

Public Document Pack

Cabinet

Tuesday, 17th April, 2018
at 4.30 pm

PLEASE NOTE TIME OF MEETING

Council Chamber - Civic Centre

This meeting is open to the public

Members

Leader - Councillor Simon Letts
Children's Social Care - Councillor John Jordan
Communities, Culture and Leisure- Councillor Satvir Kaur
Education and Skills - Councillor Darren Paffey
Environment and Transport - Councillor Jacqui Rayment
Finance - Councillor Mark Chaloner
Health and Community Safety - Councillor Dave Shields
Housing and Adult Care - Councillor Warwick Payne
Sustainable Living - Councillor Chris Hammond

(QUORUM – 3)

Contacts

Cabinet Administrator

Pat Wood

Tel. 023 8083 2302

Email: pat.wood@southampton.gov.uk

Service Director, Legal and Governance

Richard Ivory

Tel: 023 8083 2794

Email: richard.ivory@southampton.gov.uk

BACKGROUND AND RELEVANT INFORMATION

The Role of the Executive

The Cabinet and individual Cabinet Members make executive decisions relating to services provided by the Council, except for those matters which are reserved for decision by the full Council and planning and licensing matters which are dealt with by specialist regulatory panels.

The Forward Plan

The Forward Plan is published on a monthly basis and provides details of all the key executive decisions to be made in the four month period following its publication. The Forward Plan is available on request or on the Southampton City Council website, www.southampton.gov.uk

Implementation of Decisions

Any Executive Decision may be “called-in” as part of the Council’s Overview and Scrutiny function for review and scrutiny. The relevant Overview and Scrutiny Panel may ask the Executive to reconsider a decision, but does not have the power to change the decision themselves.

Mobile Telephones – Please switch your mobile telephones to silent whilst in the meeting.

Use of Social Media

The Council supports the video or audio recording of meetings open to the public, for either live or subsequent broadcast. However, if, in the Chair’s opinion, a person filming or recording a meeting or taking photographs is interrupting proceedings or causing a disturbance, under the Council’s Standing Orders the person can be ordered to stop their activity, or to leave the meeting.

By entering the meeting room you are consenting to being recorded and to the use of those images and recordings for broadcasting and or/training purposes. The meeting may be recorded by the press or members of the public. Any person or organisation filming, recording or broadcasting any meeting of the Council is responsible for any claims or other liability resulting from them doing so. Details of the Council’s Guidance on the recording of meetings is available on the Council’s website.

The Southampton City Council Strategy (2016-2020) is a key document and sets out the four key outcomes that make up our vision.

- Southampton has strong and sustainable economic growth
- Children and young people get a good start in life

Executive Functions

The specific functions for which the Cabinet and individual Cabinet Members are responsible are contained in Part 3 of the Council’s Constitution. Copies of the Constitution are available on request or from the City Council website, www.southampton.gov.uk

Key Decisions

A Key Decision is an Executive Decision that is likely to have a significant:

- financial impact (£500,000 or more)
- impact on two or more wards
- impact on an identifiable community

Procedure / Public Representations

At the discretion of the Chair, members of the public may address the meeting on any report included on the agenda in which they have a relevant interest. Any member of the public wishing to address the meeting should advise the Democratic Support Officer (DSO) whose contact details are on the front sheet of the agenda.

Fire Procedure – In the event of a fire or other emergency, a continuous alarm will sound and you will be advised, by officers of the Council, of what action to take.

Smoking policy – The Council operates a no-smoking policy in all civic buildings.

Access – Access is available for disabled people. Please contact the Cabinet Administrator who will help to make any necessary arrangements.

Municipal Year Dates (Tuesdays)

| 2017 | 2018 |
|--------------|--------------------------------|
| 20 June | 16 January |
| 18 July | 13 February (Budget) |
| 15 August | 20 February |
| 19 September | 20 March |
| 17 October | 17 April |
| 14 November | |
| 19 December | |

- People in Southampton live safe, healthy, independent lives
- Southampton is an attractive modern City, where people are proud to live and work

CONDUCT OF MEETING

TERMS OF REFERENCE

The terms of reference of the Cabinet, and its Executive Members, are set out in Part 3 of the Council's Constitution.

RULES OF PROCEDURE

The meeting is governed by the Executive Procedure Rules as set out in Part 4 of the Council's Constitution.

DISCLOSURE OF INTERESTS

Members are required to disclose, in accordance with the Members' Code of Conduct, **both** the existence **and** nature of any "Disclosable Pecuniary Interest" or "Other Interest" they may have in relation to matters for consideration on this Agenda.

DISCLOSABLE PECUNIARY INTERESTS

A Member must regard himself or herself as having a Disclosable Pecuniary Interest in any matter that they or their spouse, partner, a person they are living with as husband or wife, or a person with whom they are living as if they were a civil partner in relation to:

(i) Any employment, office, trade, profession or vocation carried on for profit or gain.

(ii) Sponsorship:

Any payment or provision of any other financial benefit (other than from Southampton City Council) made or provided within the relevant period in respect of any expense incurred by you in carrying out duties as a member, or towards your election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.

(iii) Any contract which is made between you / your spouse etc (or a body in which the you / your spouse etc has a beneficial interest) and Southampton City Council under which goods or services are to be provided or works are to be executed, and which has not been fully discharged.

(iv) Any beneficial interest in land which is within the area of Southampton.

(v) Any license (held alone or jointly with others) to occupy land in the area of Southampton for a month or longer.

(vi) Any tenancy where (to your knowledge) the landlord is Southampton City Council and the tenant is a body in which you / your spouse etc has a beneficial interests.

(vii) Any beneficial interest in securities of a body where that body (to your knowledge) has a place of business or land in the area of Southampton, and either:

- a) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body, or
- b) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you / your spouse etc has a beneficial interest that exceeds one hundredth of the total issued share capital of that class.

Other Interests

A Member must regard himself or herself as having an, 'Other Interest' in any membership of, or occupation of a position of general control or management in:

Any body to which they have been appointed or nominated by Southampton City Council

Any public authority or body exercising functions of a public nature

Any body directed to charitable purposes

Any body whose principal purpose includes the influence of public opinion or policy

Principles of Decision Making

All decisions of the Council will be made in accordance with the following principles:-

- proportionality (i.e. the action must be proportionate to the desired outcome);
- due consultation and the taking of professional advice from officers;
- respect for human rights;
- a presumption in favour of openness, accountability and transparency;
- setting out what options have been considered;
- setting out reasons for the decision; and
- clarity of aims and desired outcomes.

BUSINESS TO BE DISCUSSED

Only those items listed on the attached agenda may be considered at this meeting.

QUORUM

The minimum number of appointed Members required to be in attendance to hold the meeting is 3.

In exercising discretion, the decision maker must:

- understand the law that regulates the decision making power and gives effect to it. The decision-maker must direct itself properly in law;
- take into account all relevant matters (those matters which the law requires the authority as a matter of legal obligation to take into account);
- leave out of account irrelevant considerations;
- act for a proper purpose, exercising its powers for the public good;
- not reach a decision which no authority acting reasonably could reach, (also known as the “rationality” or “taking leave of your senses” principle);
- comply with the rule that local government finance is to be conducted on an annual basis. Save to the extent authorised by Parliament, ‘live now, pay later’ and forward funding are unlawful; and
- act with procedural propriety in accordance with the rules of fairness.

AGENDA

1 APOLOGIES

To receive any apologies.

2 DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS

In accordance with the Localism Act 2011, and the Council's Code of Conduct, Members to disclose any personal or pecuniary interests in any matter included on the agenda for this meeting.

EXECUTIVE BUSINESS

3 STATEMENT FROM THE LEADER

4 RECORD OF THE PREVIOUS DECISION MAKING (Pages 1 - 4)

Record of the decision making held on 20 March 2018.

5 MATTERS REFERRED BY THE COUNCIL OR BY THE OVERVIEW AND SCRUTINY MANAGEMENT COMMITTEE FOR RECONSIDERATION (Pages 5 - 76)

Call-In of Executive Decision CAB 17/18 20348 - Development of an offer for children with disabilities

Report of the Chair of the Overview and Scrutiny Management Committee seeking a response to recommendations made by the Committee at the meeting held on 12 April 2018 regarding decision number CAB 17/18 20348 - Development of an offer for children with disabilities.

6 REPORTS FROM OVERVIEW AND SCRUTINY COMMITTEES (Pages 77 - 118)

Scrutiny Inquiry Panel – Reducing Drug Related Litter in Southampton

Report of the Chair of the Scrutiny Inquiry Panel requesting that the Executive receive the final report of the Panel to enable the Executive to formulate its response to the recommendations.

7 EXECUTIVE APPOINTMENTS

To deal with any executive appointments, as required.

ITEMS FOR DECISION BY CABINET

8 CLEAN BUS TECHNOLOGY FUND □ (Pages 119 - 142)

Report of the Cabinet Member for Environment and Transport seeking approval for the funding granted from the Department for Transport.

9 COMMUNITY ASSET TRANSFER - PROGRESS AND REVIEW □ (Pages 143 - 168)

Report of the Cabinet Member for Communities, Culture and Leisure outlining progress on implementing the Community Asset Transfer Programme including a recommendation to approve a community asset transfer policy.

10 KENTISH ROAD FORMER RESPITE CARE CENTRE □ (Pages 169 - 180)

Report of the Cabinet Member for Housing and Adult Care seeking agreement to the principle of disposal of the site to a local community or voluntary organisation for the purpose of supporting vulnerable adults.

11 RENEWAL OF GLASS PROCESSING CONTRACT FOR SOUTHAMPTON CITY COUNCIL AND ALL AUTHORITIES IN HAMPSHIRE □ (Pages 181 - 184)

Report of the Cabinet Member for Environment and Transport seeking to accept the outcome of the procurement process for a new glass processing contract. This contract will be for all authorities in Hampshire.

Monday, 9 April 2018

Service Director, Legal and Governance

SOUTHAMPTON CITY COUNCIL
EXECUTIVE DECISION MAKING

RECORD OF THE DECISION MAKING HELD ON 20 MARCH 2018

Present:

| | | |
|----------------------|---|---|
| Councillor Letts | - | Leader of the Council |
| Councillor Chaloner | - | Cabinet Member for Finance |
| Councillor Jordan | - | Cabinet Member for Children's Social Care |
| Councillor Kaur | - | Cabinet Member for Communities, Culture and Leisure |
| Councillor Rayment | - | Cabinet Member for Environment and Transport |
| Councillor Shields | - | Cabinet Member for Health and Community Safety |
| Councillor Payne | - | Cabinet Member for Housing and Adult Care |
| Councillor Hammond | - | Cabinet Member for Sustainable Living |
| Councillor Dr Paffey | - | Cabinet Member for Education and Skills |

51. SOLENT RECREATION MITIGATION STRATEGY

DECISION MADE: (CAB 17/18 20262)

On consideration of the report of the Leader, Cabinet agreed the following:

- (i) To approve the adoption of the definitive Solent Recreation Mitigation Strategy, as shown in Appendix 1 to the report, so that new residential development is required to mitigate against the harm caused, by either the submission of their own site specific schemes of work or a payment of £337-880 depending on the number of bedrooms in a property.
- (ii) To use the Solent Recreation Mitigation Strategy in determining planning applications from 1 April 2018.

52. DEVELOPMENT OF AN OFFER FOR CHILDREN WITH DISABILITIES

DECISION MADE: (CAB 17/18 20348)

On consideration of the report of the Cabinet Member for Children's Social Care, Cabinet agreed the following:

- (i) To consider the responses to the consultation exercise on revisions to eligibility criteria and service offer for the short breaks service.
- (ii) To authorise the procurement of services and activities to support the proposed new Short Break offer.
- (iii) To approve the use of the grant process and criteria to award funding for services and activities to support the new Short Break offer.
- (iv) To delegate authority to the Director of Quality & Integration to carry out a procurement process for the provision of services as set out in this report to support the short break offer and, following consultation with the Service Director:

Legal & Governance to enter into contracts in accordance with the Contract Procedure Rules.

- (v) To delegate authority to the Director of Quality & Integration following consultation with the Cabinet Member for Children's Social Care to decide on the final model of commissioned services to support the short breaks offer and all decision making in relation to this recommissioning.
- (vi) To authorise the Director of Quality and Integration to take all necessary actions to implement the proposals contained in this report.
- (vii) To note the response from the formal consultation to retain the names of the Jigsaw service and the Buzz Network.

53. CONCESSIONARY FARES SCHEME 2018/19

DECISION MADE: (CAB 17/18 20365)

On consideration of the report of the Cabinet Member for Environment and Transport, Cabinet agreed the following:

- (i) To agree to reimburse bus operators in line with the Department for Transport Concessionary Fares Guidance and the methodology as detailed in appendix 1. This will use the Reimbursement Calculator published by the Department for Transport to determine the reimbursement rate for each operator.
- (ii) To agree the local enhancements above the statutory minimum, which is to allow concessionary travel from 0900 rather than 0930 and between 2300 and 0030 for Southampton residents.

54. YOUTH JUSTICE STRATEGY 2017-20 UPDATE

DECISION MADE: (CAB 17/18 20260)

On consideration of the report of the Cabinet Member for Health and Community Safety, Cabinet agreed to recommend to Council the updated Youth Justice Strategy.

55. SAFE CITY STRATEGY 2017-2020 UPDATE

DECISION MADE: (CAB 17/18 20255)

On consideration of the report of the Cabinet Member for Health and Community Safety, Cabinet agreed to recommend to Council the updated Safe City Strategy 2017-20.

56. APPROVAL TO PROCURE A WATER CONTRACT FOR CITY COUNCIL BUILDINGS AND SERVICES

DECISION MADE: (CAB 17/18 20367)

On consideration of the report of the Cabinet Member for Sustainable Living, Cabinet agreed the following:

- (i) To approve the joint procurement of water through the Crown Commercial Services (CCS) Framework for Water, Wastewater and Ancillary Services, the mini tender to be managed by Yorkshire Purchasing Organisation (YPO), to appoint a single water retailer to meet LEP member authorities' business requirements. YPO is a Central Procurement Body (CPB), publicly owned by 13 local authorities.
- (ii) To delegate authority to the Associate Director, Capital Assets, to enter into a Memorandum of Understanding with YPO to manage the mini-competition to procure a water retailer through the CCS Water, Wastewater and Ancillary Services Framework.
- (iii) To endorse the awarding of a new water retail contract by YPO on the most economically advantageous terms Assessed on the basis of quality (55%) and price (45%) for a period of two years with the option to extend for a further two years and that any extension should enable the impact of water price review to be taken into account.
- (iv) To authorise the Associate Director, Capital Assets on Consultation with the Service Director, Legal & Governance, to finalise any specific terms of the contract with the preferred bidder, award and enter into the call off contract under the framework agreement, and do all things necessary to facilitate the execution, implementation and operation of the contract, including any extension agreement to comply with the Authority's agreed procurement and management strategy.
- (v) To endorse the use of the London Energy Project Team to manage supplier performance and service development to deliver services in line with London Energy Project authorities' collective business requirements post award to maximise benefits.

57. CHANGES TO EXISTING REVENUE AND CAPITAL BUDGETS

DECISION MADE: (CAB 17/18 20576)

On consideration of the report of the Cabinet Member for Finance, Cabinet agreed the following:

- (i) Approve the addition of £0.41M to the Education & Children's Social Care programme and approval to spend £0.41M as detailed in paragraph 4.
- (ii) Approve the addition of £0.04M to the Environment and Transport - City Services programme and approval to spend £0.04M as detailed in paragraph 6.
- (iii) Note the addition of £3.00M to the Housing & Adult Social Care programme for which approval will be sought as part of the capital outturn report which will be presented to Council in July 2018, as detailed in paragraph 7.

58. THE PROPOSED DISPOSAL OF FOUR SITES TO ACCELERATE THE PROVISION OF AFFORDABLE HOMES IN THE CITY

DECISION MADE: (CAB 17/18 20363)

On consideration of the report of the Leader, Cabinet agreed the following:

- (i) To approve the disposals of the following sites

- former Brownhill House Care Home
- former Lordshill Housing Office
- former Lordshill Community Centre
- former Oaklands Community School

On a leasehold or freehold basis at less than Best Consideration where appropriate and that the disposals will contribute to the promotion or improvement of the economic, social and environmental wellbeing of the area.

- (ii) To delegate authority to the Associate Director – Capital Assets following consultation with the Leader of the Council, the Service Director Finance and Commercialisation and the Service Director Legal and Governance to agree detailed terms and conditions and to take any other actions required to give effect to this decision.

Agenda Item 5

| | | | |
|---|---|--|----------------------------------|
| DECISION-MAKER: | CABINET | | |
| SUBJECT: | CALL-IN OF EXECUTIVE DECISION CAB 17/18 20348 – DEVELOPMENT OF AN OFFER FOR CHILDREN WITH DISABILITIES | | |
| DATE OF DECISION: | 17 APRIL 2018 | | |
| REPORT OF: | CHAIR OF THE OVERVIEW AND SCRUTINY MANAGEMENT COMMITTEE | | |
| <u>CONTACT DETAILS</u> | | | |
| AUTHOR: | Name: | Mark Pirnie | Tel: 023 8083 3886 |
| | E-mail: | Mark.pirnie@southampton.gov.uk | |
| STATEMENT OF CONFIDENTIALITY | | | |
| None | | | |
| BRIEF SUMMARY | | | |
| <p>The Overview and Scrutiny Management Committee (OSMC) have called in the decision made at the Cabinet meeting on 20 March 2018 relating to the development of an offer for children with disabilities.</p> <p>The Call-in is scheduled to be heard at a meeting of the OSMC on 12 April 2018 and any recommendations by the OSMC will be circulated to Cabinet at the conclusion of the meeting.</p> <p>At its meeting on 17 April 2018 Cabinet is requested to respond to any recommendations by the OSMC, following its consideration of the matter.</p> | | | |
| RECOMMENDATIONS: | | | |
| | (i) | That Cabinet considers its response to the recommendations made by the Overview and Scrutiny Management Committee at its meeting on 12 April 2018. | |
| REASONS FOR REPORT RECOMMENDATIONS | | | |
| 1. | To comply with the Call-in procedure rules set out in Part 4 of the Council's Constitution. | | |
| ALTERNATIVE OPTIONS CONSIDERED AND REJECTED | | | |
| 2. | None. | | |
| DETAIL (Including consultation carried out) | | | |
| 3. | <p>A Call-In notice signed by the Chair of the OSMC has been received in accordance with Paragraph 12 of the Overview and Scrutiny Procedure Rules set out in Part 4 of the Council's Constitution. The Call-In notice relates to the following decision made by Cabinet on 20 March 2018:</p> <ul style="list-style-type: none"> • Development of an offer for children with disabilities | | |
| 4. | The Call-in notice, attached as Appendix 1, cites the reasons given for the Call-In. | | |

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|---|--|
| 5. | The OSMC are to discuss the Call-in report at its meeting on 12 April 2018. Any recommendations agreed by the OSMC will be circulated for consideration at the 17 April 2018 meeting of Cabinet. |
| 6. | Cabinet is requested to consider any recommendations arising from the consideration of the Call-in by the OSMC. |
| RESOURCE IMPLICATIONS | |
| <u>Capital/Revenue</u> | |
| 7. | As detailed in the Cabinet report dated 20 March 2018 appended to this report. |
| <u>Property/Other</u> | |
| 8. | As detailed in the Cabinet report dated 20 March 2018 appended to this report. |
| LEGAL IMPLICATIONS | |
| <u>Statutory power to undertake proposals in the report:</u> | |
| 9. | As detailed in the Cabinet report dated 20 March 2018 appended to this report. |
| 10. | The Local Government Act 2000. |
| <u>Other Legal Implications:</u> | |
| 11. | As detailed in the Cabinet report dated 20 March 2018 appended to this report. |
| RISK MANAGEMENT IMPLICATIONS | |
| 12. | As detailed in the Cabinet report dated 20 March 2018 appended to this report. |
| POLICY FRAMEWORK IMPLICATIONS | |
| 13. | As detailed in the Cabinet report dated 20 March 2018 appended to this report. |
| KEY DECISION | Yes |
| WARDS/COMMUNITIES AFFECTED: | All |
| <u>SUPPORTING DOCUMENTATION</u> | |
| Appendices | |
| 1. | Call In Notice |
| 2. | Decision Notice - Development of an offer for children with disabilities |
| 3. | Decision Report - Development of an offer for children with disabilities |
| 4. | Appendix 1 to Decision Report - Development of an offer for children with disabilities |
| 5. | Appendix 2 to Decision Report – Development of an offer for children with disabilities |

| | | |
|--|--|--------------------------|
| 6. | Appendix 3 to Decision Report – Development of an offer for children with disabilities | |
| 7. | Equality and Safety Impact Assessment | |
| Documents In Members’ Rooms | | |
| 1. | None | |
| Equality Impact Assessment | | |
| Do the implications/subject of the report require an Equality and Safety Impact Assessments (ESIA) to be carried out? | | Identified in Appendix 3 |
| Data Protection Impact Assessment | | |
| Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out? | | Identified in Appendix 3 |
| Other Background Documents - Equality Impact Assessment and Other Background documents available for inspection at: | | |
| Title of Background Paper(s) | Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable) | |
| 1. | None | |

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NOTICE OF CALL-IN

In accordance with rule 12 of the Overview & Scrutiny procedure rules of the Council's Constitution, a request is hereby made that the Scrutiny Manager exercise the call-in of the decision identified below for consideration by Overview and Scrutiny Management Committee.

| |
|----------------------------------|
| Decision Number: CAB 17/18 20348 |
| Decision Taker: Cabinet |
| Date of Decision: 20 March 2018 |

Reason(s) for Requisition of Call-In of Decision:

- To explore in further detail the risks and implications of the proposed new eligibility criteria on children and young people with disabilities in Southampton.

