amalgamation with Chartwood School (formerly St Nicholas) such that there will be one school for pupils with social, emotional and mental health needs (SEMH) in the south east area of the County from 1 September 2017;
2. noted that the amalgamation of Starhurst and Chartwood schools will take place in two phases with the children currently at Starhurst School being moved to the Chartwood School site in Merstham following which the amalgamated school will be relocated to a new, permanent site in Dorking upon completion of the new building which would then reduce the number of residential places at the school to 24.
3. noted the financial information related to the proposed amalgamation of Chartwood and Starhurst schools as outlined in the Part 2 report.

**Reasons for decision**

The proposal will streamline SEMH provision in the south east of Surrey. It will allow for the more effective use of the available Special Educational Needs and Disabilities (SEND) resources. The aim is to develop outstanding provision with a larger and more sustainable single special school for SEMH in the east quadrant of Surrey based on one site in Dorking. Critically, it will release the site of Chartwood in Merstham to allow for delivery of a new mainstream secondary free school.

The Leader is asked to take a decision prior to 6 June 2017 otherwise, in accordance with statutory processes, the decision will pass to the Schools adjudicator to make.

*(Decision taken by the Leader of the Council – 5 June 2017)*

**CABINET MEMBER FOR HEALTH**

**(II) MEMBERS' QUESTIONS**

**Details of decision:**

A Member question was received from Mrs Barbara Thomson and the response is attached as Appendix 1.

*(Decision taken by the Cabinet Member for Health – 13 June 2017)*

### **(III) PETITIONS**

#### **Details of decision:**

That the response, attached as Appendix 2, be approved.

#### **Reasons for decision:**

To respond to the petition.

*(Decision taken by the Cabinet Member for Health – 13 June 2017)*

### **CABINET MEMBER FOR PROPERTY AND BUSINESS SERVICES**

### **(IV) AWARD OF FRAMEWORK AGREEMENT FOR THE PROVISION OF OFFICE STATIONERY**

#### **Details of decision:**

The Cabinet Member for Property and Business Services:

- I. approved the award of a framework agreement (which sets out the terms and conditions under which specific purchases known as “call-offs” can be made on behalf of the Council during the term of the framework agreement) to Banner Group Limited for four years from 1 September 2017 in accordance with information on the contract tendering process as set out in the Part 2 report;
- II. noted that the duration of each call off agreement will be two years with the option to extend for a further two years one year at a time; and
- III. noted that over the full term of the framework, the anticipated value is £900,000 (approximately £225,000 per annum).

#### **Reasons for decision:**

Surrey County Council (SCC) currently has separate contracts for office stationery and printer consumables (that fall outside the scope of the Multi-Function Device contract), both of which expire on 31 August 2017. The Council conducted an Official Journal of the European Union (OJEU) tender process, in compliance with the requirements of the Public Contracts Regulations 2015 and the Council's Procurement Standing Orders. A thorough evaluation process has identified awarding the framework to Banner Group Limited will provide the Council with the best value for money.

*(Decision taken by the Cabinet Member for Property and Business Services – 13 June 2017)*

## **CABINET MEMBER FOR EDUCATION**

### **(V) PETITIONS**

#### **Details of decision**

That the response, attached as Appendix 3, be approved.

#### **Reasons for decision**

To respond to the petition.

*(Decision taken by the Cabinet Member for Education – 13 June 2017)*

### **(VI) SELECTION OF PREFERRED PROPOSER FOR THE HORLEY NORTH WEST FREE SCHOOL**

#### **Details of decision:**

The Cabinet Member for Education reviewed the background to the project and summary of Internal Assessment Panel scoring process provided within the report and associated annexes and, on that basis, decided on Aurora Academies Trust as the preferred proposer to open and operate the new 2FE Primary Free School in North West Horley from September 2020 and to submit this preference to the Secretary of State for Education for their consideration.

#### **Reasons for decision:**

There is an increasing demand for primary school places in the Horley area, which reflects a rise in the primary-age population over recent years. This demand will be augmented by the Westvale Park development in North West Horley which is due to deliver over 1,500 new homes across the period 2016/17 to 2026/27. The proposal to create a new 2FE Primary Free School in Westvale Park represents SCC's strategy to deliver additional places in this area and thereby meet rising demand. Accordingly, SCC has undertaken the requisite competition process to seek proposers for the new Free School and six formal bids were received as part of this. Of these bids, the Internal Assessment Panel scored the submission of Aurora Academies Trust the highest, on the grounds that the '8 Pillars' educational model and vision, together with the 'Paragon' curriculum were particularly well suited to adding an exciting new dimension to the educational offer in the local area (thereby promoting parental choice).