Call-In Requested by:

| Name | Signature | Date |
|----------------------|-----------|------------|
| Councillor Fitzhenry | | 26/03/2018 |

All Members requesting that a Decision be Called-In must sign this Call-In Notice. A decision may be called in by:

- The Chair of Overview and Scrutiny Management Committee
- Any 2 Members of Overview and Scrutiny Management Committee
- In respect of a Decision relating to Education, any 2 Parent Governor or Church Representatives

Please submit to the Scrutiny Manager within 5 clear days of the publication of the relevant decision.

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RECORD OF EXECUTIVE DECISION

Tuesday, 20 March 2018

Decision No: (CAB 17/18 20348)

| | |
|-----------------|--|
| DECISION-MAKER: | CABINET |
| PORTFOLIO AREA: | CHILDREN'S SOCIAL CARE |
| SUBJECT: | DEVELOPMENT OF AN OFFER FOR CHILDREN WITH DISABILITIES |
| AUTHOR: | Sandra Jerrim |

THE DECISION

- (i) To consider the responses to the consultation exercise on revisions to eligibility criteria and service offer for the short breaks service.
- (ii) To authorise the procurement of services and activities to support the proposed new Short Break offer.
- (iii) To approve the use of the grant process and criteria to award funding for services and activities to support the new Short Break offer.
- (iv) To delegate authority to the Director of Quality & Integration to carry out a procurement process for the provision of services as set out in this report to support the short break offer and, following consultation with the Service Director: Legal & Governance to enter into contracts in accordance with the Contract Procedure Rules.
- (v) To delegate authority to the Director of Quality & Integration following consultation with the Cabinet Member for Children's Social Care to decide on the final model of commissioned services to support the short breaks offer and all decision making in relation to this recommissioning.
- (vi) To authorise the Director of Quality and Integration to take all necessary actions to implement the proposals contained in this report.
- (vii) To note the response from the formal consultation to retain the names of the Jigsaw service and the Buzz Network.

REASONS FOR THE DECISION

1. To improve outcomes for children and young people with disabilities by offering services based on need as the current eligibility criteria and short break offer are unfair, inequitable and not financially sustainable.
2. To use the best available approaches (procurement and grants) to secure sustainable yet flexible services against clear and simple eligibility criteria.

DETAILS OF ANY ALTERNATIVE OPTIONS

1. 'Do nothing' is not a viable option. To do nothing would maintain an inequitable and unfair system while also placing unacceptable financial pressures on the current budgets.
2. There are approximately 6,785 children and young people with disabilities in the city. Maintaining the current unfair and inequitable eligibility criteria for the Buzz Network could see the existing demand continue to increase and rise significantly above the existing 1,250 service users already accessing services (including personal budgets). This was considered but rejected as it does not ensure resources are allocated to ensure an appropriate level of support is provided according to the impact of the child or young person's disability on their own and their family's lives and it is financially untenable.
3. In addition, if the current eligibility criteria were maintained it would not enable Children's Social Care to fulfil its functions under Part 3 of the Children and Families Act 2014, the Care Act 2014 and the Children Act 1989 (S17) by providing children and young people with disabilities with a social care assessment and access to services according to need.
4. The option to recommission services consistent with the current arrangements (One to one, residential and playschemes) was considered and rejected as a number of concerns and challenges were raised by parents, commissioners and providers. These would not be addressed if this option was pursued. Their concerns and challenges included:
 - One to one services struggling to meet demand and not always being able to provide the same staff member on a consistent basis to support the child or young person,
 - The benefits of using a 'framework' approach were not realised as only one provider joined the 'framework' to provide overnight residential placements and
 - Playschemes were limited to specialist playschemes which some parents felt were unsuitable for their children.

OTHER RELEVANT MATTERS CONCERNING THE DECISION

None

CONFLICTS OF INTEREST

None

CONFIRMED AS A TRUE RECORD

We certify that the decision this document records was made in accordance with the Local Authorities (Executive Arrangements) (Access to Information) (England) Regulations 2000 and is a true and accurate record of that decision.

Date: 20 March 2018

Decision Maker:
The Cabinet

Proper Officer:
Pat Wood

SCRUTINY

Note: This decision will come in to force at the expiry of 5 working days from the date of publication subject to any review under the Council's Scrutiny "Call-In" provisions.

Call-In Period expires on

Date of Call-in *(if applicable) (this suspends implementation)*

Call-in Procedure completed *(if applicable)*

Call-in heard by *(if applicable)*

Results of Call-in *(if applicable)*

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|-------------------------------|---|--|---|
| DECISION-MAKER: | CABINET | | |
| | COUNCIL | | |
| SUBJECT: | DEVELOPMENT OF AN OFFER FOR CHILDREN WITH DISABILITIES | | |
| DATE OF DECISION: | 20 MARCH 2018 21 MARCH 2018 | | |
| REPORT OF: | CABINET MEMBER FOR CHILDREN’S SOCIAL CARE | | |
| <u>CONTACT DETAILS</u> | | | |
| AUTHOR: | Name: | Sandra Jerrim | Tel: 023 8029 6039 |
| | E-mail: | Sandra.Jerrim@southampton.gov.uk | |
| Directors | Name: | Stephanie Ramsey and Hilary Brooks | Tel: 023 8029 6941 023 8083 4899 |
| | E-mail: | Stephanie.Ramsey@Southampton.gov.uk Hilary.Brooks@southampton.gov.uk | |

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|--|
| STATEMENT OF CONFIDENTIALITY |
| None |
| BRIEF SUMMARY |
| <p>Short Breaks provide children and young people with disabilities or additional needs an opportunity to spend time away from their parents, engage in fun activities and enjoy time with their friends. They also offer parents and carers a break from their caring responsibilities, time to spend with other family members and to catch up on other daily tasks. One of the council’s priority outcomes is for all children and young people to have a good start in life and the council recognises the importance of Short Breaks for children and young people with disabilities or additional needs in improving their outcomes. Therefore the council is committed to maintaining the current level of funding of £1,455,000 per year for the next 5 years to achieve better outcomes, based on needs.</p> <p>This report recommends a different approach to the eligibility criteria and the Short Breaks offer as the current approach does not provide effective support based on need, has eligibility criteria that are unfair and inequitable and does not meet the legal requirements of delivering social care assessments and access to services based on need.</p> <p>The proposals are to introduce new eligibility criteria based on 4 levels, applying a needs based approach, introduce a new Short Breaks offer linked to the 4 levels and procure services for a 5 year period so that services can be delivered over the medium term with a degree of security.</p> <p>Extensive consultation has been conducted over a 12 week period and the responses show that there is considerable support for the council’s approach:</p> <ul style="list-style-type: none"> • 76% agreed the need to make changes to the Short Breaks service offer and 69% agreed with the proposed short break service offer • 72% agreed there is a need to make a change to the eligibility criteria and 74% agreed to the proposed eligibility criteria |

- 73% felt there would be a significant (34%) or moderate (39%) impact as a result of the changes.

The aim is for the overall impact to be neutral or positive for the majority of children and young people with disabilities. Of the 6,785 children and young people with disabilities, around 5,000 will receive greater advice and sign posting to disability friendly services at the low levels of need. A further 1,030 children and young people are estimated to receive an enhanced service. However, it is estimated that around 10% (approximately 650 children and young people) could receive a reduced service. Specific actions will be taken to mitigate the situation for them and to address concerns expressed about the proposals. These will include interim arrangements, a phased implementation plan to co-design some services with children, young people and parents and to allow time for those affected to prepare for the loss of personal budgets. The aim of the transition period is to minimise the impact for individual children, young people and their families.

RECOMMENDATIONS:

CABINET

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| | (i) | To consider the responses to the consultation exercise on revisions to eligibility criteria and service offer for the short breaks service. |
| | (ii) | To authorise the procurement of services and activities to support the proposed new Short Break offer. |
| | (iii) | To approve the use of the grant process and criteria to award funding for services and activities to support the new Short Break offer. |
| | (iv) | To delegate authority to the Director of Quality & Integration to carry out a procurement process for the provision of services as set out in this report to support the short break offer and, following consultation with the Service Director: Legal & Governance to enter into contracts in accordance with the Contract Procedure Rules. |
| | (v) | To delegate authority to the Director of Quality & Integration following consultation with the Cabinet Member for Children's Social Care to decide on the final model of commissioned services to support the short breaks offer and all decision making in relation to this recommissioning. |
| | (vi) | To authorise the Director of Quality and Integration to take all necessary actions to implement the proposals contained in this report. |
| | (vii) | To note the response from the formal consultation to retain the names of the Jigsaw service and the Buzz Network. |

COUNCIL

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| | (i) | To approve a financial envelope of up to £7,275,000 for a maximum period of 5 years (3 + 2 year extension when applied to contracts), maintaining the current level of annual investment in Short Breaks. |
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REASONS FOR REPORT RECOMMENDATIONS

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| 1. | To improve outcomes for children and young people with disabilities by offering services based on need as the current eligibility criteria and short break offer are unfair, inequitable and not financially sustainable. |
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| 2. | To use the best available approaches (procurement and grants) to secure sustainable yet flexible services against clear and simple eligibility criteria. |
| ALTERNATIVE OPTION S CONSIDERED AND REJECTED | |
| 3. | 'Do nothing' is not a viable option. To do nothing would maintain an inequitable and unfair system while also placing unacceptable financial pressures on the current budgets. |
| 4. | There are approximately 6,785 children and young people with disabilities in the city. Maintaining the current unfair and inequitable eligibility criteria for the Buzz Network could see the existing demand continue to increase and rise significantly above the existing 1,250 service users already accessing services (including personal budgets). This was considered but rejected as it does not ensure resources are allocated to ensure an appropriate level of support is provided according to the impact of the child or young person's disability on their own and their family's lives and it is financially untenable. |
| 5. | In addition, if the current eligibility criteria were maintained it would not enable Children's Social Care to fulfil its functions under Part 3 of the Children and Families Act 2014, the Care Act 2014 and the Children Act 1989 (S17) by providing children and young people with disabilities with a social care assessment and access to services according to need. |
| 6. | <p>The option to recommission services consistent with the current arrangements (One to one, residential and playschemes) was considered and rejected as a number of concerns and challenges were raised by parents, commissioners and providers. These would not be addressed if this option was pursued. Their concerns and challenges included:</p> <ul style="list-style-type: none"> • One to one services struggling to meet demand and not always being able to provide the same staff member on a consistent basis to support the child or young person, • The benefits of using a 'framework' approach were not realised as only one provider joined the 'framework' to provide overnight residential placements and • Playschemes were limited to specialist playschemes which some parents felt were unsuitable for their children. |
| DETAIL (Including consultation carried out) | |
| | Background |
| 7. | Short Breaks provide children and young people with disabilities or additional needs an opportunity to spend time away from their parents and carers, engage in fun activities and enjoy time with their friends. They offer parents and carers a break from their caring responsibilities, time to spend with other family members and to catch up on other daily tasks. |
| 8. | <p>Short Breaks are currently provided at two different levels:</p> <ul style="list-style-type: none"> • for children who have been assessed by social care and determined to have a need for Short Breaks – this level of short breaks is commonly referred to as "assessed Short Breaks" or "Jigsaw (Children with Disabilities Team) Short Breaks" • for children who have not been assessed but have access to a "universal" offer of Short Breaks for disabled children - this level of Short Breaks is commonly referred to as "Non-assessed Short |

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| | Breaks" or "The Buzz Network Short Breaks". |
| 9. | <p>A review of the current Short Break offer resulted in a proposal to make changes to the Short Break offer and the eligibility criteria to address the following issues:</p> <ul style="list-style-type: none"> • The current approach is providing a high level of support to some families, but restricted or no support for many other children, young people and their families with similar levels of need. • The number of families choosing a personal budget has increased significantly in the last couple of years which means that more and more of the Short Breaks budget is being used with no additional funding for any new members to the network. • Those families who receive an assessed specialist short break package through the Jigsaw team also have access to Buzz Network short breaks, thereby accessing services through two routes. • The current eligibility criteria would not support changes in the areas identified. • The eligibility criteria for access to Children’s Social Care services for children and young people with disabilities in Southampton is unclear. Some children and young people with disabilities who are supported by Early Help or Safeguarding teams do not have the same access to assessed Short Break services as those with moderate to severe learning disabilities who meet the criteria for the Jigsaw team. • Recognition that the names of the Jigsaw service and the Buzz Network may make it confusing for parents. |
| | Consultation and engagement |
| 10 | <p>A formal 12 week consultation was carried out between 21st November 2017 and 12th February 2018. The consultation included two ‘You Said, We Heard’ sessions, enabling early feedback and discussion around the responses from the first 8 weeks of the consultation. The consultation covered four areas:</p> <ul style="list-style-type: none"> • New eligibility criteria • A new Short Break service offer • The name of the Jigsaw (integrated health and social care team for children with disabilities) service • The name of the service for non-assessed short breaks (The Buzz Network). |
| 11 | <p>People were able to engage with the consultation using online forms, hard copies which were available at a number of outlets and 8 events held across a range of venues including provider venues, two schools and centrally at the civic centre. Times were varied and included 2 evening events.</p> |
| 12 | <p>The Parent/Carer Forum, as the council’s formal mechanism for engaging with parents and carers, was used as one of the main routes of promoting the consultation. Information about the consultation was also sent to all SENCOs (Special Educational Needs Coordinating Officers), to all 75 schools in Southampton, to the voluntary sector through local SEND charities e.g. Mencap and Rose Road, and to all special schools who have featured in newsletters or printed and shared with families. Details of the consultation were also sent to all current members of the Buzz Network (which included all JIGSAW families). Social media has also been used to promote the</p> |

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| | consultation and events including a Facebook Live with the Parent/Carer Forum coordinator and the SEND Service manager. |
| | Summary of proposal and criteria |
| 13 | The proposals put forward new eligibility criteria with four levels: low, medium, substantial and critical. |
| 14 | <p><u>Low level</u></p> <p>Children who have low levels of additional needs will not be in receipt of DLA (Disability Living Allowance). They will be able to access universal services and adaptations. The suite of mainstream clubs and activities in and around Southampton is available on the Southampton Information Directory - http://sid.southampton.gov.uk/kb5/southampton/directory/home.page Information about services will be developed and improved following a Local offer event on 10 March 2018.</p> |
| 15 | <p><u>Medium level</u></p> <p>Families in receipt of Disability Living Allowance for a disabled child or young person or young people in receipt of a Personal Independence Payment and not receiving an individual package of support via services at the substantial and critical level will have access to a 'Short Breaks PLUS' card which offers easy access to a range of concessions or discounts negotiated across the city. This recognises that these children can access most services available to all children. Additionally, the Short Breaks PLUS card will offer booking rights into subsidised activities, in and around Southampton.</p> <p>The Short Breaks programme will fund these activities through either a grant making process or flexible Dynamic Purchasing System (DPS) contract arrangement. Both approaches will invite applications from providers for additional staffing, specially adapted equipment or other ideas that will enable increased access for children with disabilities. The process will take account of, and prioritise the feedback from children, both in terms of range of activities and times (e.g. weekends, Friday evenings).</p> |
| 16 | <p><u>Substantial and Critical levels</u></p> <p>Families whose needs are assessed to be substantial or critical will be supported through the relevant Social Care or Jigsaw team. These teams will carry out an assessment of need for the child and their family. If eligible the family will receive an individual package of support through a Personal Budget. The package of support will take into account any requirements for a Short Break as well.</p> |
| | Consultation feedback |
| 17 | <p>There were 99 responses to the consultation, either online or in hard copy. A report covering all the response is attached as Appendix 1.</p> <ul style="list-style-type: none"> • 76% of respondents agreed there is a need to make changes to the Short Breaks service offer. • 72% agreed there is a need to make a change to the eligibility criteria • 74% agreed to the proposed eligibility criteria and • 69% agreed with the proposed Short Break service offer • 73% felt there would be a significant (34%) or moderate (39%) impact as a result of the changes. 16% felt there would not be much of an impact and 2% felt there would be no impact at all. |

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| 18 | In regards to changing the names, 65% did not want to change the name of the Jigsaw service and 68% did not want to change the Buzz Network name. |
| 19 | <p>A total of eight consultation sessions were also held, seven for parent/carers and one for Short Break providers. They were held on different days of the week and times of the day at five venues across the city.</p> <p>The sessions consisted of a presentation giving the background, information about the engagement work with the Parent/Carer Forum and details of the proposals. Case studies were provided to help attendees understand more clearly what the potential impact of the proposals might be on different families. The sessions were then opened up for comments and questions from attendees. A list of Frequently Asked Questions was also made available.</p> <p>A total of 52 parents/carers attended the sessions as well as 10 representatives from short break providers or schools. A Facebook Live session was held on 9th February 2018 and has been viewed nearly 700 times.</p> |
| 20 | <p>The main areas of feedback from the sessions was:</p> <ul style="list-style-type: none"> - Negative views on the use of the term 'critical' within the 4 eligibility levels. 'Complex' was suggested as an alternative. - Suggestions relating to closer working with other local authorities to have the same/similar Short Break offer - Concerns about the personal budget no longer being available at the medium eligibility level and the impact this would have on families - Questions around how the proposals (if agreed) would be implemented and whether new assessments or re-assessments would be required - Suggestion that schools could be used to provide more Short Breaks at the weekend and during school holidays - Lack of Short break provision for children aged under 5 years - Concerns about whether mainstream community activities would be sufficiently skilled to support children with disabilities or additional needs, particularly those with autism. - Questions around how the quality of community activities will be monitored. |
| 21 | Three written responses were received separately from the online survey or consultation sessions. Two were from short break providers - Royal National Institute of Blind People (RNIB) & Southampton Mencap - and one was a transcript of a Facebook conversation and poll of families on the proposals. |
| 22 | <p>RNIB</p> <p>The response from RNIB focussed on the proposed eligibility criteria. They expressed strong disagreement with the proposal and were concerned that the eligibility banding (low, medium, substantial & critical) would introduce unfair barriers to accessing short breaks and make a decision about the person before an assessment is put in place. To mitigate against this, families will be made aware of their right to request an assessment or reassessment of their needs at any time. RNIB did not comment on the proposed service offer or whether the service names should be changed.</p> |
| 23 | Southampton Mencap |

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| | <p>The response from Southampton Mencap was broadly supportive of the proposals. However, they expressed concerns about some aspects of the new eligibility and service offer, in particular:</p> <ul style="list-style-type: none"> - The effect on families of the removal of personal budget option for those at the medium level - The significant work involved in implementing the proposals - The challenges of supporting mainstream activities to apply for funding and to adapt their services - The importance of specialist playschemes continuing to be available |
| 24 | <p>Facebook Poll</p> <p>A set of statements was posted during the consultation by a parent interested in finding out people's views. 136 people took part in the poll with the following results:</p> <ul style="list-style-type: none"> - The Buzz Budget of £200 really helps our SEN child and we want to keep this in the future – 103 votes - The budget helps us taking our son on trips and fun activities that really help his condition – 20 votes - The respite 1:1 service really helps our SEN child and we want to keep this in the future – 10 votes - I currently receive the personal budget but would choose the 1:1 service if the waiting list was shorter – 3 votes - I don't need the personal budget or 1:1 service and would not miss it if it was scrapped – 0 votes <p>The main areas of feedback were:</p> <ul style="list-style-type: none"> - Concerns about the long waiting list for 1:1 support through Buzz Network - Concerns that removal of the personal budget option would reduce the choice available for families - Positive feedback about the 1:1 service |
| 25 | <p>Facebook Live</p> <p>A Facebook Live session allowed parents to put forward questions and add comments. The session has been viewed 677 times. Questions asked for clarity around the eligibility criteria, in particular the substantial level. Other questions related to the implementation of the service, the changes to the services currently available and how Children and Families Services would develop the skills and capacity to support the changes. The importance of transition from children to adults was highlighted several times in the comments. There was also mixed views about personal budgets, with support for them and concerns raised. The session also touched on an appeals process, with an explanation about a new triage service being considered to ensure requests for assessments are considered.</p> |
| 26 | <p>In response to the feedback and subject to approval of the proposals, the following changes will be made:</p> <ul style="list-style-type: none"> - Amend the criteria wording from 'critical' to 'complex'. - Ensure assessments consider the impact on the family as well as the needs of the child. - Ensure families are aware of their right and how to request an |

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| | <p>assessment or reassessment of their needs at any time.</p> <ul style="list-style-type: none"> - Work with families, through the Parent Carer Forum, to <ul style="list-style-type: none"> o identify and develop services that support children with autism o review services for young people as they reach the point of transition o provide clear information about personal budgets - Proactively work with agencies, families and providers to develop the range of enhanced mainstream services. - Continued provision of a reduced personal budget for an interim 12 month period for families at the Medium level of need whilst the new Short Break offer is developed. - Work with families, through the parent carer forum, to develop a Short Break card, including a Short Break plus card for those at the medium level. - Secure services using a range of commissioning and grant funded approaches. |
| | <p>Implementation</p> |
| 27 | <p>As a result of the formal consultation, an outline Implementation Plan has been prepared, subject to Cabinet approval and attached as Appendix 2. This also shows when the changes take place and an estimate of the number of children and families impacted by the changes (see also paragraph 29). A summary is set out below.</p> |
| 28 | <p>Eligibility Criteria</p> <p>If approved the new eligibility criteria will be implemented from 1st April 2018. Implementation will be adapted to support and reflect the level of change required.</p> <ul style="list-style-type: none"> - From 1st April all families will be required to provide evidence they are in receipt of Disability Living Allowance (DLA) or Personal Independence Payment (PIP). - At the complex level there should be no change for those currently supported by Jigsaw as the criteria for the complex group are comparable to the current Jigsaw criteria. Children and families who are considered to meet the new wider Complex eligibility criteria will be referred to Jigsaw for assessment. - Training and support will be provided to staff across all Children's Services teams, enabling them to identify and support those children and families who meet the substantial eligibility criteria. Training will be completed between April and September 2018, with access to all those meeting the substantial criteria fully available by 30th September 2018. - As an <u>interim arrangement</u>, a new revised lower personal budget offer will be made available from 1st April 2018 for those who are in receipt of DLA and therefore meet the medium level eligibility criteria. During 2018/2019 work will be undertaken to secure enhanced mainstream services and develop a Short Break /Short Break Plus card. Personal budgets will not continue beyond 31 March 2019 for those at the Medium level. - The support for those at the low level links to other work developing an improved local offer to ensure children and families meeting the |

| | low level eligibility criteria are provided with information about local accessible services. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------|--|--|---------------------------------------|--------------------------------------|------------------------------------|-------------------------|-----|-------|-------|---|---|--------|-------|-----|-----|---|-------------|-----|-----|---|---|---------|-----|----|-----|-----|--------------|-------|--|-----|-----|
| 29 | <p>The table below shows the estimated number of children and young people in each of the eligibility levels who will be affected either positively or negatively by the proposals. These numbers are estimates because the actual numbers will not be known until evidence has been obtained from each family of their eligibility and necessary assessments completed at the substantial and complex levels.</p> <table border="1"> <thead> <tr> <th>Eligibility Level</th> <th>Total estimated will be at this level</th> <th>Number receiving an enhanced service</th> <th>Number receiving a reduced service</th> <th>Number seeing no change</th> </tr> </thead> <tbody> <tr> <td>Low</td> <td>5,000</td> <td>5,000</td> <td>0</td> <td>0</td> </tr> <tr> <td>Medium</td> <td>1,350</td> <td>850</td> <td>500</td> <td>0</td> </tr> <tr> <td>Substantial</td> <td>150</td> <td>150</td> <td>0</td> <td>0</td> </tr> <tr> <td>Complex</td> <td>285</td> <td>30</td> <td>150</td> <td>105</td> </tr> <tr> <td>Total</td> <td>6,785</td> <td>1,030 (plus 5,000 receiving greater advice and signposting to disability friendly activities at the low level of need)</td> <td>650</td> <td>105</td> </tr> </tbody> </table> | Eligibility Level | Total estimated will be at this level | Number receiving an enhanced service | Number receiving a reduced service | Number seeing no change | Low | 5,000 | 5,000 | 0 | 0 | Medium | 1,350 | 850 | 500 | 0 | Substantial | 150 | 150 | 0 | 0 | Complex | 285 | 30 | 150 | 105 | Total | 6,785 | 1,030 (plus 5,000 receiving greater advice and signposting to disability friendly activities at the low level of need) | 650 | 105 |
| Eligibility Level | Total estimated will be at this level | Number receiving an enhanced service | Number receiving a reduced service | Number seeing no change | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Low | 5,000 | 5,000 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medium | 1,350 | 850 | 500 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Substantial | 150 | 150 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Complex | 285 | 30 | 150 | 105 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total | 6,785 | 1,030 (plus 5,000 receiving greater advice and signposting to disability friendly activities at the low level of need) | 650 | 105 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 30 | <p>The aim is for the overall impact to be neutral or positive for the majority of children and young people with disabilities. Of the 6,785 children and young people with disabilities, around 5,000 will receive greater advice and signposting to disability friendly services at the low levels of need. A further 1,030 children and young people are estimated to receive an enhanced service. However, around 10% of service users (approximately 650 children and young people) could receive a reduced service. Specific actions will be taken to mitigate the situation for them and to address concerns expressed about the proposals. These will include interim arrangements, a phased implementation plan to co-design some services with children, young people and parents and to allow time for those affected to prepare for the loss of personal budgets. The aim of the transition period is to minimise the impact for individual children, young people and their families.</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 31 | <p>The estimated impact for each of the levels is detailed below:</p> <p><u>Low:</u></p> <ul style="list-style-type: none"> Up to 5,000 children and young people with SEND and additional needs are estimated to be eligible at the low eligibility level. The benefit to them will be in the form of greater advice and signposting to mainstream provision rather than a change in the actual City Council funded support | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| | <p>that they can access.</p> <p><u>Medium:</u></p> <ul style="list-style-type: none"> • Around 850 children who cannot currently access services through the Buzz Network due to lack of capacity will gain by having access to a greater range and number of community activities. • Around 500 children will receive a reduced service as they will no longer have access to a personal budget or 1:1 support. However they will also be able to access the new community activities as an alternative. <p><u>Substantial:</u></p> <ul style="list-style-type: none"> • It is estimated that 150 children currently at the medium level will be eligible for an assessment of their needs at the substantial level and therefore a higher level of service. <p><u>Complex:</u></p> <ul style="list-style-type: none"> • It is estimated that an additional 30 children with complex needs who currently are not eligible for the Jigsaw Service because they do not have a severe learning disability will become eligible under the new criteria. • Around 150 children who currently also access Buzz Network services as well as Jigsaw Services will no longer be eligible for services at the medium need level and so will potentially receive a reduced service. However they can request a re-assessment of their needs at the complex level which could result in the provision they were accessing being made available through their individual support package. This is dependent on the outcome of each individual social care assessment. |
| 32 | <p><i>Commissioned and grant funded services</i></p> <p>Four approaches have been identified to support the new Short Break offer:</p> <ul style="list-style-type: none"> - A contract to secure overnight residential services. - Provision of outreach and homecare support through the Homecare framework which is being developed and planned to commence in April 2019. - A dynamic purchasing system (DPS) to flexibly contract a range of services - A grant process to support and encourage small local providers to engage with the Short Break offer as well as encouraging new innovative approaches to be explored. |
| 33 | <p>Tendering for new services and the development of a new grant process will be carried out during 2018/2019. New contracted services will commence no later than 1st April 2019. Grant funded services may commence sooner but will have an impact on the available budget for other service areas, including personal budgets.</p> |
| RESOURCE IMPLICATIONS | |
| <u>Capital/Revenue</u> | |
| 34 | <p>In 2017/18, the total short breaks budget is £1,455,000, split between £975,000 for specialist services and £480,000 for non-assessed services (the Buzz Network). The CCG contributes £178,200 to the specialist services</p> |

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| | budget to support access for children with complex health needs. Over a contractual period of 5 years, the total budget equates to £7,275,000. | | | | | | |
| 35 | As a result of the proposals set out above the budget is expected to remain consistent albeit distributed differently across the new eligibility levels. | | | | | | |
| 36 | Current Revenue expenditure | | | Forecast Revenue expenditure | | | |
| | | Grant | Commissioned services (contracts) & Personal budgets | Grant | Commissioned services (contract and DPS) & Personal budgets | | |
| | Critical | £480,000 | £975,000 | £0 | £975,000 | | |
| | Substantial | | | | | | |
| | Medium | | | £480,000 | | | |
| | Low | | £0 | £0 | | | |
| <i>Review 27/2/2018 NP (FBP)</i> | | | | | | | |
| 37 | Spend Profile | | | | | | |
| | | 2017/18 | 2018/19 | 2019/20 | 2020/21 | 2021/22 | Total |
| | | £k | £k | £k | £k | £k | £k |
| | Specialist Services | 975 | 975 | 975 | 975 | 975 | 4,875 |
| | Non Assessed Services | 480 | 480 | 480 | 480 | 480 | 2,400 |
| | Total | 1,455 | 1,455 | 1,455 | 1,455 | 1,455 | 7,275 |
| | | | | | | | |
| | CCG Contribution | 178.2 | 178.2 | 178.2 | 178.2 | 178.2 | 891 |
| <i>Review 27/2/2018 NP (FBP)</i> | | | | | | | |
| <u>Property/Other</u> | | | | | | | |
| 38 | There are no property implications. | | | | | | |
| LEGAL IMPLICATIONS | | | | | | | |
| <u>Statutory power to undertake proposals in the report:</u> | | | | | | | |
| 39 | The proposals are designed to meet social care functions under part 3 of the Children and Families Act 2014, the Care Act 2014 and the Children Act 1989 (S17). | | | | | | |
| <u>Other Legal Implications:</u> | | | | | | | |

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| 40 | The proposals are wholly consistent with and take into account the SEND Code of Practice. |
| 41 | The proposals have been fully assessed in accordance with the Council's statutory duties under the Equality Act 2010, including the Public Sector Equality Duty. A detailed Equality Impact Assessment with mitigation and remediation measures is included with this report and has been reviewed and updated throughout the consultation in order to inform the Council's final decision on this matter. |

RISK MANAGEMENT IMPLICATIONS

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| 42 | Financial: The proposals put forward a fairer and more equitable offer of Short Breaks. In doing so it moves away from a capacity led to a needs led service model, offering Short Breaks based on the needs of the children and their parents. There is a risk the needs based approach could generate a cost pressure. This will be mitigated by new eligibility criteria which will support this change and will help to ensure financial resources are managed and targeted to those most in need. These criteria will also ensure that the needs of children and young people with disabilities are being met through access to a Short Break. Risk = Medium |
| 43 | Service Delivery: the proposals are designed to use the most effective method to secure services that offer children with disabilities and their parents a Short Break. This will be achieved through the use of contracts, both fixed term and dynamic as well as grants. The use of different approaches should enable the proposals to be delivered. There is a risk the range of services are not secured. Early engagement with providers has shown this to be minimal, and proactive engagement with providers and parents will help to mitigate this risk. Risk = Low |
| 44 | Reputation: the proposals will have a negative impact on some families, reducing or removing the number of short breaks they can access, whether directly or via a personal budget. Significant levels of engagement and communication have been undertaken to explain the reason for the changes, and to gather ideas and proposals on the way the service should be offered in a fairer and more equitable way, thereby reducing the impact and risk of reputational damage. This work will need to continue to ensure the transition to the new Short Break offer is managed carefully and ensuring any impact on families is carried out with the families and in a phased way. Risk = Medium |

POLICY FRAMEWORK IMPLICATIONS

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| 45 | The recommendations in this paper support the delivery of outcomes in the Council Strategy. They also contribute to the City Strategy and the Health and Wellbeing strategy. The proposals particularly support Council Priority Outcomes: <ul style="list-style-type: none"> ○ All children and young people have a good start in life ○ People in Southampton live safe, healthy and independent lives |
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| KEY DECISION? | Yes |
| WARDS/COMMUNITIES AFFECTED: | All wards |
| | |

SUPPORTING DOCUMENTATION

Appendices

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| 1. | Consultation on an offer for children with disabilities and additional needs. |
| 2. | Short Break Offer – proposed implementation timeline. |
| 3. | Case Study Impact Examples |

Documents In Members’ Rooms

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| 1. | Equality and Safety Impact Assessment |
| 2. | Data Protection Impact Assessment |

Equality Impact Assessment

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| Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out. | Yes |
|---|------------|

Data Protection Impact Assessment

| | |
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| Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out. | Yes |
|--|------------|

Equality Impact Assessment and Privacy Impact Assessment available from S.Jerrim@nhs.net

Other Background Documents

Other Background documents available for inspection at:

| | Title of Background Paper(s) | Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable) |
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| 1. | | |
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Consultation on an offer for children with disabilities or additional needs – Consultation feedback

Introduction

1. Southampton City Council undertook public consultation for 12 weeks between 21 November 2017 and 12 February 2018 regarding proposed changes to the short break service offer for children with disabilities or additional needs and proposed changes to the eligibility criteria which allows access to these services.
2. The proposals were discussed at Cabinet on 14 November 2017 and the Cabinet agreed that the proposed changes should be consulted with key stakeholders and the public before final decisions are taken.

Aims

3. The aim of this consultation was to:
 - Ensure the public and key stakeholders understood the proposed changes.
 - Ensure any resident, business or stakeholder who wished to comment on the proposals had the opportunity to do so, enabling them to raise any impacts that the proposals may have
 - Provide feedback on the results of the consultation to elected Members and key officers to enable them to make informed decisions
 - Ensure that results are analysed in a meaningful, timely fashion, so that feedback is taken into account when final decisions are made.
4. This report summarises the principles and processes of the public consultation. It also provides a summary of the consultation respondents both for the consideration of decision makers and any interested individuals.

Consultation principles

5. The council takes its duty to consult with residents and stakeholders on changes to services very seriously. The council's consultation principles ensure all consultation is:
 - Inclusive: so that everyone in the city has the opportunity to express their views.
 - Informative: so that people have adequate information about the proposals, what different options mean, and a balanced and fair explanation of the potential impact, particularly the equality and safety impact.
 - Understandable: by ensuring that the language used to communicate is simple and clear and that efforts are made to reach all stakeholders, for example people who are non-English speakers or disabled people.
 - Appropriate: by targeting people who are more likely to be affected and using a more tailored approach to get their feedback, complemented by a general approach to all residents, staff, businesses and partners.
 - Meaningful: by ensuring decision makers have the full consultation feedback information so that they can make informed decisions.
 - Reported: by letting consultees know what was done with their feedback.

6. Southampton City Council is committed to consultations of the highest standard, which are meaningful and comply with the following legal standards:
 - Consultation must take place when the proposal is still at a formative stage
 - Sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response
 - Adequate time must be given for consideration and response
 - The product of consultation must be carefully taken into account.
7. Public sector organisations in Southampton also have a compact (or agreement) with the voluntary sector in which there is a commitment to undertake public consultations for a minimum of 12 weeks wherever possible. This aims to ensure that there is enough time for individuals and voluntary organisations to hear about, consider and respond to consultations. This consultation was for a total of 12 weeks.

Approach and methodology

8. The consultation on an offer for children with disabilities or additional needs sought views from relevant individuals and stakeholders. The formal written consultation ran from 21 November 2017 to 12 February 2018.
9. Deciding on the best process for gathering feedback from stakeholders when conducting a consultation requires an understanding of the audience and the users of the service. It is also important to have more than one way for stakeholders to feedback on the consultation, to enable engagement with the widest range of the population.
10. The agreed approach for this consultation was to use a combination of online and paper questionnaires. This approach enables an appropriate amount of explanatory and supporting information to be included in a structured questionnaire, helping to ensure that the public are aware of the background and context to each of the proposals. It is therefore the most suitable methodology for consulting on a complex issue.
11. In addition, a total of eight consultation sessions were held, seven for parent/carers and one for short break providers. They were held on different days of the week and times of the day at five venues across the city.
12. The sessions consisted of a presentation giving the background, information about the engagement work with the Parent/Carer Forum and details of the proposals. Case studies were provided to help attendees understand more clearly what the potential impact of the proposals might be on different families. The sessions were then opened up for comments and questions from attendees. A list of Frequently Asked Questions was also made available. Feedback from these sessions was captured and included in the analysis of consultation results.

Promotion and communication

13. Throughout the consultation, every effort was made to ensure that as many people as possible were aware of the proposals and had the opportunity to have their say. Particular effort was made to communicate with existing service users, parents and carers as they are the most likely to be directly impacted by the proposals should they be implemented.
14. The consultation was promoted in the following ways:
- a. The Southampton City Council website
 - b. Emails and post to Buzz Network members
 - c. Buzz network newsletter
 - d. Short break providers sharing details with the families they support
 - e. Southampton Parent/Carer Forum:
 - i. Social Media (Facebook & Twitter)
 - ii. Forum meetings
 - iii. Outreach to wider parent/carer support groups
 - f. Leaflets
 - g. Information about the consultation was sent to all Special Educational Needs Coordinating Officers
 - h. Information was sent to all 75 schools in Southampton
 - i. Information was sent to the third sector through local SEND charities
 - j. Facebook Live with the Parent/Carer Forum coordinator and SEND service manager

Consultation questionnaire respondents

15. In total, 99 people responded to the consultation either through the paper or online questionnaire. All the questionnaires that had at least one question completed were included in the analysis to ensure every bit of feedback was considered.
16. Figure 1 shows the age breakdown of consultation respondents compared to the mid-2016 population estimate for Southampton. The age groups between 25 and 54 were over represented in the consultation when compared with the Southampton population and the age groups under the age of 25 and over the age of 54 were underrepresented.