For these reasons, it is recommended that the Cabinet Member approves the selection of Aurora Academies Trust as the preferred proposer in respect of the Horley North West Primary Free School, for onward communication to the Regional Schools Commissioner.

*(Decision taken by the Cabinet Member for Education – 13 June 2017)*

## **(VII) PROPOSED EXPANSION OF OAKWOOD SCHOOL**

### **Details of decision**

The Cabinet Member for Education agreed to determine the Statutory Notice, thereby bringing into effect the formal expansion of Oakwood School by one Form of Entry (1 FE) for September 2018 and a further 1FE for September 2019 onwards.

### **Reasons for decision**

There is an increasing demand for primary school places in the Horley area which reflects a rise in the primary-age population over recent years that is beginning to transition into the secondary sector. In order to meet this demand, Surrey County Council (SCC) is overseeing an ongoing school expansion programme designed to increase the capacity of the school estate. The proposal to expand the capacity of Oakwood School by 1FE represents SCC's strategy to deliver additional places in this area. In line with this, SCC has undertaken the requisite statutory consultation to inform the decision making process, to which there were 90 responses. For these reasons, it was recommended that the Cabinet Member determine the Statutory Notice so as to bring the expansion of the school formally into effect.

*(Decision taken by the Cabinet Member for Education – 13 June 2017)*

## **CABINET MEMBER FOR HIGHWAYS**

### **(VIII) PETITIONS**

#### **Details of decision**

That the response, attached to this decision sheet as Appendix 4, be approved.

#### **Reasons for decision**

To respond to the petition.

*(Decision taken by the Cabinet Member for Highways – 13 June 2017)*

**Member Questions****Question (1) from Mrs Barbara Thomson:**

"Is the Cabinet Holder for Health aware of the impending closure of South Park Doctors Surgery and is there any more action that we can take as a Council?"

There are currently 4,600 patients registered at this Surgery some of whom are very frail, elderly and disabled who will have to travel by public transport to other surgeries to obtain health support, advice and treatment. The threat of this closure is very unsettling for the residents.

I understand that the root cause of the proposed closure relates to unaffordable proposed increases in the rent for use of the land and buildings. Is there any action that the Council can take to Compulsory Purchase the building on the basis of the community need for this facility?"

**Response:**

The Cabinet Member for Health is aware of the forthcoming closure of South Park Surgery, near Reigate, and has explored whether there is any action the Council can take. The Cabinet Member for Health recognises that the situation may be unsettling for residents, however, there is no action the Council can take which will enable a surgery to be retained in the South Park area.

NHS England are the commissioners of local general practice services and they have been working with colleagues in NHS East Surrey Clinical Commissioning Group (CCG), local councils and with communities to explore various options following the healthcare provider, Malling Health (which is now part of the IMH Group), giving notice on their contract to provide services at South Park Surgery in 2015. NHS England initially secured an agreement with Malling Health to continue to provide GP services at South Park Surgery for a further year, until the end of March 2017, while work took place to find a long term solution to ensure ongoing care for the surgery's patients. This agreement with Malling Health was then extended by a further six months until the end of September 2017, to ensure alternative arrangements for patient care could be put in place in a safe and managed way. This arrangement cannot be legally extended any further and NHS England has had to ensure arrangements are in place for the ongoing care of all South Park Surgery patients that will ensure their continued care after the end of September.

NHS England have explored whether it would be possible to retain a GP surgery in the immediate South Park area and have ultimately exhausted this possibility. This included approaching other local GP practices to see if they would be interested in opening a branch surgery in the South Park area, in addition to their existing services.

The barriers do not relate to unaffordable proposed increases in the rent for use of the land and buildings but include issues about the viability and sustainability of the surgery for health

care providers due to the relatively small practice size. GP practices, particularly smaller ones like South Park Surgery, face an increasing number of challenges including: managing the health needs of an ageing population; an increasing number of patients with complex care needs and difficulties recruiting GPs and other practice staff to care for patients. In the past, viability and sustainability issues have led to frequent changes in healthcare providers at the practice which results in prolonged uncertainty for patients.

NHS England have engaged with local GP practices and found that some of them are interested in growing their patient lists in order to develop and strengthen their services. Therefore, ahead of the closure of South Park Surgery at the end of September 2017, patients will be supported to register at other local practices to ensure their continued care. NHS England will be sending out letters to all registered patients shortly to provide clear information to patients about which other local GP practices they could register with. Re-investing funding from South Park Surgery into existing local family GP practices could help strengthen other existing local GP practices making them better placed to provide a wider range of care and services in the future and ensuring that patients have ongoing access to care, given the lack of other feasible options to achieve this.