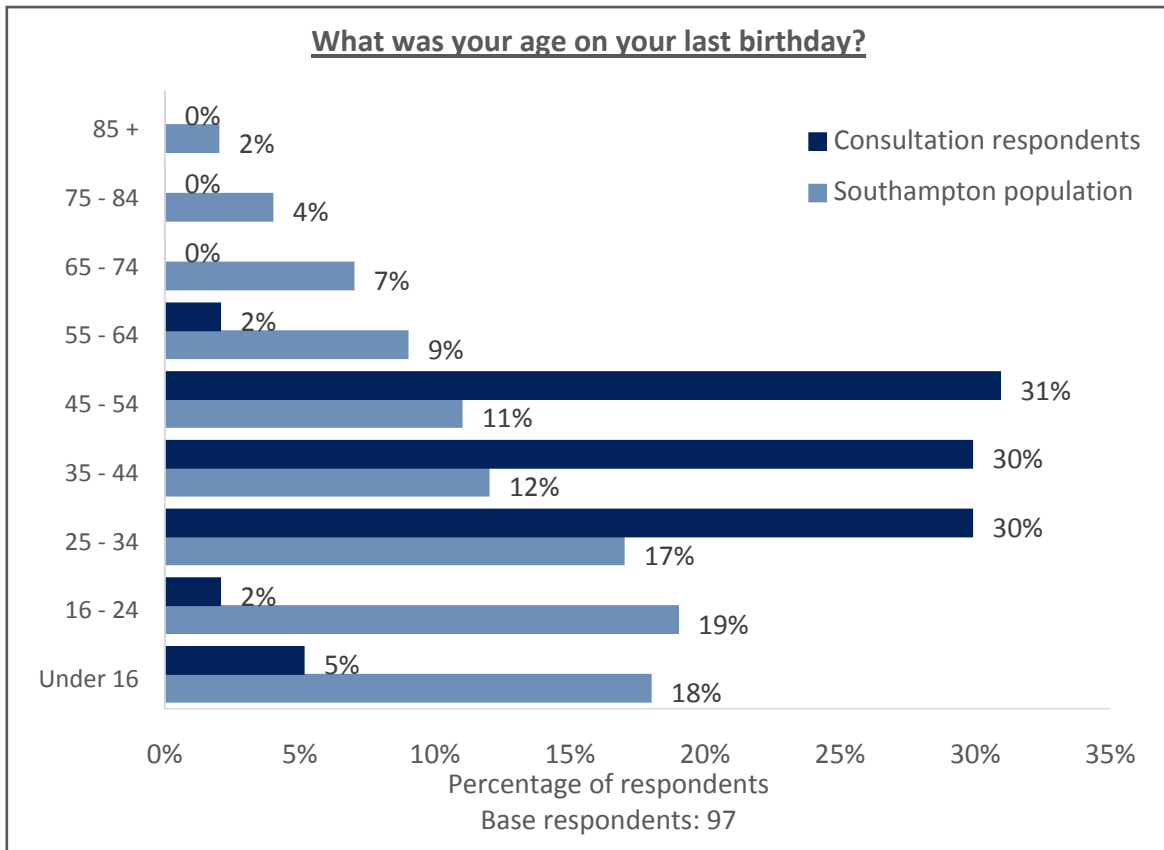


Figure 1

17. The gender breakdown of respondents was 91% female and 9% male (Figure 2). Females were significantly overrepresented when compared to the Southampton population as the mid-2016 population estimate for Southampton reports 49% female and 51% male.

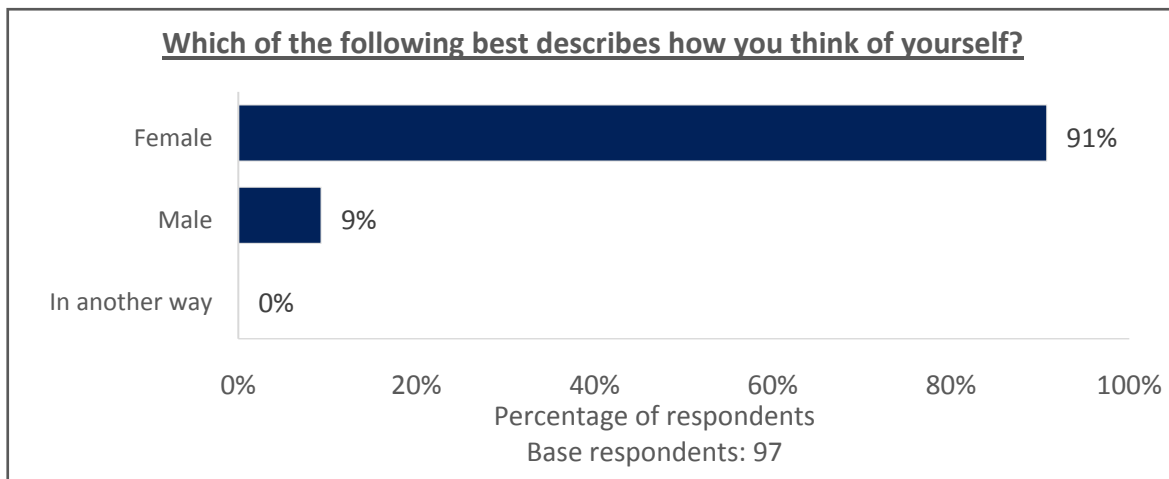


Figure 2

18. Figure 3 shows the ethnicity breakdown of respondents to the consultation. The proportion of people that describe themselves as White is overrepresented as 85% of the population described themselves as White in the 2011 census. All other ethnic groups are underestimated in the consultation when compared to the 2011 census. 8% of the Southampton population in the 2011 census described themselves as Asian or Asian

British, 2% mixed or multiple ethnic groups, 2% Black, African, Caribbean, Black British and 1% any other ethnic group.

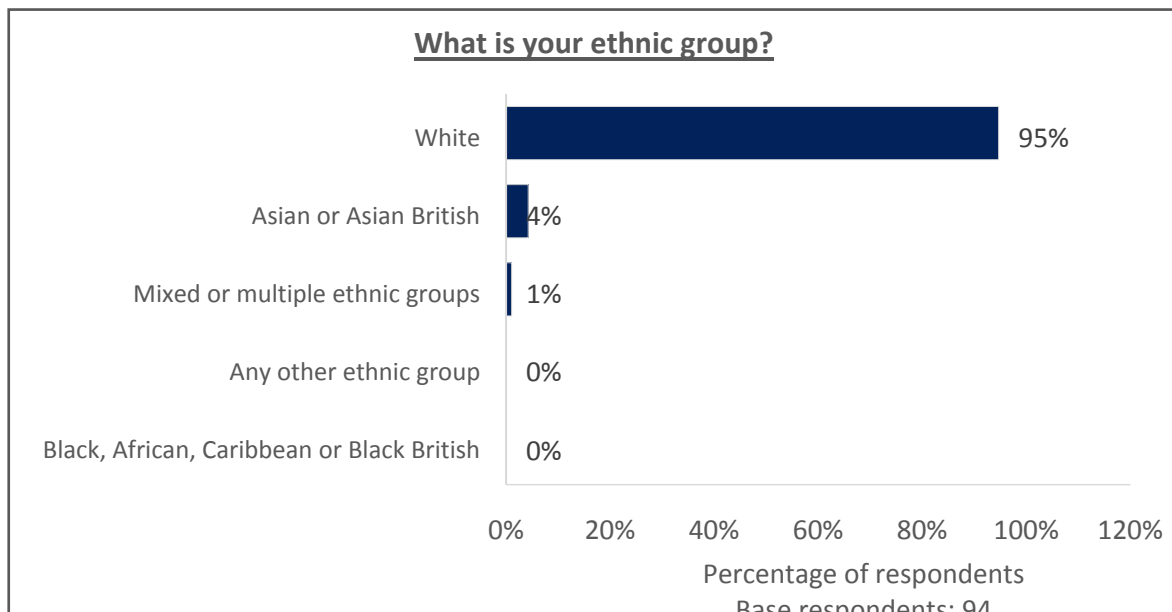


Figure 3

19. Figure 4 highlights the interest of the respondents to the consultation. The largest proportion of respondents to the consultation were parents and carers of children that currently access services. A further 10% of respondents described themselves as professional and 9% were parents and carers of children who do not currently access the services.

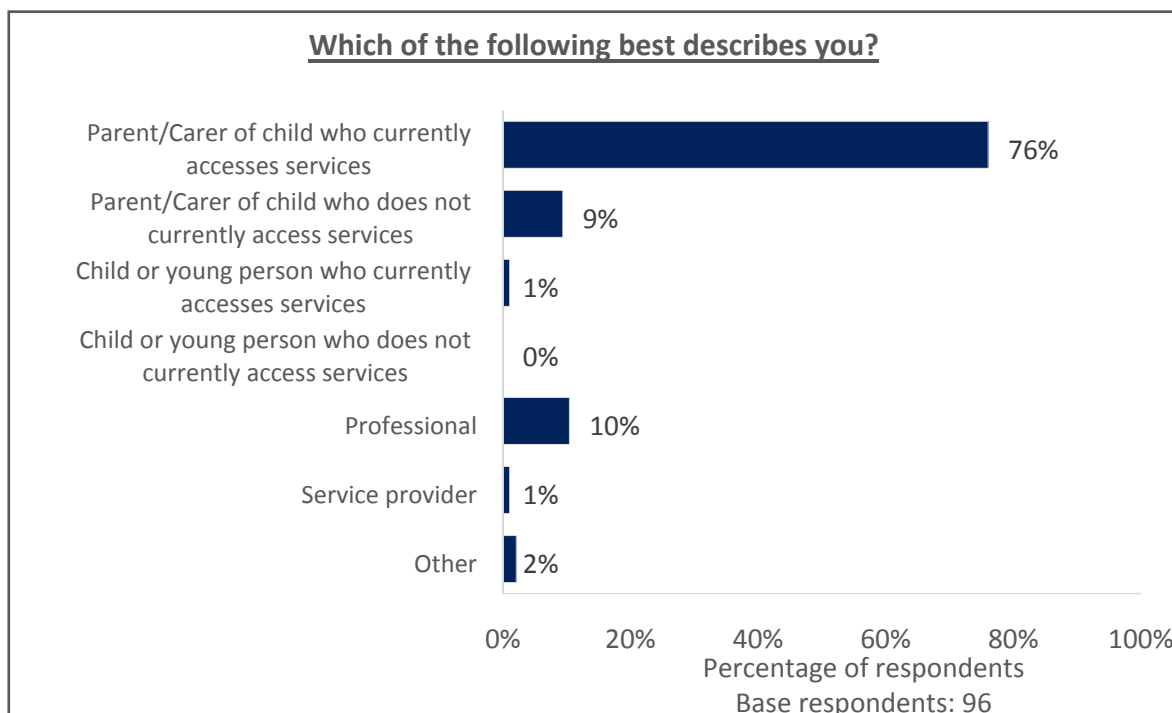


Figure 4

Questionnaire feedback

20. In total, 99 people answered the consultation questionnaire either through the online or paper version.

21. The first question asked respondents to what extent they either agreed or disagreed that changes needed to be made to the Short Breaks service offer (Figure 5). All 99 respondents answered this question and overall 36% strongly agreed with changes to the service and 39% agreed. In total 76% agreed to some extent that the changes needed to be made to the service. In total 8% disagreed with making changes to the service. Of this, 7% disagreed and 1% strongly disagreed.

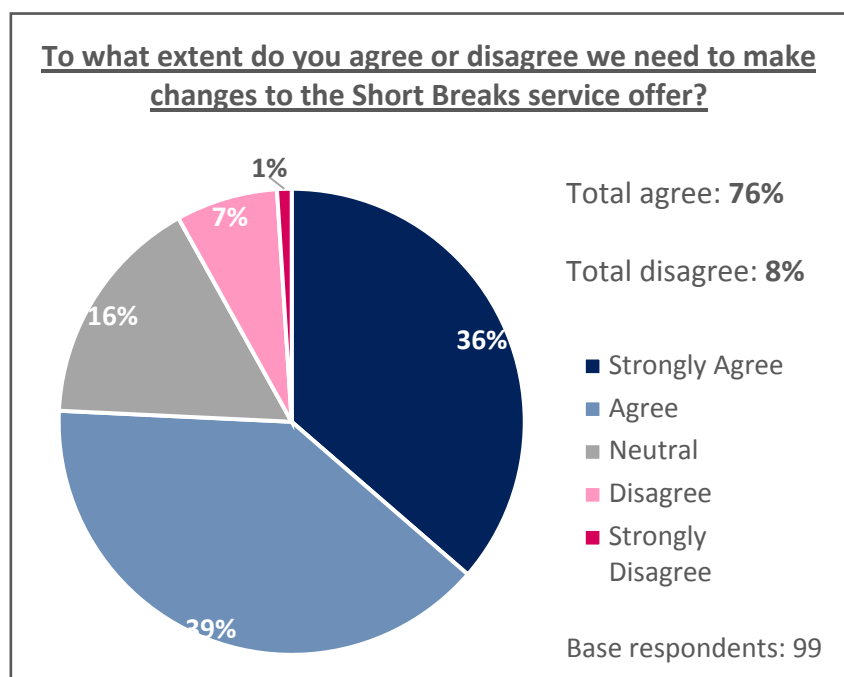


Figure 5

22. The second question asked respondents to what extent they agreed or disagreed that changes needed to be made to the eligibility criteria for the short breaks service (Figure 6). In total, 27% strongly agreed and 44% agreed that changes should be made to the eligibility criteria and 5% disagreed and 3% strongly disagreed.

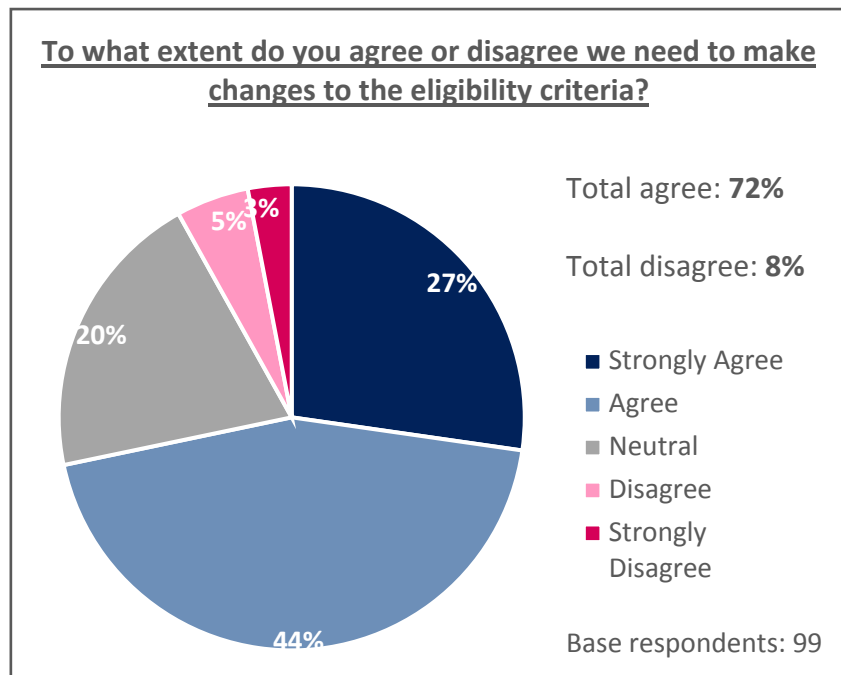


Figure 6

23. Respondents were informed about the proposed eligibility criteria and were then asked to what extent they agreed or disagreed with the proposal (Figure 7). Overall, 24% of respondents strongly agreed with the proposed criteria and 49% agreed. This totalled 74% that expressed agreement generally with the proposal. In total 14% expressed disagreement with the proposed eligibility criteria, of which 4% strongly disagreed and 10% disagreed.

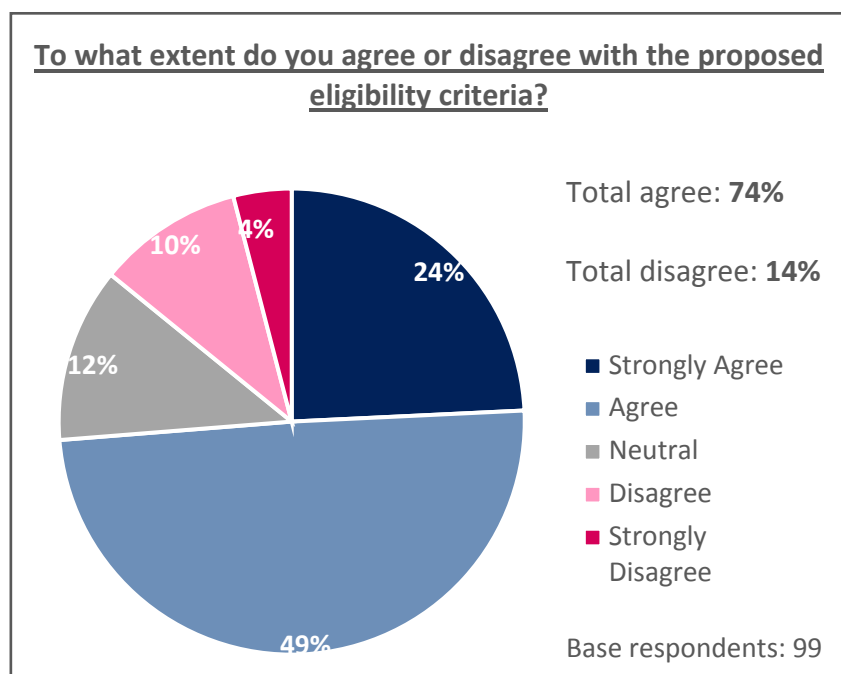


Figure 7

24. Respondents were then asked to write down any comments they had on the proposed eligibility criteria. When analysing the free text comments from the questionnaire, all

comments from all questions were analysed and categorised together. For example, if a respondent commented on the eligibility criteria in a different free text question that comment will have been regrouped with all other comments on the eligibility criteria to ensure that an accurate picture of opinions can be calculated across the entire consultation. In total, 62 respondents provided a comment to at least one question in the questionnaire.

25. Figure 8 shows the themes of comments surrounding the proposed eligibility criteria and the number of people that mentioned this somewhere within the questionnaire.

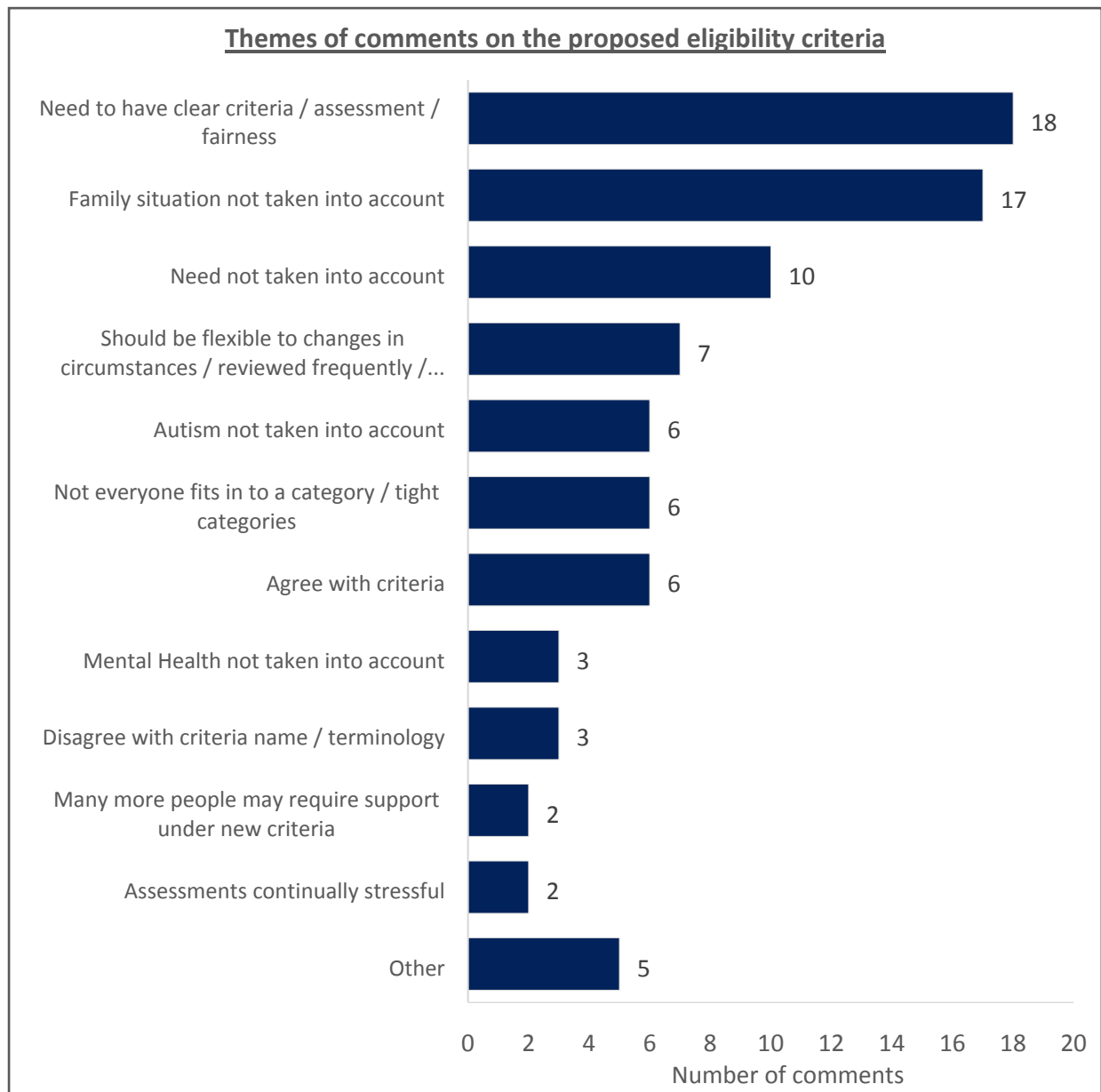


Figure 8

26. In total 18 respondents to the survey wrote a comment about the need to have clear criteria and assessment. Examples of quotes that encompass the sentiment of these comments include:

“assessment frameworks should be clear and concise”

“This would depend on the people who evaluate the the families and whether they start from scratch with every family, it’s hard to judge a case on one visit or one day. So although there is a criteria there it is not exactly plain and simple”

“The criteria for intervention should also be clearer.”