**Mrs Helyn Clack**  
**Cabinet Member for Health**  
**Surrey County Council**

**CABINET MEMBER FOR HEALTH**

Tuesday 13 June 2017

**RESPONSE TO THE PETITION CONCERNING THE DECISION TO HAVE ONLY THREE SEXUAL HEALTH HUBS IN SURREY, AT REDHILL, WOKING AND GUILDFORD****The Petition**

Review the decision to have only 3 sexual health hubs in Redhill Woking Guildford. For the revised service & close sexual health/ community contraception clinics including Epsom, Leatherhead, Cobham, Walton etc leaving the north of the county with inadequate provision. To note the views of those currently providing the service that the plans are flawed and make the services difficult for young girls/women to access. To provide information about outreach via GPs pharmacies and school nursing. For the Cabinet Member for Wellbeing to make a public statement with her rationale for the proposals and whether she believes they are consistent with joining up health & social care more effectively.

Sexual health or genitourinary medicine (GUM) clinics offer a range of services, including: testing and treatment for sexually transmitted infections (STIs) advice and information about sexual health. Free condoms. Contraception – including emergency contraception, such as the morning after pill. <http://www.dorkingandleatherheadadvertiser.co.uk/question-marks-raised-over-future-of-sexual-health-clinic-set-for-a-change-of-provider/story-30173292-detail/story.html> We know that for each pound cut in Sexual health, they will have to spend £84 more (Unprotected Nation document.) They are planning a £6 million ‘saving’ over the next 3 years. The increased costs are too massive to contemplate! A staggering £504 million over 3 years, in increased benefits, social housing, social workers, creche places, school places, increased costs in terminations and maternity cases-25% of unplanned pregnancies result in a delivery, increased HIV transmission, increased cancer cases, increased infertility investigation and treatment etc.

By J P Moyer

Signatures: 137

**Response**

Continued cuts to funding, rising costs and increasing demand for key services means that the need for Surrey County Council to find savings has reached unprecedented levels. This year alone we need to make savings of around £150m – that’s about 10% of our overall budget.

We are determined to meet our responsibilities and will continue to support our residents as effectively as we can, but despite having achieved £450m worth of savings since 2010, changes to services are still needed.

One of those services is sexual health. Sexual health sits within public health. In Surrey we receive below target funding per head of population. In addition to this there have been national cuts to the public health grant, meaning that by 2019 there will have been a significant decrease in funding for public health services in Surrey.

The financial envelope available for the sexual health procurement reflected this but still allows for a quality service that is in-line with national requirements and responsive to local needs as identified in the sexual health needs assessment.

Surrey County Council jointly re-procured sexual health services for Surrey with NHS England (who are the lead commissioner for HIV services). The service specification reflected local engagement work which was undertaken throughout the early part of 2016 to tailor this to meet local needs. This included a well-attended Concept Day, a "Surrey Says" survey and a Market Engagement Event.

Central and North West London NHS Foundation Trust (CNWL) began delivering sexual health services in Surrey in April 2017 having been awarded the contract in October 2016.

CNWL are providing three main HUB services in Surrey. These are located in Woking, Guildford and Redhill. In addition to this CNWL are operating clinical outreach spokes in Leatherhead and Epsom and are planning for clinical outreach spokes in Spelthorne and Runnymede.

This work will be complimented by extended clinical outreach working with at risk and vulnerable groups including young people, Black African populations, men who have sex with men, and sex workers.

It is important to note that the phased transfer of services from Frimley on 30th June 2017 and from ASPH on 30th September 2017 means that the transformed services will not be operational as the new integrated service fully until January 2018. A summary of services is included in annex 1.

From January 2018 residents will be able to register online, book appointments and collect test results. Residents will also be able to request testing kits online.

Public health also commission long acting reversible contraception from general practice and emergency hormonal contraception from pharmacy.

Facilitated by public health, CNWL will be working in partnership with CCGs, school nurses, services for young people, education and boroughs and districts to ensure that sexual health messages are accurate and consistent across the county.