“the eligibility definitions are not very clear and some will be difficult to assess/measure. For instance, at the low level, you state that the children will have low level additional needs? These will have to be qualified. What is low level? Who decides what is low level? ...The proposal is silent on the assessment referral. Will high (substantial/critical) needs still require referral by a professional OR will their be possibility for self-referral?”

“There is not enough information given on what criteria will be used to assess disabled people, how this will be done, or how the appeal process will work where disable people dispute their level of disability.”

27. The second most mentioned theme of comment regarding the proposed eligibility criteria surrounded the request for the family situation to be taken into account during assessment. In total 17 respondents wrote about this and examples of comments include:

“I think the situation of the family should be considered as well at each level, as single parents obviously have more pressure and less assistance, and some families are very supportive and helpful whilst others are not therefore providing some families with more breaks than others and more time to spend with siblings”

“It is the only time I have a full night sleep! Being only carer I have to keep going on zero sleep, working on zero sleep, caring on zero sleep”

“having extended family and a network of friends is no guarantee that they will be able and/or willing to assist with caring for a child with special needs... Due consideration should be given to families who have several children with disabilities who may end up being assessed under different criteria, yet, the overall impact on the family/parents is profound. For instance, disproportionate or disjointed provision of respite leaving one sibling always in the care of the parents means the parents never get their respite”

“Nobody but the parents know the impact a particular disability has, and some parents will find a disability more disruptive of their daily lives than other.”

“I do believe vulnerable families will loose out”

28. The third most reported comment was that respondents felt that needs of the individual were not being taken into account. In total 10 people commented on this. Examples include:

“You can't put moderate learning disabilities and profound disabilities in the same category! Their needs are completely different! If anything profoundly disabled children like my son require substantially more health and social care.”

“How will you assess the level of the child's needs - I assume there will be a criteria for this also, and a request for additional information?”

"I am concerned that the access to substantial and critical levels will be too tight and may be budget driven rather than needs driven."

"My concern is to get the dla isn't possible for all children that have additional needs"

"I think families with children on the autistic spectrum that have invisible needs in a lot of cases will lose their personal budget and I do not believe this is fair. These families are the families that are most in need as are not recognised as needing support or do not easily qualify for other types of support."

29. The fourth most frequently recorded theme of comment surrounding the proposed eligibility criteria highlighted that circumstances can change and eligibility should be flexible to this and reviewed frequently. For example, comments that reflect this include:

"This seems faire as long as it is understood that children and circumstances change through no fault of their own and if necessary their band may change and they may then need more support."

"People personal situation change all the time and rely on the support that has been always there"

"I am only concerned when we joined the buzz network on this new criteria when we joined would be low. Things for our child has progressed quickly since we joined. We would now be in the medium. Will you be sending out anything so we can be reassessed."

30. Six respondents felt that individuals with autism had not been taken into account within the proposed criteria. Some of the comments that highlighted this include:

"I think the autism families will loose out"

"You still use the criteria as learning disability but not include autism. There are children and young people in Southampton with autism that need support at the substantial and critical level and you are still failing them."

"Although a parent of a child with a disability, I also work with children with additional needs, and have at times been shocked to be told that children with very severe autism, LD and associated behaviour difficulties were told they did not qualify for Jigsaw, when they most clearly should have-"

31. Six respondents expressed a concern that not everyone would fit in to a proposed category. Comments that encompassed the sentiment of this opinions include:

"Big jump between med and sub"

"The potential problem with this eligibility criteria is that everyone has to agree for each individual child. Eg: the parents may feel the need is critical but social services may say substantial. So how would that issue be resolved fairly if the situation arose?"

"Again it seems fairer but sometimes families and children do not fill neatly into these categories and so you may find some families slipping through the net."

32. There were six respondents that wrote a comment in support of their agreement with the criteria. For example:

“It immediately seems fairer, and the words used to describe the differing levels reflect why the amount of support needs to be differentiated.”

“I think it's a good proposed criteria and is inclusive to all disabilities as some are at lower levels whilst others obviously are more severe and will be a good system to identify an individual's level of need and signpost to the relevant services more appropriately as clearly the current system is failing families and young people in Southampton.”

“I think it is a good way to assess the needs of service users and provide the relevant help.”

33. Three respondents commented on how they felt that mental health had not been taken in to account in the proposed eligibility criteria. Examples of these comments include:

“Children/young people with mental health difficulties will not meet your criteria which means that they will not receive any support at all.”

“I do agree with the criteria that are there but am disappointed to see no acknowledgement of mental health issues which can and seriously impact a child's ability to access education, health and social opportunities.”

34. Three respondents expressed a disagreement with the naming of the criteria or the terminology used. Comments that encompassed this disagreement include:

“I don't believe that in the 'substantial' level the word disability should be used in regard to learning i.e i feel it should read; have significant difficulties”

“Secondly, their names need to be clearly related. When you talk of low and medium, it is natural to expect a high level. However, you jump to substantial and critical. I suggest, low, medium and high....Others might disagree, but please consider using the phrase 'children and young people with disabilities' rather than 'disabled children and young people”

“I think that, for clarity, the 'critical' criteria should read 'and/or' not just 'or' as many will have both learning disabilities and physical disabilities. Will the 'substantial' criteria also allow supported access to enhanced/adapted mainstream provision? This feels important for a number of reasons, inclusion and visibility being one but also the fact that much mainstream provision would be available if there were some minor adaptations and a staff member one to one with the service user. Not sure if it is clear from this description?”

35. Two respondents felt that under the proposed eligibility criteria there would be many new individuals that would be eligible for support. The comments included:

“You say that there is no cut to funding but if there are more families using the same amount of funding then this is a cut! You should be making more money available equal to the increase in numbers of families needing support.”

“I think the proposal is positive on the whole. I am concerned however that Jigsaw will become inundated with an increased need due to those at substantial & critical level. Jigsaw already struggles.”

36. Two respondents emphasised how stressful assessments can be and highlighted the following issues:

"I think we should learn lessons from the Work Capability Assessment disaster also- vast amounts of money have been spent assessing and regularly reassessing vulnerable people- this has been widely reported to adversely affect these people's mental health and ability to cope. Undergoing reassessment has been very stressful for me and my family and has adversely affected us, I hope we won't have to go through this again for a long time, as you need stability as a foundation to cope, and if respite entitlement that you desperately need to keep going is regularly under threat, this is bound to have a negative impact. Also, the assessment process is going to cost a fortune as we now have lots of social workers doing it- if frequently reassessed it will waste money that would be better used to help the children and families."

"Lots of money will be wasted making assessments, which will be instructive, and an invasion of privacy to what is already a stressful life with a child with a disability"

37. There were a further five respondents with comments surrounding the proposed eligibility criteria. These included:

"The DLA assessed the child at a medium care rate when so clearly he should have been awarded high rate, so this is one problem with being overly reliant on DLA awards as sometimes it seems they will underaward to see if they can get away with it, and if the parent does not feel up to challenging the decision their child may be doubly let down by the system."

"Re visit your eligibility criteria"

"I think 4 criteria are one too many and will confuse parents. 3 should suffice."

"The potential problem with this eligibility criteria is that everyone has to agree for each individual child. Eg: the parents may feel the need is critical but social services may say substantial. So how would that issue be resolved fairly if the situation arose?"

"My concern is to get the dla isn't possible for all children that have additional needs"

38. After a description of the proposed short break service offer in the questionnaire, respondents were then asked to what extent they agreed or disagreed with the proposed service offer. Figure 9 shows the results of this. Overall, 16% strongly agreed with the proposed service offer and 53% agreed which totalled 69% that expressed overall agreement with the proposal. Overall, 12% of respondents disagreed with the proposed short break service offer. Of this 3% strongly disagreed and 9% disagreed.

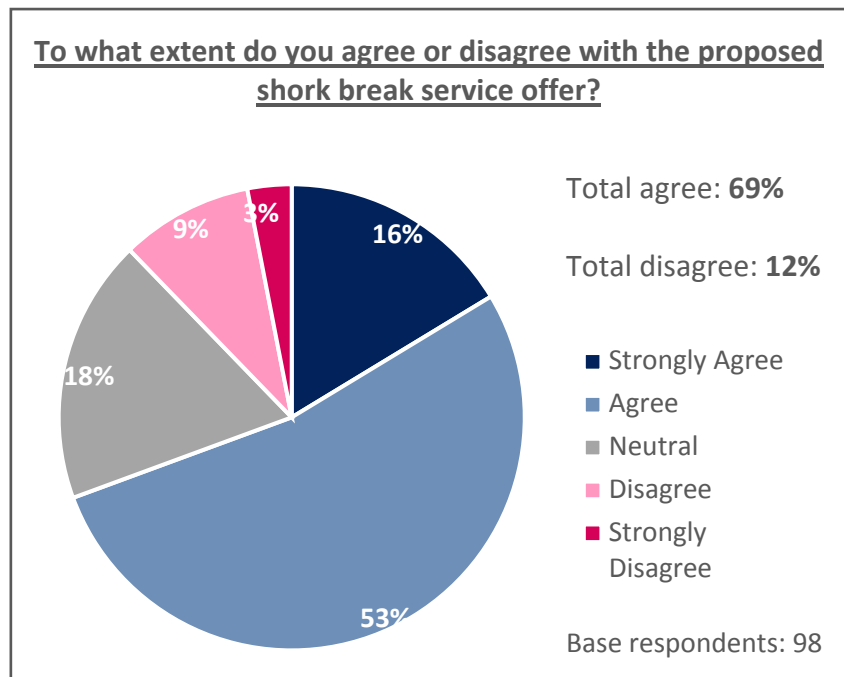


Figure 9

39. Respondents were then asked to provide any comments they had on the proposed short break service offer. Figure 10 shows the themes of comments surrounding the proposed service offer and the number of people that mentioned this in a question within the questionnaire.

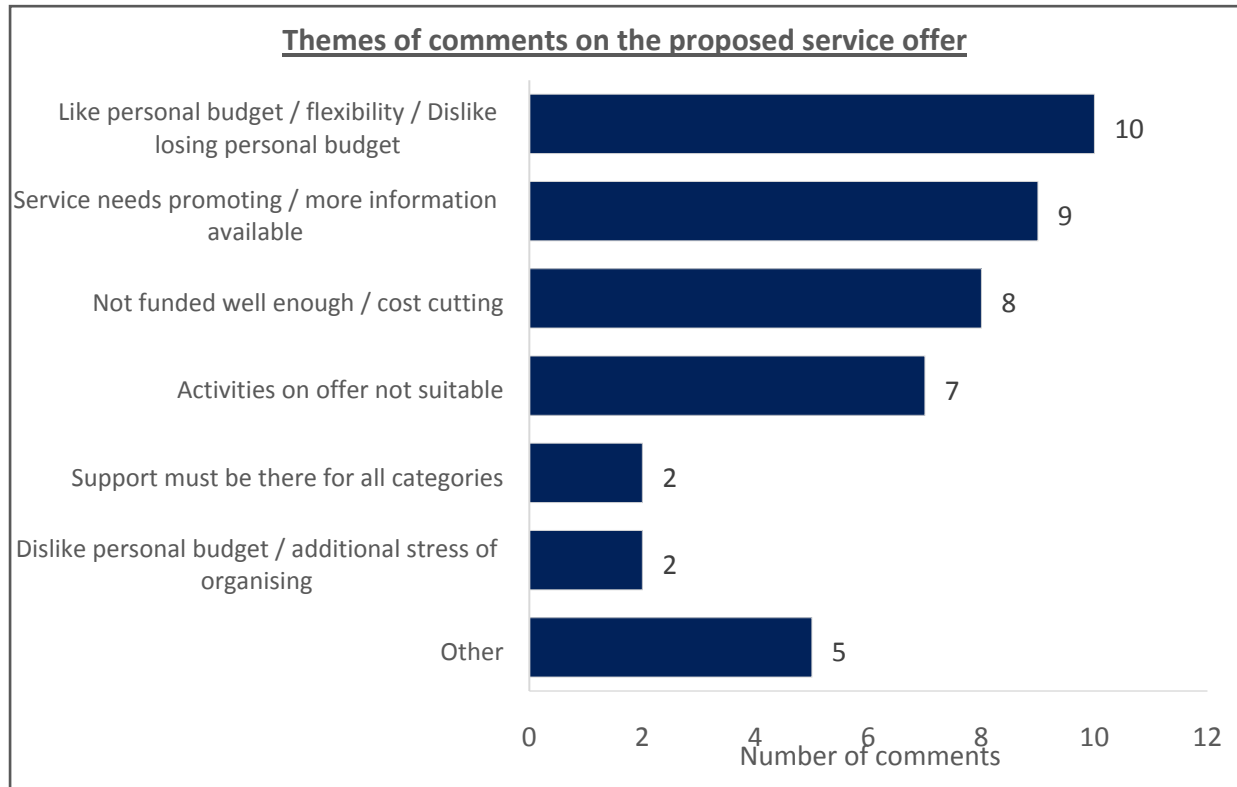


Figure 10

40. The most mentioned theme of comment regarding the proposed service offer by 10 people was that they like their personal budget and the flexibility it has to offer and dislike the idea of losing it. Comments that encompass the sentiment of this include:

“for a lot of families accessing this gives them freedom of choice to suit their own individual families needs.”

“One of the benefits of the personal budget was not having to worry too much about logistics; the proposed changes restrict us a lot more.”

“Personal budgets for all will ensure the money is only being spent on care provided.”

“I think it is unfair to take the personal budget away from medium level families, the budget is sometimes used for rest bite that the family would otherwise not receive!”

“I believe that a lot of families and children will be affected with changes to the personal budget, as for some families the personal budget works better, and allows for the child to do activities & fun things. For example, my child struggles with new people & busy places, and crowds more than just a handful of people. The personal budget allows for me to take him to places he likes & is able to cope with, and do things that he enjoys & is able to do as and when it best suits his needs.”

41. The second most mentioned theme surrounding the proposed service offer was that the service required better promotion and more information available. In total nine respondents mentioned this. For example, respondents said:

“So much is learnt from other parents or carers and that isn’t fair to people who are isolated or don’t have the ability themselves to find out.”

“the reason the personal budget take up has increased so much for Buzz families is that SCC were not transparent in advertising this as an option. It was parents who made this available to other parents through word of mouth and support groups.”

“Unless someone whispered the service Jigsaw to you, you wouldn't really know about them. It is like a secretive department within the SCC.”

“Not all families have an allocated social worker and this makes it more difficult to obtain help and support...Also they are less likely to even know that these services exist because they have no one who can direct them to these services”

42. Eight respondents felt that the proposed service offer is not funded well enough and that there are cuts to the service. For example:

“Where I do think we’ve gone terribly wrong with the bus network is that not enough money has been set aside for those children who aren’t able to access the wide range of pleasure breaks for one reason or another but usually because of severe and prepare and disability and family situation”

“You say that there is no cut to funding but if there are more families using the same amount of funding then this is a cut! You should be making more money available equal to the increase in numbers of families needing support.”

“While we are being told there is no cut to funds (though they aren’t increasing with inflation) and this is just about redistribution, over the years Jigsaw services have already been substantially cut, and many beneficial services stripped down, so it seems to me if people risk losing the support they have and need to share the funds more widely, that the ‘cake’ we are sharing from is not big enough. I agree that it is ridiculous that someone who is on a minimal level of support on the SEN register could have a personal budget, but I very much doubt much of the money is being spent this way, which is why I agree in essence with reallocating funds but it is much more complex than just a statistical tick box analysis needed”

43. Seven respondents felt that the activities on offer were not suitable to the individual. Comments that encompass the sentiment of these feelings include:

“Again especially families with a child with autism who find group situations and clubs extremely challenging if not impossible.”

“And seeing as the only help I currently receive from short breaks or jigsaw is £200 every 6 months for a child with a substantial lifetime condition with significant needs/ learning disability to pay for access to disabled activities/ play schemes which he needs as he certainly cannot cope with mainstream ones then I certainly don't feel it's ok to accept less help from the proposals”

“Children with Autism that are assessed as being Medium, may have a limited choice of short breaks that they would actually want to use. My son does not like cinemas, leisure centres, theme parks, museums or soft play centres.”

44. Two respondents stressed the importance of support being in place. For example:

“It is vital that carers and their children have access to adequate provision. This service is a lifeline to a lot of families and helps families feel valued in the role they do on a day to day basis.”

“What I would not like to see is a decrease in support. Nobody asks to have a child with additional needs nobody wants to ask for help but when someone does that support should be on hand and available.”

45. Two respondents wrote about their dislike of a personal budget and how it adds additional stress and organising. Comments included:

“Whilst I appreciate that it may be easier for the local authority and cheaper to operate personal budgets for service users. They are not value for money for families as directly purchasing Services for families that are over wrought and so busy caring for their child trying to work trying to manage family situations put even more stress and strain on them. With the best will in the world I just do not have the time to manage direct payments which is why I have never access them for our family it would be impossible to purchase the level of care which has been assessed on their need that we have now.”

“Firstly, it looks as if personal budgets are being foisted on us whichever way you read these proposals. As a single parent carer I do not have the time or the energy to become an employer/ do additional accounts etc, the last thing I need is additional responsibilities in the interests of self preservation and my ability to carry on caring.”

46. There were a further number of comments around the proposed service offer including:

“There are still issues with the 'substantial' category and receiving a timely offer of support.”

“it depends on what providers offer and how it is managed, surely if they are providing a service for people they have to be controlled and it has to be maintained?”

“Allowing personal budgets to be sent spent on things like cinema trips by families who could well afford this is really quite worrying. As I said I’ve seen parents asking for ideas on social media of what to spend their personal budget on many wanting to spend it on frivolous things and not in conjunction with their young person. I warned about this several years ago and it has not been managed well.”

“I like the idea of the short breaks card.”

“I am not convinced that the discount card would be used by families with similar children.”

47. The next section of the questionnaire asked respondents about the naming of both the Jigsaw and Buzz Network service. Respondents were asked whether or not they felt the name should be changed. For the Jigsaw service, 65% of respondents felt there should be no change to the name of the service compared to 35% that felt the name should change. For the Buzz Network service, 68% of respondents felt there should be no change to the name compared to 32% that felt the name should be changed. Figure 11 below shows these results.

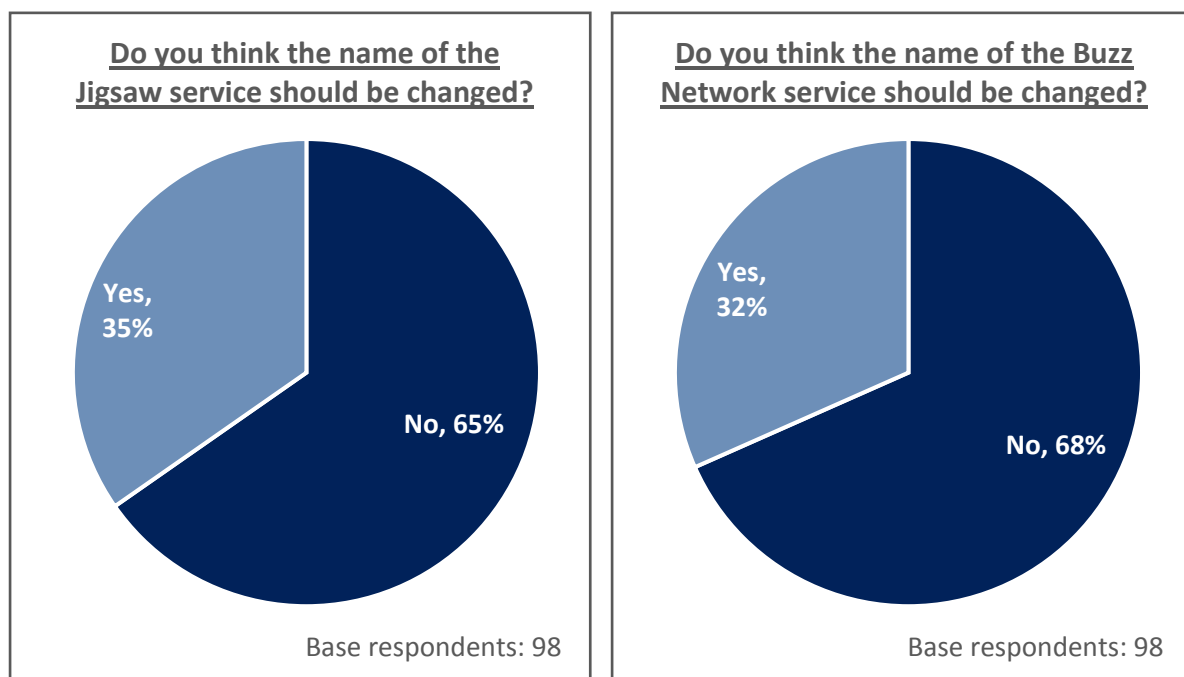


Figure 11

48. Respondents were then given the opportunity to suggest any new names for the services if they felt they should be changed. The following suggestions for names for the services were recommended.

Jigsaw name suggestions:

Buzz Network Plus

Children with Additional Needs Service (CANS)

Children's support services team

Gateway

Something along the lines of children services

Southampton Childrens Social Services

step-up

Buzz network name suggestions:

Child support voucher scheme

Children and Family Short Break Service

Gateway

Inclusivity network

We need something nationally recognised like the Hampshire Gateway

Connections

49. In addition there were comments that did not specifically provide a name suggestion, but made a suggestion on how names for the services should be devised. The following suggestions were made.

Jigsaw service name comments:

Because what does 'Jigsaw' really mean? Can be misleading or misinterpreted by families.

I think jigsaw is quite fitting because it is like fitting a puzzle together, however to reevent a service in my opinion you need to demonstrate change and wha better way than the name. But I also think there should be some sort of pack or letter than explains the service, what's available and the aims.

It should say what it does jigsaw doesn't really explain anything. The criteria for intervention should also be clearer.

Just call it what it is or does.

No but this name is not touchable

Something that has what it is in the title.

Something that reflects the service. I haven't got a name in mind.

Buzz Network name comments:

Again, call it what it does.

Buzz doesn't mean anything to me to be honest, and like I said with jigsaw to reevent a service and show change the best way to start is to change the name in my opinion.

A title that fits with the service and young people's needs makes its more transparent and easier to understand Jigsaw and buzz network have no relation really to the service offer and is confusing to parents and probably the young people.

As I was involved directly in choosing the original name I think it should be changed as this service no longer reflects the values and that it was set up for. I realise that there is less money available because of government cuts but removing a high level of support to some

families will literally be a disaster for them. As bus network was named when we had true funding and government ring fenced backing it would be tainted to carry on using it in the current climate. The management of the personal budgets under the bus network has frankly been appalling I have seen parents constantly asking on Facebook what to spend their budget on and these budgets have just been handed out willy-nilly without much

Something that reflects what it is, most people don't know.

The name Buzz Network doesn't mean anything other than now being familiar. It was linked with the old parent forum now which has now been disbanded so a fresh name that says what it does on the tin is needed.

50. The next part of the questionnaire asked respondents whether there were any alternatives that the council should consider. In total, 22% of respondents felt that there were alternatives that the council should consider. 78% of respondents felt there were no alternatives to the current proposal that should be considered.

51. Respondents were invited to share any alternatives or suggestions that they felt the council should consider. Figure 12 shows the themes of comments surrounding suggestions and alternatives and the number of respondents that mentioned these in a question within the consultation.

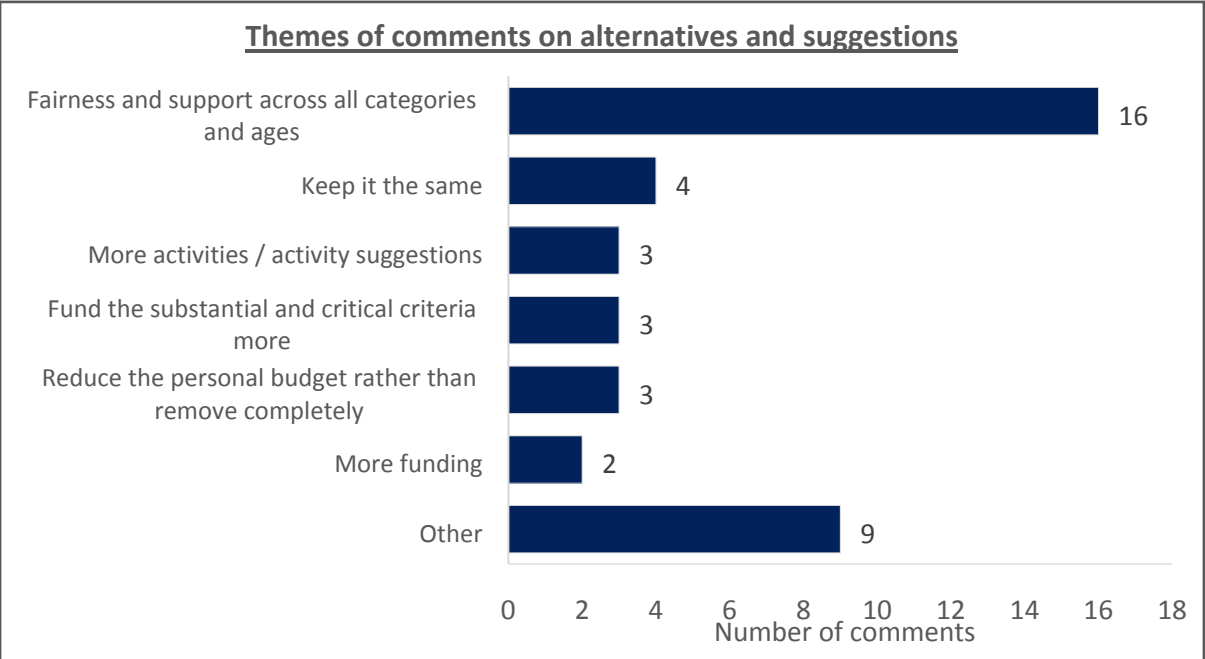


Figure 12

52. The most frequently reported suggestion or alternative to the current proposals was to be fair and provide support across all categories and age groups. In total 16 people raised this suggestion and the following comments provide examples of these:

“It needs to be fair across all disabilities and learning and care needs”

“It seems like we would be penalised for not being so needy when we are a family that would actually benefit from more help and support.”

“Unfair to lose personal budget for families with low or medium disabilities, maybe a lower budget for them would work better.”

“What is out there for profoundly disabled children to access the community, there are lots of services for those with moderate learning disabilities.”

“I am quite astounded that you seem to be sending the message that only children with critical needs require integrated support from health and social care working closely together.”

53. There were four respondents to the consultation that wrote that they would like the service to remain as it is currently. Comments included:

“Why are you changing something that works for most families.”

“I feel the way it is run at the moment is the best solution for all. By doing it the new way you're actually putting children in two categories which could be unfair on each child”

“Option to keep a personal budget at the medium Level”

54. Three respondents suggested that there should be more activities available or suggested activities themselves. For example:

“There needs to be some analysis of what young disabled teens who are cognitively able would like as a service. One of my service user recently asked me to help him get 'out and about”

“I hope there is activities for the early years group too. At the moment all the short break activities are for over 5yrs!”

“I think it is important that play schemes for complex children are still very important. I fell these should be accessible from the same age as they go to school. Offer for things that families can do together or just child + siblings.”

“Whilst I agree Southampton does have a good Sure Start offer (0-5), the younger children who access the Short Breaks service (and those who will continue to access it) should still have access to applicable and age appropriate activities.”

55. Three respondents felt that the substantial and critical criteria should be funded more. For example:

“Funding should only be given to families/children who meet the Substantial and Critical eligibility criteria”

“Perhaps remove the personal budget for those who have minor needs on the SEN register, limit funds to those with a Statement/EHCP or significant need , otherwise keep the old systems in place.”

56. Two respondents felt that the service should be better funded. Comments included:

“Adding funding to services that are a lifeline to families rather than cutting budgets.”

“More money available, SCC should be proactive as other local authorities are in topping up the shortfall in social care funding from other sources, not sitting waiting for more money to come to them.”

57. In total, three people felt that perhaps rather than losing their personal budget completely it would be better to still receive a smaller amount. Comments included:

“Do more direct payments with smaller amounts rather than not being open about this option and people feeling that have to spent almost double the amount on picked services”

“I agree that the amount of the personal budget may be too high at the current yearly amount awarded but feel that a personal budget at a lower amount is still very much needed.”

“Unfair to lose personal budget for families with low or medium disabilities, maybe a lower budget for them would work better.”

58. There were a further 9 suggestions and alternatives supplied by respondents to the questionnaire. These included:

“The age of the carers should be considered, young people may not want to be seen with older carers. Also issues of diversity of carers should be considered regarding cultural needs.”

“I think there should be some sort of pack to welcome people to the service as a whole. Explain the difference between the services and what is available to them.”

“A photo ID card for the service user which goes with the child so any carer can take it and it can't be misused”

“I also now believe because of the punitive cuts that councils are having to enforce because of government cuts, that families Who have higher incomes and could actually do without a personal budget and provide or pay for what their child needs to access could be a way to move forward and provide for those families who are on much lower incomes or in work poverty or on state benefits. It is ridiculous at the moment that families who may have an income of £50,000 for example can still access personal budgets because they couldn't quite afford to provide and access what their child needs by paying for the services of which there are plenty if you have money.”

“Will there be a transition period, especially for families who will find themselves receiving less financial help under the new 'system'?”

“I also find it amazing that the resources offered by Jigsaw are not available online! At the very least, within budget constraints, Jigsaw needs a dedicated website or a page or two about who they are, what they do and resources (or links to these) that parents/carers can read and hopefully download. For instance, the tips on good sleeping habits. Why wouldn't that be made available online? The tips about direct payment, why isn't that online? Toilet training, etc. I could go on and on.”

“Stop paying the very expensive care agencies to provide the short breaks. Our experience has been that they will claim their fee, however not provide a service. Our son did not get support for nearly one year without support.”

“Should be able to be done online as I know there is not much staff to cover everyone”

59. The next question within the questionnaire asked respondents what impact the proposals would have on them or their community if they were to be implemented (See figure 13). Overall, 2% of respondents felt there would be no impact at all and 16% felt there would not be much of an impact which suggested around 19% of respondents felt there would

be little impact. In comparison 73% of respondent felt the proposals would have a moderate or significant impact on themselves or their community. Of this, 39% felt there would be a moderate impact and 34% a significant impact.

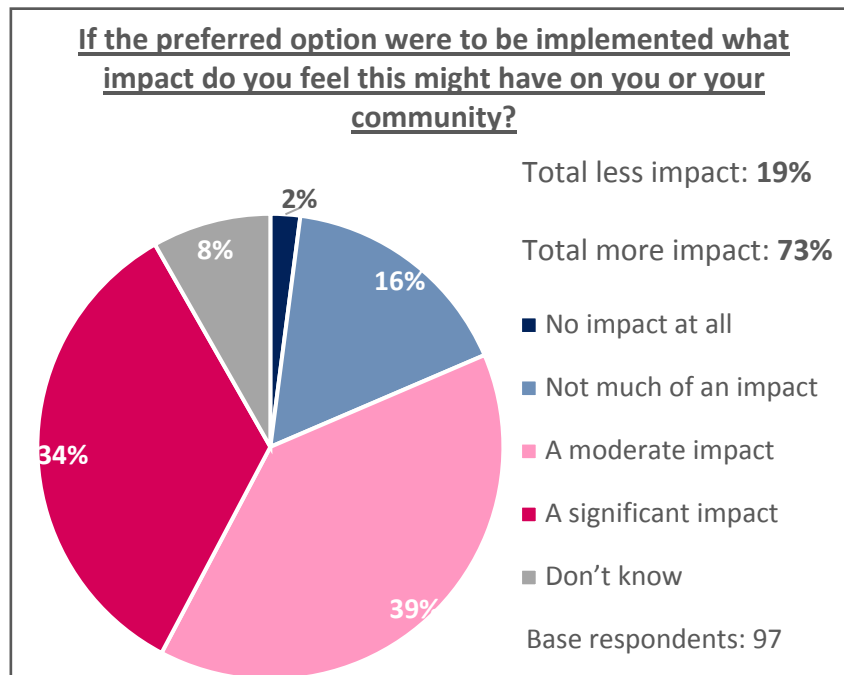


Figure 13

60. Respondents were then asked to outline any personal impacts or equality issues that may have been overlooked in the formation of the proposals. Figure 14 shows the themes of comments provided and the number of people that provided a response on this within the questionnaire.

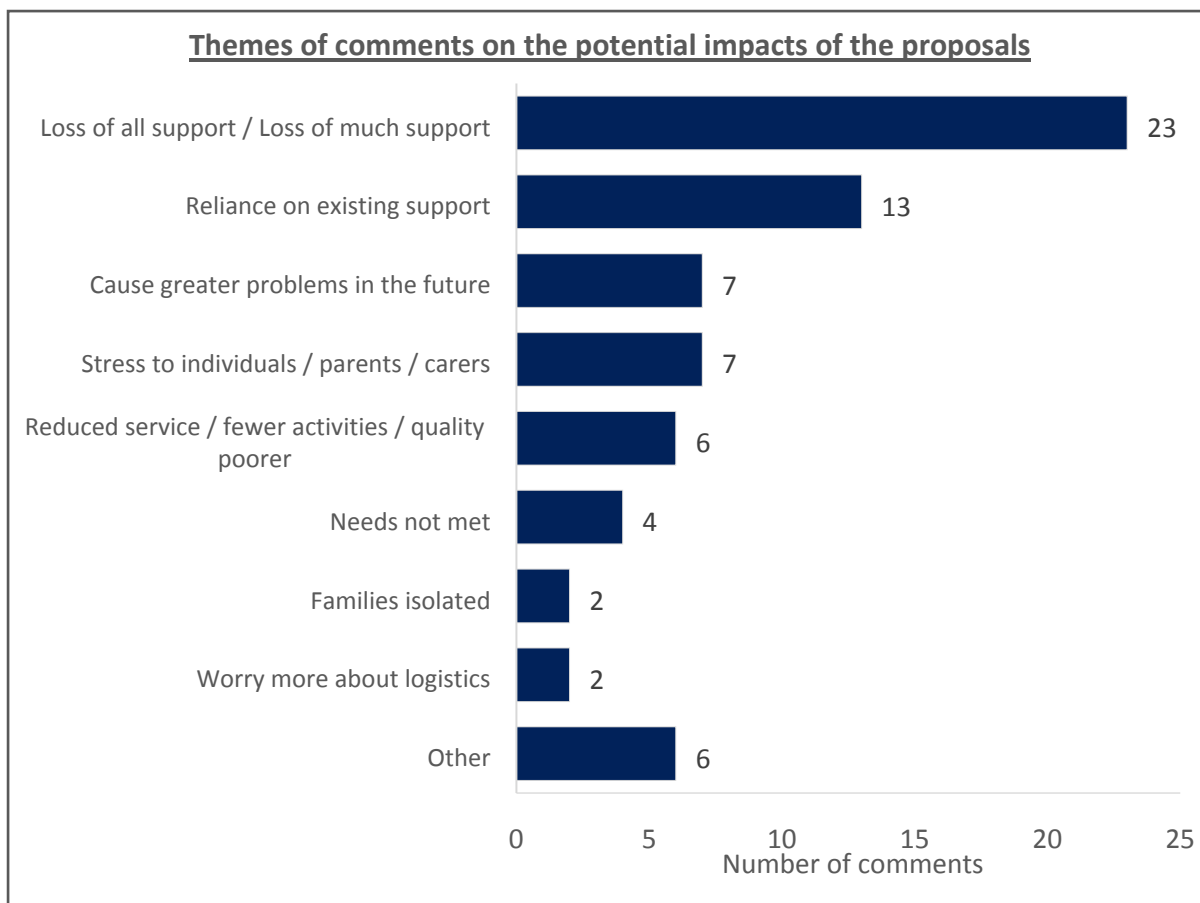


Figure 14

61. The most frequently written concern and impact of the proposals was the loss of all or much of the support that the individual currently receives. A total of 23 respondents mentioned this within a comment on the questionnaire. The following examples encompass the sentiment of these comments:

“Lots of disabled people would fall between the cracks and not get any choice in what they are offered, (or get no help at all), if they are not classed as the most severely disabled.”

“Reading the criteria it is likely my son will meet the Medium level and therefore lose the personal budget we have used to enable him to enjoy 1:1 support. This allows him to feel independent and allow for us to undertake activities with our other child that is too difficult for our son.”

“My son accesses Mencap and for him this is a life line I honestly don’t know how he or we would manage if he wasn’t able to attend, he won’t care about changed or availability.”

“Please, please don't affect my son's respite and his short breaks residential respite. Without this he couldn't function and I couldn't function!”

“I know there’s a need to reach families that need help but just worry for some that are already receiving help that then may be taken away.”

62. In total, 13 people wrote about their reliance on the service currently and how this would be impacted by the proposed changes. The following comments are examples:

"You must understand that for families like mine who have completely relied on the support and overnight breaks that we get from Jigsaw to change at this juncture in time to something different before going into adult services is completely unreasonable unfeasible and I would not hesitate to take action about it"

"The only reason I can work is through the support I get through DLA Buzz direct payments and having a carer who I top up her hours so I can work full time."

"This service is a lifeline to a lot of families and helps families feel valued in the role they do on a day to day basis."

"everyday people that rely on the services that will be affected a by a great deal."

63. Seven people expressed concern over a reduction in support leading to greater problems in the future. Examples include:

"we will end up with more families in crisis which will lead to more of these children/ young people in boarding schools or care."

"This will have negative impact upon the community, as they live in the community and will be a burden rather than a useful asset if they do not receive the help they need."

"Families have to get to crisis point before they get additional appropriate support from social services."

"To get a respite would help so much to recharge and continue what we do rather than becoming ill or any injuries would mean someone would have to come in and take over."

64. Seven people wrote about the stress that the proposed changes would cause the individuals, parents and carers. Comments included:

"Lots of money will be wasted making assessments, which will be instructive, and an invasion of privacy to what is already a stressful life with a child with a disability."

"I'm actually lying awake at night worrying about this ! I had one breakdown before we got our respite package I do not intend having another by having it taken away from us."

"He would not feel comfortable accessing groups due to the noise and his difficulties engaging with others due to his autism."

65. Six people spoke about the impact of proposals resulting in a reduced service, with fewer activities and poorer quality. Examples of quotes encompassing this theme include:

"I worry about whether there will be enough subsidised activities for my children's ages and needs, and where they will take place."

"it is a pity that SCC is downgrading the service they offer to MOST disabled young people."

"The money has helped us do so many fun things a lot of memories just worry without the budget if we could still make these memories"

66. Four people felt that the needs of the individual would not be met if the proposed changes were to be implemented. Quotes include:

“Funding across the city has been cut and support is being cut so to do this is another step in the direction of not looking after the most vulnerable people are disabled children and young people”

“It is only through a personal budget that many disabled people can have their needs meet, and the taking away of this choice is to put most disabled people in Southampton at a disadvantage”

67. There were two comments relating to families potentially becoming isolated as a result of the proposals. For example:

“They didn’t provide any dates over Christmas and Christmas was a nightmare because of it, we were unable to go out of the flat for one day...therefore we spent more than a week without getting any fresh air as I have very limited family support and my son won’t even walk to the corner shop”

68. Two respondents expressed concern over managing the logistics themselves as a result of the proposal. For example:

“One of the benefits of the personal budget was not having to worry too much about logistics; the proposed changes restrict us a lot more.”