**Mrs Helyn Clack**  
**Cabinet Member for Health**  
**13 June 2017**



**During 2017 CNWL will be delivering:**

- **Services from three Clinical Hubs**
  - Buryfields (Guildford) - Level 3 GUM and Contraception
  - Earnsdale (Redhill) - Level 2+ (description in annex 2)
  - Woking Contraception – Level 2+
- **Spoke Clinical Outreach services**
  - Leatherhead Hospital – Mondays and Fridays, 10:00 am to 12:30 am (improving access for young mothers and the wider community) – started 28<sup>th</sup> April 2017
  - Epsom Clinic – Mondays and Wednesdays 3:30 pm to 6:00 pm (improving access for young people) – starting on June 12<sup>th</sup> 2017
  - Based on public health need Runnymede and Spelthorne spoke clinical outreach services are in development. Due to open in July 2017

**Fully Operational Service Model in 2018**

- Patients able to register online, book appointments and collect test results – there will be new Mobile App
- Extended clinical outreach working with at risk and vulnerable groups including young people, Black African populations, men who have sex with men, and sex workers
- Full availability of home screening kits, online, in Hubs, General Practice (pilot)
- More Dual Trained staff (GUM/Contraception) so where possible care be provided in one appointment
  - Buryfields open every Saturday from 10:00 am to 4:00 pm
  - Young People Saturday clinics – running on alternate weeks from Woking and Earnsdale from 10:00 am to 2:00 pm
- Improved support for General Practice and Pharmacies

Should you wish to contact CNWL directly their contact details are:

- Phone: CNWL on 01483 783 340 (staffed Monday to Friday, 9am to 5pm)
- Email: [sexualhealth.cnwl@nhs.net](mailto:sexualhealth.cnwl@nhs.net)

For more information and updates please visit our 'Heathy Surrey' website

[www.healthysurrey.org.uk/your-health/sexual-health](http://www.healthysurrey.org.uk/your-health/sexual-health) or

visit CNWL's website [www.sexualhealth.cnwl.nhs.uk](http://www.sexualhealth.cnwl.nhs.uk)

## CNWL Level **2+** spokes

- Nurse delivered
- Access to medical advice from level 3 service who can view patient record and prescribe/record advice in EPR remotely
- Fully auditable and good governance
- All laboratory tests available
- On site medications availability for STIs and contraception same as level 3



Wellbeing for life

## CNWL Level **2+** services for Women

- Screening and treatment of all STIs in:
  - Asymptomatic women
  - Women with vaginal discharge and lower abdominal pain
- Emergency contraception
- Non-LARC
- LARC including IUC
- Onward referral to Guildford for conditions requiring face to face assessment via more senior clinician
  - Complex contraception incl. access to pelvic US
  - Post sexual assault
  - Recurrent or recalcitrant conditions e.g. resistant candida or persistent vaginal discharge
  - Complex dermatological presentations



Wellbeing for life

## CNWL Level **2+** services for Men

- Onward referral for conditions requiring face to face assessment via more senior clinician
  - STIs with complications e.g. proctitis
  - PEP (Post Exposure Prophylaxis)
  - Complex dermatological conditions



*Wellbeing for life*

**CABINET MEMBER FOR EDUCATION**

Tuesday 13 June 2017

**RESPONSE TO THE PETITION TO GUARANTEE THAT SUMMER BORN CHILDREN HAVE ACCESS TO RECEPTION AT COMPULSORY SCHOOL AGE (CSAGE) AND TO ENSURE THAT THEY REMAIN WITH THE SAME COHORT THROUGHOUT THEIR EDUCATION IN SCHOOLS WHERE SURREYCC IS THE ADMISSION AUTHORITY****The Petition**

Guarantee summer born children access to reception at compulsory school age (CSAge). And ensure that they remain with the same cohort throughout their education in schools where SurreyCC is the admission authority

Children born 1Apr–31Aug are not required to start school until the September following their 5th birthday (Compulsory School Age or CSAge). If parents wish for them to start in reception at CSAge, rather than year1, they must ask the admissions authority. Legally, the decision about \*when\* a child starts full time education is solely down to the parents. The School Admissions Code states that the admissions authority must then decide \*which year group\* is in the child's best interests to join - reception or year1. If placed in year1, the child will miss a whole year of \*essential/critical\* education, which is not in their best interests, and defies the government's position on school attendance. Unlike other LAs, SurreyCC does not adopt a flexible approach to these requests. Parents are routinely advised that, without exceptional circumstances, their child will be placed directly into year1 or miss a year later on if reception entry is agreed. We urge SurreyCC to allow summer born children to start at CSAge in reception and continue their education with that cohort, if this is their parents' wish.

By Elena van der Graaf

Signatures: 575

**Response**

The guidance issued by the Department for Education on the admission of summer born children ([www.gov.uk/government/publications/summer-born-children-school-admission](http://www.gov.uk/government/publications/summer-born-children-school-admission)) makes clear that whilst there is no statutory barrier to children being admitted outside their normal age group, 'parents do not have the right to insist that their child is admitted to a particular age group'. In addition, the guidance makes clear that once a decision is made it is only binding on that school and at the point of transition the parent must make a fresh application to the admission authority of any new school they are considering.