69. There were a number of further impacts that respondents raised in relation to the impact of the proposals. These included the following comments:

“Please remember that a large proportion of children with special needs can not manage change, and if you take away services that they currently access or allow them to access through buzz, jigsaw or the payments then this could put a huge pressure on the child and their families”

“You will need to carefully consider the impact on the children themselves. For some, it has taken years to build trusting relationships, e.g. with care workers and to have that suddenly taken away can lead to some serious repercussions.”

“some families who currently receive the buzz fund may not be able to afford doing things without this help. For example i pay for my son's swimming lessons with his and if i didn't receive the buzz budget i wouldn't be able to afford to take him. And on other days out so it really helps us.”

70. The final question relating the proposed short break service offer asked for any further comments that the respondent may have. When analysing the free text comments from the questionnaire, all comments from all questions were analysed and categorised together. For example, if a respondent commented on the eligibility criteria in this free text question that comment will have been regrouped with all other comments on the eligibility criteria to ensure that an accurate picture of opinions can be calculated across the entire consultation. A lot of the comments submitted within this question related to a specific part of the consultation and have therefore been included and counted in the themes of comments reported on the proposed criteria, service offer, alternatives and suggestions and impacts.

71. Themes of comments for the question “any further comments” included:

- a. There were 13 people that commented positively on the proposals generally.

- b. There were 7 people that commented on the consultation process. These comments will be discussed later.

72. The positive comments generally on the proposals included:

"I appreciate all the hard work the SEND team and the parent carer forum have put in to this proposal. There certainly is more of a parent and young person's voice in Southampton over the last year or so."

"I can see clearly it needs to change. I fully understand that."

"I am very excited by the proposal. As a social worker in young people's palliative care I am frustrated by the length of time for assessment and the lack of opportunities for many young people who are life limited."

"I think it's amazing that the SPCF has worked so hard to include every family no matter how little or how much affected. It is definitely time that Southampton families in need of help, support & respite breaks get what they do desperately need. The Southampton parent carer forum is incredible & long may it continue."

"From what I have observed myself the system definitely needs redefining as some families in Southampton do have access to loads of help whilst everyone else struggle alone."

Public sessions feedback

73. A total of 52 parents/carers attended the sessions as well as 10 representatives from short break providers or schools. A Facebook Live session was held on 8th February and has been viewed 677 times. Full details of all session dates, venues and attendance is provided below.

| Date & Time | Venue | Number of attendees |
|------------------------|-------------------------------|----------------------------|
| 22/11/17, 10am-1pm | Rose Road Association | 8 |
| 28/11/17, 11am-1pm | Civic Centre (Providers only) | 7 |
| 11/12/17, 10am-12 | Springwell School | 2 |
| 10/01/18, 10am-12 | Great Oaks School | 3 |
| 15/01/18, 6-8pm | Southampton Mencap | 3 |
| 24/01/18, 5-7pm | Civic Centre | 6 |
| 29/01/17, 1pm-3pm | Rose Road Association | 10 |
| 07/02/18, 10am-12 | Rose Road Association | 20 |
| 08/02/18 | Facebook Live | 677 views |

74. The main areas of feedback from the sessions was:

- Negative views on the use of the term 'critical' within the 4 eligibility levels. 'Complex' was suggested as an alternative
- Suggestions of closer working with other local authorities to have the same/similar short break offer
- Concerns about the personal budget no longer being available at the medium eligibility level and the impact this would have on families

- Questions around how the proposals (if agreed) would be implemented and whether new assessments or re-assessments would be required
- Suggestion that schools could be used to provide more short breaks at the weekend and during school holidays
- Lack of short break provision for children aged under 5 years
- Concerns about whether mainstream community activities would be sufficiently skilled to support children with disabilities or additional needs, particularly those with autism.

75. Questions around how the quality of community activities will be monitored.

Other feedback

76. Three written responses were received separately from the online survey or consultation sessions. Two were from short break providers - Royal National Institute of Blind People (RNIB) & Southampton Mencap - and one was a transcript of a Facebook conversation and poll of families on the proposals.

RNIB

77. The response from RNIB focussed on the proposed eligibility criteria. They expressed strong disagreement with the proposal and were concerned that the eligibility banding (low, medium, substantial & critical) would introduce unfair barriers to accessing short breaks and make a decision about the person before an assessment is put in place. RNIB did not comment on the proposed service offer or whether the service names should be changed.

Southampton Mencap

78. The response from Southampton Mencap was broadly supportive of the proposals. However, they expressed concerns about some aspects of the new eligibility and service offer, in particular:

- The effect on families of the removal of personal budget option for those at the medium level
- The significant work involved in implementing the proposals
- The challenges of supporting mainstream activities to apply for funding and to adapt their services
- The importance of specialist playschemes continuing to be available

Facebook Poll and Feedback

79. A poll was set up on Facebook during the consultation by a parent interested in finding out people's views on the Buzz personal budget and One2One service. 136 people took part in the poll with the following results:

- The Buzz Budget of £200 really helps our SEN child and we want to keep this in the future – 103 votes
- The budget helps us taking our son on trips and fun activities that really help his condition – 20 votes
- The respite 1:1 service really helps our SEN child and we want to keep this in the future – 10 votes

- I currently receive the personal budget but would choose the 1:1 service if the waiting list was shorter – 3 votes
- I don't need the personal budget or 1:1 service and would not miss it if it was scrapped – 0 votes

80. The main areas of feedback were:

- Concerns about the long waiting list for 1:1 support through Buzz
- Concerns that removal of the personal budget option would reduce the choice available for families

81. Positive feedback about the 1:1 service

Feedback on the consultation process and approach

82. The council is committed to make the whole consultation process as transparent as possible. As a part of this, any feedback on the consultation process itself received during the course of the consultation is summarised in this section.

83. Overall, out of the 99 people who answered the consultation questionnaire, a total of 7 people commented on the consultation process itself.

84. The comments made regarding the consultation process are shown below:

Without full disclosure of the preferred option and what it entails this consultancy is flawed and is open to challenge due to not being sufficiently informed of the impacts of the choices offered.

Alternative what?

I can't really comment until I know what the levels correspond to in terms of the support offered.

I hope the local authority does its utmost to get this consultation out there so that it can gather as many opinions and ideas as possible. I have only become aware of it via the parent carer forum - nothing at all from the Council or from Buzz network.

I'm extremely concerned that all families are not being written to directly as well and you are solely relying on social media and web based media to spread this message. That is not full and proper consultation and could in fact land you in very hot water. I say this as a very long-term user of social media and electronic communication, however I know that family is on very low incomes are relying on pay-as-you-go phones to access any sort of social media and often cannot access web based content unless they either borrow or access computer facilities through libraries or through family and friends. Unless you make family is directly away through the post as well but particularly those who are in these positions then you are not consulting fully. The rationale for these changes has not been explained fully and frankly it should be in plain English and with more frank explanation of why you need to change these things. I am under no illusion whatsoever that whatever Parent feedback you get on this you will take absolutely no notice whatsoever. As I discovered the trouble is that parent forums become another home of the council and are not a fully Acting as a critical friend they are just an extension of bringing in change by the council but they have already been convinced to do it rather than acting as a critical friend. I'm exhausted by everything that's going on punishing families of disabled children and young people and I will be watching this very

closely and challenging any legality Around changes but also assessment. You assert that you are not meeting legal requirements at the moment but you don't "the appropriate parts of the Act around changes but also assessment. You assert that you are not meeting legal requirements at the moment but you don't "the appropriate parts of the Act, nor do you explain where you think that you are not acting legally. I am very cynical about this whole exercise and it's also not been publicised outside of social media and web based media which is extremely disappointing given all the feedback that has gone on in the past. The communication from Jigsaw sensually about changes of manager about changes in staff have been abysmal and communication from the bus network has all but stopped for many people with databases not been kept up-to-date and people slipping off the radar.

The impact scales did not allow people to identify if positive or negative impact. Also I felt I had to respond 'neutral' in places as it was not a simple yes or no answer, more of a yes AND no answer.

There needs to be more clarity on the short breaks proposals as to what they would actually mean to current members as I don't know whether I would come into the category of less/ more help than currently provided

Conclusion

85. The consultation sought views on proposed changes to the short break service offer for children with disabilities or additional needs and proposed changes to the eligibility criteria which allows access to these services.
86. In total, 99 respondents completed the questionnaire which ran for 12 weeks from 21 November 2017 to 12 February 2018. In addition, 52 parents / carers attended sessions on the consultation as well as 10 representatives from short break providers or schools.
87. The demographic breakdown of respondents to the consultation questionnaire showed that whilst certain groups were less represented than others, there was still engagement across a broad ranges of groups.
88. Overall there was a higher level of agreement (74%) than disagreement (14%) for the proposed eligibility criteria and also a higher level of agreement (69%) than disagreement (12%) for the proposed service offer.
89. The most frequently mentioned themes of comments in the questionnaire included: the need to have clear criteria and assessment; the need to take into account family situation during assessment, the wish for a fair level of support across all categories and the potential loss of support that individuals may face.
90. In conclusion, this consultation allows Cabinet to understand the views of residents and stakeholders on the proposals that have been consulted on. Therefore it provides a sound base on which to make a decision.

| Key change/activity | Detail | Relevance to eligibility criteria | Impact | Apr-18 | May-18 | Jun-18 | Jul-18 | Aug-18 | Sep-18 | Oct-18 | Nov-18 | Dec-18 | Jan-19 | Feb-19 | Mar-19 | Apr-19 | May-19 | Jun-19 | Jul-19 | | | | | |
|--------------------------|---|--|--|---|--|--------|---|---|--------|--|--------|---|--------|--------|--|---|--------|--------|--------|-----------------------------------|--|--|--|--|
| New eligibility criteria | Proof of DLA or PIP required | Low | Families will be provided with information and advice about local services and if necessary, provided with information to make | A small number of families may lose their personal budget. The actual number is difficult to identify as information about DLA/PP | Request proof of DLA/PIP | | | Proof of DLA/PIP standard requirement for all requests for support through Buzz Network | | | | | | | | | | | | | | | | |
| | | Medium | All Buzz Network members will be asked to provide evidence of their DLA. | 1250 | Short | | | | | | | | | | | | | | | | | | | |
| | | Substantial | | | | | | | | | | | | | | | | | | | | | | |
| | Access to services via assessment | Low | No assessment required. The right to request an assessment is an option if families feel there is a significant impact on them. | up to 5,000 | Information, advice and guidance provided to families identified at the Low level. | | | | | | | | | | | | | | | | | | | |
| | | Medium | No assessment required. Proof or DLA or PIP required. The right to request an assessment is an option if families feel there is a significant impact on them. | Estimated to be 1350 | Information about enhanced mainstream services provided to families identified at the Medium level. Advice and guidance also provided | | | | | | | | | | | | | | | | | | | |
| Substantial | | Existing assessment approach to be expanded to consider a child's disability and additional needs. | Estimated to be 150 | Assessment process reviewed and amended. Staff training. | | | | Assessment process in place and teams identifying families and accepting referrals | | | | | | | | | | | | | | | | |
| Complex | | Current assessment approach to continue | 285 | Current assessment and referral process continues with the wider range of eligible needs included | | | | | | | | | | | | | | | | | | | | |
| Personal budgets | Personal budgets are provided according to eligibility criteria | Low | No entitlement to a personal budget | A small number of families may lose their personal budget. The actual number is difficult to identify as information about DLA/PP | Families provided with information and advice | | | | | | | | | | | | | | | | | | | |
| | | Medium | Low level of personal budget available to 31 March 2019 as new services are developed | Estimated 500 of 1250 families receive reduced personal budget | Low level of personal budget available while community service developed. | | | | | | | | | | | Personal budgets cease to be available. | | | | | | | | |
| | | Substantial | From 30 September 2018 support provided by Children Services. Those identified and engaged in Buzz Network; 1 April 2018 - 31 August 2018 provided with low level personal budget. | Estimated to be 150 of 1250 Buzz Network families | Low level of personal budget available while Children services are trained and new processes developed | | | | | Personal budgets and access to assessment be provided through relevant children services/teams | | | | | | | | | | | | | | |
| | | Complex | From 1 April 2018 existing Jigsaw families will receive all their personal budget and support through Jigsaw service assessment and review process | Existing 255 families and an additional estimated 30 families will join the Jigsaw service | Case reviews completed to assess family circumstances including short breaks allocations. | | Personal budgets for short breaks, where relevant are included in the overall support provided to families. | | | | | | | | | | | | | | | | | |
| Short break services | Improved information about accessible mainstream services | All | Families will be able to find out about mainstream services through an improved Local Offer | 7,000 children | Develop a new improved Local Offer, coproduced with families | | | Ongoing development and provision of improved Local Offer | | | | | | | | | | | | | | | | |
| | Enhanced mainstream services | Medium | Mainstream services will be able to offer additional facilities and activities for families who hold a Short Break Plus Card (or similar identification) | Estimated to rise to around 1350 families | Continue to grant fund a range of community activities | | | | | Seek applications from mainstream services to provide enhanced services | | | | | A range of enhanced mainstream services available to families with a Short Break Plus Card (or similar form of identification) | | | | | | | | | |
| | | | | | Working with families and providers sources and develop services alongside the setting up of a grant or contracting mechanism for providers to make applications for funding | | | | | Transition existing services to new funding mechanism | | | | | | | | | | | | | | |
| | Contracted services | Substantial | Specialist services contracted to offer one to one support, outreach and overnight residential services | Estimated 150 | Procurement process undertaken | | | | | | | | | | | | | | | All contracted services in place. | | | | |
| | | Complex | | 285 families | | | | | | | | | | | | | | | | | | | | |
| Concessions | All | Provide additional support to families & children | 7000 | Continuous negotiations with local companies and providers to secure concessions. | | | | | | | | | | | | | | | | | | | | |
| Short break card(s) | Develop Short Break and Short Break Plus cards (or similar form of identification). | All | Appropriate means of identification will assist families to receive concessions when accessing services | up to 7000 (1350 for Short Breaks Plus card) | Set up task & finish group including parent representatives | | Co-design and develop Short Break Card(s) or similar form of identification. Start to engage local businesses and companies | | | | | Continual engagement with local companies and businesses to improve the benefits of the Short Break card(s) | | | | | | | | | | | | |

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Short Breaks case study – Lily Low

Lily is 12 years old and lives with her mum and older brother. Lily has dyslexia and needs some additional support at school with reading and writing. She sometimes feels frustrated by the difficulties she has in English class and needs some additional time during examinations on account of her dyslexia. She is able to participate in the same types of activities as her peers.

| Current Service | Future Service |
|--|--|
| <p>Lily and her family can access universal services.</p> <p>Lily’s parents are not aware of the Buzz Network Short Breaks offer.</p> <p>Lily’s parents don’t currently know about the SEND (Special Educational Needs and Disability) Local Offer Webpage on the Southampton Information Directory Website.</p> <p>The recent Joint Local Area SEND Inspection report highlighted that the SEND Local Offer online tool is outdated and has some gaps and that very few parents know what the local offer is, relying on front line practitioners to signpost them to services.</p> | <p>Lily will continue to access universal services.</p> <p>The Local Offer will be updated and publicised widely to enable families to have easy access to information on the suite of mainstream clubs and activities in and around Southampton, including school breakfast and after school clubs, school holiday activities and events, as well as information on processes, pathways and support services available in the area.</p> <p>Lily’s parents (all families) will be able to find out more at the forthcoming Southampton Local Offer Live Event running on 10th March 2018.</p> |

Short Breaks case study – Malak Medium

Malak is 6 years old and lives at home with his mum, dad and two younger siblings. Malak received a diagnosis of autism and ADHD last year. He can be very energetic and is not always aware of dangers around him, being very unpredictable in his behaviours. He has found the conformity of school difficult as he is getting older now that the curriculum has moved away from play based activities. He has recently undergone an assessment for an EHC (Education, Health and Care) Plan and his parents are considering whether his needs might be best met in a special education provision once he has finished infant school. They have recently been awarded the middle rate care component for DLA (Disability Living Allowance) and the low rate for mobility.

| Current Service | Future Service |
|--|--|
| <p>Malak’s family are signed up to the Buzz Network where they have access to news and updates on services available.</p> <p>Malak attends specialist play schemes which allow the family breaks from their caring responsibilities on Saturday afternoons and during school holidays.</p> <p>Malak attends a swimming group once a fortnight, commissioned specifically for children with additional needs. Malak’s family would like him to attend this group more regularly but it is a very popular activity for families so available sessions have been shared out to enable all families who would like to benefit from this offer to do so.</p> <p>Malak’s family also received a one off personal budget of £400 this year, intended to support Malak to access further activities that are of interest to him. Last year they received £600 but due to the increasing popularity of this option, the amount has been reduced to enable other families to receive this too. His family are required to set up a separate bank account and provide the short breaks team with evidence for all of the spend of this money, proving that it has been used for short breaks. Malak’s family feel that this is a lot of hassle for such a small amount of money which is likely to reduce again as more families join the network.</p> <p>Malak has a Buzz Network card which can be used as evidence for concessions at a very select number of places of interest e.g. Marwell Zoo.</p> | <p>Malak’s family will continue to receive news and updates through the Buzz Network because the family are in receipt of DLA.</p> <p>Malak’s family will receive a new Short Breaks card that will be recognisable by a broader range of places of interest whilst also offering a range of discounts and concessions negotiated across the city.</p> <p>Malak will still be able to access play schemes and grant funded community based activities e.g. swimming sessions.</p> <p>Malak’s family will no longer receive the one off Buzz Network personal budget of £400 a year. However, Malak will now benefit from being able to access a greater range of enhanced/adapted mainstream activities near to his home (Southampton) that can support his needs.</p> |

Short Breaks case study – Maddie Medium

Maddie is 8 years old lives at home with her parents and 3 siblings. She has a diagnosis of ADHD and also has sensory processing difficulties which means she can find some environments, particularly those that are crowded, with bright lights, very overwhelming. This can sometimes result in behaviours that challenge. Academically Maddie is very able, and with some additional support, behaviour strategies and reasonable adjustments in school, she is able to manage well in a mainstream settings. Her parents report her behaviours at home to be challenging as the home environment does not have the same structure as school and that is difficult to give her the attention she requires as there are 3 other siblings. Maddie qualifies for the low level for the care component of DLA.

| Current Service | Future Service |
|--|---|
| <p>Maddie’s family could currently access the Buzz Network but have chosen not to because then enquiring, they established that the play scheme element of the offer, is primarily aimed towards supporting children/young people with complex or multiple needs.</p> <p>Maddie would like to attend the same clubs as her siblings but mum has been told that she cannot join because there will be a requirement for more dedicated staffing to support Maddie’s additional needs. The personal budget would not cover this and currently the staff in the settings are not trained to support young people with ADHD. Mum can’t get Maddie to any of the Active Nation sessions which are grant funded through the Buzz Network because the timings of these clash with the clubs that her other children attend.</p> | <p>Maddie’s family will continue to be eligible for support through the Buzz Network because the family are in receipt of DLA.</p> <p>As part of the new proposal, mainstream activities/clubs will be able to apply for funding to support with things like increasing staffing levels or for financial help to cover the cost of training for staff to learn skills and strategies to enable them to support clients with SEND and ultimately become more inclusive. This will expand the clubs and activities available to families in Southampton and give more opportunity for children with additional needs to take part in activities in their communities with their mainstream peers.</p> |

Short Breaks case study – Sally Substantial

Sally is 14 and lives at home with her mum and dad and two younger siblings. At age 11 Sally was diagnosed with Asperger’s syndrome, a high functioning form of autism. She has recently received a diagnosis of anxiety through CAMHS and has started taking medication for this. She is academically very able but her condition has impacted on her attendance at school. She struggles with change in routines, transitions, and in her social communication. She gets frustrated when she cannot communicate her needs successfully or has had an unexpected change in her routine and this often results in the presentation of behaviours that challenge. These behaviours can include high levels of aggression towards herself (self-harm) and others, specifically mum and staff supporting her at school.