The School Admissions Code sets out that it is for admission authorities to make the decision on out of year group requests. The local authority is the admission authority for community and voluntary controlled schools and either the governing body or academy trust is the admission authority for academies, foundation, trust and voluntary aided schools. Each admission authority has a statutory duty to consider requests for summer born children

to be admitted to reception a year later and, in order to comply with the Code and guidance, must take in to account the circumstances of the case, what is in the child's best interests and the views of the head teacher, as well as bearing in mind the age group the child has been educated in up to that point.

Whilst there is not currently any policy to automatically agree requests for summer born children to start Reception a year late, Surrey operates flexibly and the majority of requests are agreed. In 2016 Surrey agreed 27 out of 35 requests for decelerated entry to reception for community and voluntary controlled schools. In addition, according to the data held by Surrey, own admission authority schools agreed 31 out of 45 requests.

The admission of summer born children has been debated within the House of Commons and it is clear that Ministers have been reviewing whether the parents of summer born children should be allowed to decide that their child will start Reception in the term after they turn five, rather than leave the decision to the admission authority of the school. However in an adjournment debate in the House of Commons on 10 October 2016, Nick Gibb, the Minister for Schools, made clear that it was important that the Government considered the wider impact of any policy changes; that it would not be right for every summer-born child to delay starting school until they were five, as many would be ready to take on the challenges earlier; that parents did not use the flexibilities as a mechanism by which to gain an unfair advantage in the admissions system; and that there were not unintended consequences for the early years sector. He went on to indicate that early indications showed the costs of full implementation were high and that more information and data needed to be collected.

As such, until the Government has completed its review and issued a revised School Admissions Code, Surrey, as admission authority for community and voluntary controlled schools, will continue to work within the current requirements of the Code. This includes considering each request flexibly according to the circumstances of the case, considering what is in the child's best interests and seeking the view of the Headteacher of the school concerned.

At this current time, Surrey is therefore unable to agree to the petitioners request to 'guarantee summer born children access to reception at compulsory school age' or 'ensure that they remain with the same cohort throughout their education in schools where SurreyCC is the admission authority'.

**Mrs Mary Lewis**  
**Cabinet Member for Education**  
**13 June 2017**

**Cabinet Member for Highways**

15 June 2017

**RESPONSE TO PETITION REQUESTING THAT SURREY COUNTY COUNCIL ABOLISH PLANS TO SWITCH OFF STREET LIGHTING OVERNIGHT****Petition:**

We the undersigned petition Surrey County Council to Abolish plans to switch of street lighting overnight.

Submitted by: Stewart Meaton

Signatures: 1,246

**Response:**

Among many initiatives, the Council identified the opportunity to save electricity and thereby benefit from both the financial and carbon savings by switching off some street lights for some of the night.

Many Highway Authorities are now already using part night lighting in some roads or are in the process of implementing it. Surrey County Council officers researched current practices by other authorities to determine its approach.

In October 2016, the Council's Cabinet approved the implementation of part night lighting which was on the basis of risk assessments for each road. It was and is recognised that this could have an impact on residents in respect of road safety and crime and so the risk assessment was designed to take this into account.

For example, part night lighting was limited to non-traffic routes and delayed until midnight with lights staying off until 0500. By limiting part night lighting to non-traffic routes and switching lights off when the number of people using the county's roads are significantly fewer than at other times of the day, the above risks are mitigated as much as possible.

On roads where it was proposed to implement part night lighting, road by road risk assessments were carried out and if any of the Avoidance Criteria\* were present those roads were excluded. All roads that "passed" the risk assessment were then considered by the Council's Road Safety Team and Surrey Police to evaluate any concerns where part night lighting might have an adverse effect on either road safety or crime and if this was the case the roads were excluded.

Finally, any roads in close proximity to a railway station or bus stop which operates after midnight or before 0500 (but were otherwise suitable for part night lighting) had the start and or finish time for part night lighting adjusted to accommodate the first and last buses and trains.

The Council has also implemented a decision review process which allows residents to challenge the decision either to exclude or include a road in part night lighting. It should be noted that having carried out the above risk assessments, decisions will normally only be reversed where something has been missed or new information has been provided which impacts the risk assessment.

Whilst there are residents who do not support this programme, there are many in favour of it for differing reasons. As part of the Cabinet paper, 842 people responded to the consultation with over 75% in favour of switching off some lights. Whilst this number of responses is a small proportion of the population of Surrey, it is reflective of the anecdotal feedback in the media, including social media, both prior to and since implementation.

**\*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.

**Mr Colin Kemp  
Cabinet Member for Highways  
Surrey County Council**

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