| Current Service | Future Service |
|--|--|
| <p>Sally has been open to social care teams for short term intervals when her aggression has been so severe that it has presented as a safeguarding concern (significant risk of serious harm to self or others).</p> <p>Sally and her family can access the Buzz Network for non-assessed short breaks but the amount of money available through a personal budget at this level is not felt to be enough to enable the family to employ a support worker to enable the building of a positive and trusting relationship with Sally. The family used to use one of the commissioned one2one services but due to staff turnover, the worker kept changing and this led to an escalation in incidences of challenging behaviour.</p> <p>There are play schemes available but Sally’s parents feel that these are for “more severely disabled children” – they do provide Sally with a peer group and feel that the other children would be very vulnerable if Sally attended. Sally says that she just wants to be able to do the same things as other girls her age.</p> <p>The only way to get more Short Breaks is through JIGSAW (Children with Disabilities Tram) but a referral has previously been made to this team and Sally does not meet the criteria because she does not have a learning disability.</p> <p>Sally’s family feel at crisis point.</p> | <p>Sally will continue to be open to social care teams in periods of increased risk to self or others but the relevant social care team will be able to complete a short breaks assessment tool as part of their input. This request will go to the short breaks panel which will assess in detail the longer term support that the family require to enable them to continue to sustain caring for Sally’s complex needs.</p> <p>If eligible, Sally’s family will be given a Personal Budget for the purposes of enabling the family to have short breaks from their caring responsibilities, and enabling Sally to take part in meaningful and relevant social activities of her choice.</p> <p>A personal budget is a clear, upfront amount of money identified by the Local Authority that can be used to arrange short breaks. The amount depends on an assessment of individual needs and can be managed in a number of ways:</p> <ol style="list-style-type: none"> 1. Direct payment – Examples of how this can be used include; To employ a person who can care for Sally overnight, in the home or in the community, to pay for play scheme sessions or other activities and days out or to purchase specialist activities that enable improved access to activities in the community. 2. An arrangement whereby the LA holds the funds and arranges the support 3. Third party arrangements – where the money is paid to an individual or organisation to manage on the families behalf. 4. A combination of the above. <p>This will be reviewed at least 6 monthly by the Short Breaks Team.</p> |

Short Breaks case study – Charlie Critical

Charlie is 7 years old and lives at home with his mum and older sister Chloe. Charlie was born prematurely and suffered brain damage at birth leaving him with complex disabilities. He has cerebral palsy and uses a wheelchair. He cannot sit unaided, he has no movement in his legs or right arm and has only very basic communication skills. Charlie relies on adults for all of his care needs including feeding, washing and dressing. He doesn't sleep well so mum is up frequently in the night with him to adjust his position or attend to his care needs. This has a significant impact on mum as a lone parent.

| Current Service | Future Service |
|---|--|
| <p>Charlie is open to the JIGSAW Service, a multi-agency health and social care team for children with disabilities.</p> <p>Charlie's family is able to access multiple services through this team, including a social worker, a learning disability nurse and occupational therapy.</p> <p>Charlie's social worker has carried out a short breaks assessment through a resource allocation tool which takes into consideration the impact of Charlie's disability on both him and his family. Charlie's family have been allocated a £7000 personal budget through the short breaks assessment panel. Charlie's mum has chosen to spend £4000 on overnight short breaks at a specialist respite unit and she has taken the rest as a direct payment to employ staff to help Charlie access the community and activities that he enjoys, and to accompany the family for days out.</p> <p>In addition to this Charlie accesses specialist play schemes in the school holidays through the buzz network and mum has received an additional £400 direct payment through this service - this has been used to fund swimming lessons for Charlie.</p> | <p>Charlie will continue to be supported through the JIGSAW multi-agency health and social care team for children with disabilities.</p> <p>His family will continue to receive their assessed short breaks personal budget which is reassessed every 6 months.</p> <p>Charlie will still be able to access specialist play schemes by purchasing sessions through his assessed short breaks Personal Budget. It would be the expectation that the subsidy that Southampton City Council currently pay for these schemes will be deducted from the family's overall personal budget. Charlie's family may feel that the reduction that this would cause will have a significant negative impact on the family and may therefore have an updated short breaks assessment to account for this.</p> <p>Charlie's family will no longer be offered an additional £400 Buzz Network personal budget but there will be grants available to community organisations for adaptive equipment and activities, which will broaden the local offer of community activities that Charlie is able to access e.g. specialist swimming sessions.</p> |

Short Breaks case study – Christopher Critical

Christopher is 14 years old and lives with his grandparents. He is an albino and is totally blind. This means that he has no pigments in his skin. His hair is white and his eyes are very pink. He must not go out in the sun without complete sun block. He is of average intelligence and is very sociable. Christopher learned braille from a young age with support from a specialist teacher which has encouraged him to be independent. Christopher wants to take part in everything and he has little or no fear. If he is in a new situation he uses his hands to explore. He is becoming quite strong and determined and does not like to be told what to do. Because he cannot see things he wants to satisfy his curiosity by asking questions constantly. Sometimes Christopher can be seen rocking backwards and forwards and recently he has started throwing things when he has become confused and doesn't know what is happening. Christopher's grandparents are finding managing Christopher's needs increasingly difficult as he has become older and physically stronger.

| Current Service | Future Service |
|--|---|
| <p>Christopher is not currently open to social care services. A family engagement worker at his school made a referral to JIGSAW (Children with Disabilities Team) but he is not eligible because he does not have a learning disability.</p> <p>Christopher is open to a number of health services and receives support for his education through a specialist teacher for visual impairment, however, this support is not coordinated.</p> <p>Christopher and his family can access the Buzz Network for non-assessed short breaks. They currently choose to receive the £400 a year direct payment which is used to pay for activities that Christopher enjoys, such as swimming and bowling. Because of Christopher's visual impairment, his grandparents are required to accompany him to these activities which means that they do not get a break from the caring responsibilities and it frustrates Christopher that he cannot do things without them.</p> <p>There are play schemes available under the buzz network, but these are for children and young people with learning disabilities and Christopher does not feel that he fits into these. He wants to be supported in the community to help him build his independence and ultimately enable him hang out with peers.</p> | <p>Christopher will be eligible to receive services through the JIGSAW (Children with Disabilities) team where he will receive a multi-agency approach to meeting his needs.</p> <p>A short breaks assessment will be carried out and if Christopher and his families qualify for short breaks, they will receive a nominal personal budget amount which can be used to give Christopher's grandparents short breaks from their caring responsibilities, whilst enabling Christopher to take part in meaningful and relevant social activities of his choice.</p> <p>A personal budget is a clear, upfront amount of money identified by the Local Authority that can be used to arrange short breaks. The amount depends on an assessment of individual needs and can be managed in a number of ways:</p> <ol style="list-style-type: none"> 1. Direct payment – Examples of how this can be used include; To employ a person who can care for Sally overnight, in the home or in the community, to pay for play scheme sessions or other activities and days out or to purchase specialist activities that enable improved access to activities in the community. 2. An arrangement whereby the LA holds the funds and arranges the support 3. Third party arrangements – where the money is paid to an individual or organisation to manage on the families behalf. 4. A combination of the above. |



Equality and Safety Impact Assessment

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of the budget proposals and consider mitigating action.

| | |
|--|---|
| Name or Brief Description of Proposal | Consultation on four areas for children with disabilities |
| Brief Service Profile (including number of customers) | |
| <p>At present Short Breaks for disabled children are delivered across two different levels;</p> <ul style="list-style-type: none"> • for children who have been assessed by social care and determined to have a need for short breaks – this level of short breaks is commonly referred to as "assessed short breaks" or "Jigsaw (Children with Disabilities Team) short breaks" • for children who have not been assessed but have access to a "universal" offer of short breaks as a result of having a disability - this level of short breaks is commonly referred to as "Non-assessed short breaks" or "The Buzz Network (for all families of a child or young person with disabilities) short breaks". <p>At present around 1250 children with disabilities and their families are registered on the Buzz Network and around half this figure actually access non assessed short breaks. A further 150 receive an assessed short breaks package through Jigsaw.</p> <p>Short Breaks provide a break for the carer and allows the child/ young person to have a positive break with peers to attend an activity, scheme or overnight respite service. Many families opt to take their short break offer as a direct payment, which allows them choice and control relating to when and how they receive this break.</p> <p>A recent review of services identified a number of areas needing improvement to ensure services are equitable for all children with disabilities. The current approach provides a high level of support to some families, but restricted or no support for many other children and their families, who may have similar</p> | |

levels of need. The review also identified the need to change the way resources are allocated to ensure an appropriate level of support is provided to children and their families on the basis of need. The current eligibility criteria would not support changes in these areas.

The consultation proposals were:

1. To implement a new eligibility criteria to provide a clear, consistent and equitable means of determining access to disabled children's services, based around four levels of need: Low, Medium, Substantial and Critical.
2. To redesign the Southampton short break offer aligning this with the new eligibility criteria
3. To seek views on the future name of "Jigsaw"
4. To see views on the future name of the "Buzz Network"

The proposed eligibility criteria has four levels; low, medium, substantial and critical.

Low: The child has low level additional needs that parents are able to meet through universal services and a network of family and friends. Parents may require signposting to the SEND Local Offer for information, advice and guidance about the universal services available.

Medium: The child has additional needs where parents require support above what is available at universal level e.g. Special Education Information, Advice and Support, Benefits, carers rights and short breaks from caring through specialist play schemes and clubs, or enhanced/adapted mainstream provision.

Substantial: The child has a learning or physical disability that significantly impacts on a child or family's ability to function. The impairment, chronic health or life limiting condition have a substantial impact on the quality of the child and their family's life and child would be unable to achieve outcomes without support from targeted services, coordinated by a lead professional.

Critical / Complex: The child has Learning disabilities within the moderate, severe or profound range OR a severe physical (including visual and hearing), health condition or impairment which is life limiting, or significantly affects, or is predicted to affect, everyday life functioning or a child's access to education (e.g. in a wheelchair, has adapted living, requires total personal care support, requires communication aids) and their ability to achieve outcomes appropriate to their age related potential.

The funding for non-assessed (Buzz Network) short breaks initially was provided under the Aiming High for Disabled Children programme. This funding is now included in the overall funding envelope provided to the Local

Authority. The 2011 Short Breaks Regulations and Section 27 of the Children and Families Act 2014 require consideration by local authorities of whether services are 'sufficient' to meet the needs of families in their area including a duty to provide short breaks to children with disabilities.

In Southampton the Buzz Network budget is £480,000. This funding is used to deliver the following provision: direct payments, grant funded community activities, specialist playschemes and one to one outreach support.

The current budget for assessed Short Breaks is £935,000. This funding is used to deliver the following provision: specialist residential overnight services, outreach or support in the home and direct payments.

The changes proposed are intended to be cost neutral albeit distributed differently across the new eligibility levels. To enable proposals to be consulted on and plans to be developed and implemented following the consultation, the current contracting arrangements for the services have been extended to October 2018.

In October 2017 there were 1,249 children and young people registered on the Buzz Network aged between 0 and 19 years. The following provides some key information on age, ethnicity, gender and disability.

Age

| Age Group | No. C&YP | % of total |
|-------------|----------|------------|
| 0-4 years | 251 | 20.0% |
| 5-9 years | 419 | 33.5% |
| 10-14 years | 376 | 30.1% |
| 15-18 years | 203 | 16.3% |
| Total | 1249 | |

Gender

| Gender | No. C&YP | % of total |
|--------|----------|------------|
| Female | 313 | 25.1% |
| Male | 936 | 74.9% |
| Total | 1249 | |

Ethnicity

| Ethnicity | No. C&YP | % of total (known) |
|---------------------------------------|---------------------|---------------------------|
| White British / Irish | 644 | 79.7% |
| White Other | 31 | 3.8% |
| Any Mixed Background | 58 | 7.2% |
| Black African or Caribbean Background | 18 | 2.2% |
| Asian Background | 51 | 6.3% |
| Any other Ethnicity | 6 | 0.7% |
| Unknown (not collected/provided) | 441 | |
| Total (known) | 808 | |

Geography

The categories below are based on children's centre areas.

| Area | No. C&YP | % of total |
|---------------------|---------------------|-------------------|
| Bassett & Lordswood | 26 | 2.1% |
| Bitterne Park | 86 | 6.9% |
| Central | 70 | 5.6% |
| Freemantle | 49 | 3.9% |
| Lordshill | 153 | 12.2% |
| MRM | 150 | 12.0% |
| North Shirley | 90 | 7.2% |
| Portswood & Bevois | 61 | 4.9% |
| Sholing | 85 | 6.8% |
| Swaythling | 73 | 5.8% |

| | | |
|----------------------|------|------|
| Thornhill | 107 | 8.6% |
| Townhill & Harefield | 89 | 7.1% |
| Weston | 59 | 4.7% |
| Woolston | 98 | 7.8% |
| Outside Southampton | 53 | 4.2% |
| Total | 1249 | |

Disability

The table below shows the number and percentage of children and young people registered on the Buzz network by broad disability type. This is self-declared by the parent/carer when they sign their child up and they can include multiple disabilities (hence the total figures add up to more than the 1249 individual members).

| Disability Type | No. C&YP | % of total |
|-----------------------|----------|------------|
| Autism | 629 | 50.4% |
| Learning Disability | 221 | 17.7% |
| Physical Disability | 139 | 11.1% |
| Sensory Disability | 76 | 6.1% |
| Challenging Behaviour | 292 | 23.4% |
| Other | 245 | 19.6% |
| Total Buzz Members | 1249 | |

The proposal is to redesign the offer of short breaks around the 4 levels of need described in the eligibility criteria in order to provide a more equitable, consistent offer of short breaks which is based on need and better integrated with universal provision, particularly for families at the low and medium levels, as follows:

- **Low** – Children who have low levels of additional needs will be able to access universal services and adaptations. The suite of mainstream clubs and activities in and around Southampton is available on the Southampton Information Directory -

<http://sid.southampton.gov.uk/kb5/southampton/directory/home.page>

- **Medium** - Families not receiving an individual package of support via services at the substantial and critical level will have access to a Short Breaks card which offers easy access to a range of concessions or discounts negotiated across the city. This recognises that these children are able to access the majority of services available to all children.

Additionally, the Short Breaks Card will offer booking rights into subsidised activities, in and around Southampton. The short breaks programme will fund two main types of activities:

- Specialist Activities – run specifically for children and young people with moderate needs.
 - Support to attend mainstream activities, play schemes, clubs and groups.
- **Substantial** – Family’s needs who are assessed to be substantial will be supported through the relevant social care team. These teams will carry out an assessment of need for the child and their family. If eligible the family will receive an individual package of support through a Personal Budget. This might include:
 - Access to commissioned services, specifically for those at the substantial or critical level, for example Individual support in the home or community (e.g. outreach)
 - Direct Payments - to purchase individual support in line with the personal budget and direct payment policy. Families may wish to use their direct payment to purchase subsidised services made available through the grant making process (for those at medium level). They may also be able to access the non-assessed short break activities at a subsidised rate, purchased through direct payments. Access to these services will be using funding within their package of support and **not in addition** to it. Access will also be dependent on capacity with priority given to those at the medium level.
 - **Critical / Complex** – Families open to the JIGSAW Children with Disabilities Team will have an assessment of needs and if eligible will receive an individualised package of support through a Personal Budget. This might include;
 - Access to commissioned services, specifically for those at the substantial or critical level, for example
 - Individual support in the home or community (e.g.

outreach)

- Family based overnight and day care (e.g. short break fostering)
- Residential overnight short breaks
- Direct Payments - to purchase individual support in line with the personal budget and direct payment policy. Families may wish to use their direct payment to purchase subsidised services made available through the grant making process (for those at medium level). They may also be able to access the non-assessed short break activities at a subsidised rate, purchased through direct payments. Access to these services will be using funding within their package of support and **not in addition** to it. Access will also be dependent on capacity with priority given to those at the medium level.

A period of engagement has already been undertaken with families to inform development of the proposals for a redesign of the short breaks offer and the eligibility criteria.

Finally with regard to Jigsaw (integrated health and social care team), the service will be broadened to include all children at the critical level of the new eligibility criteria. This will include children with severe physical and/or sensory impairment (hearing and visual impairment) needs without a learning disability who currently do not have access to Jigsaw. The service offer will remain unchanged; however we are consulting on the name of the service to ensure that it remains relevant to children and families.

Summary of Impact and Issues

Eligibility Criteria:

There will be a much clearer, consistent and equitable means of determining access to disabled children's services which is entirely based on need, as identified by the impact of the child's disability on their life and that of their families.

Short Breaks:

The offer will be redesigned in line with the proposed eligibility criteria to provide access to short breaks based on need. Some families will receive more short breaks (as described below under "positive impacts"); however some will see a reduction in service:

- One2One services and the option of a direct payment will end for all families whose needs are considered to be at the medium level (Buzz Network Families).
- Families who receive an assessed package at the critical level (JIGSAW) will no longer be entitled to have a non-assessed package as an addition to what they receive through the assessed route.

It is anticipated that overall around 650 children & young people will experience a reduction in the services they can access.

Jigsaw:

The eligibility criteria will be extended to include all families at the critical / complex level. This will mean that children with severe physical and/or sensory impairment (hearing or visual impairment) needs who do not have a learning disability will have access to the service. It is estimated that this will be around 30 additional families.

Potential Positive Impacts

The proposals seek to provide an offer of short breaks that is a fairer and more equitable needs led approach for all children with disabilities. This will provide a positive impact for all children and families currently not able to access services, or the appropriate services. For example an estimated 30 children will now be able to access services at a critical / complex level, 150 at the substantial level and around 850 will gain access at the medium level.

| | Total estimated will be at this level | Estimates number receiving an enhanced services |
|--------------------|--|--|
| Low | 5,000 | 5,000 |
| Medium | 1,350 | 850 |
| Substantial | 150 | 150 |
| Critical / Complex | 285 | 30 |
| Total | 6,785 | 1,030 (not including those at the low level) |

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|------------------------------------|--|
| Responsible Service Manager | Sandra Jerrim, Senior commissioner, Integrated Commissioning Unit. |
| Date | 09 March 2017 |
| Approved by Senior Manager | Hilary Brooks, |
| Date | |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|---|
| Age | <p>The Buzz Network service users are all aged between 0 and 19 years of age. 20% of children are aged 0-4 years, 34% are 5-9 years, 30% are 10-14 years and 16% are 15-18 years. Therefore there will be a larger impact on children aged 5-14 years.</p> <p>Removal of the One2One and direct payment option will mean that families at the medium level have less flexibility to purchase their own short breaks to suit their child's age related needs and preferences.</p> | <p>Through the grant funding process intended to supplement activities at the medium level, suitable checks can be incorporated to ensure services are available across all age groups and provide a range of activities which suit children of different ages.</p> |
| Disability | <p>There are a range of different disabilities. There is potentially a larger impact on those with autism as 50% of those who use the Buzz Network report this as one of their disabilities.</p> <p>Removal of the One2One and direct payment option will mean that families at the medium need level have less flexibility to purchase their own short breaks to suit their child's own disability related needs and preferences.</p> <p>There will however be increased access (positive impact) for those families with greater needs at the substantial level and for new cases able to access the critical level.</p> | <p>Decisions on grant funding for community providers and commissioned services at the medium level will take into account the need for a range of activities which suit children with different needs, particularly autism, as a result of disability.</p> |
| Gender Reassignment | No identified negative impacts. | N/A |
| Marriage and Civil Partnership | No identified negative impacts. | N/A |
| Pregnancy and Maternity | No identified negative impacts. | N/A |
| Race | 17% of the current users of the Buzz Network are from non-white ethnic groups, rising to 20% for all groups | Having a wider range of community provision at the low and medium levels of need will |

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| | <p>other than White British.</p> <p>Removal of the One2One and direct payment option means that some families at medium level will have less flexibility to purchase short breaks that meet their own individual needs and family circumstances.</p> | <p>provide more opportunities for some families to access services more appropriate to their own individual needs and circumstances. A key aim of the redesign at these levels is to ensure that short breaks are better integrated into local community provision as opposed to being separate, distinct disability provision. This will provide opportunities for better linking into particular communities, like BME.</p> |
| Religion or Belief | No identified negative impacts. | N/A |
| Sex | Buzz Network demographics show that 75% of service users are male , 25% female so there will be more of an effect on males. | While there are no currently identified negative impacts this will need to remain under review and can be covered in conditions set out when grants are awarded or services commissioned at the medium level of need. |
| Sexual Orientation | No identified negative impacts. | N/A |
| Community Safety | No identified negative impacts. | N/A |
| Poverty | <p>Families who have children with disabilities are more likely to be subject to financial pressures and poverty. Families with low incomes who experience a reduction in the services they receive may find it hard to adapt to the change.</p> <p>Families may be asked to pay a contribution towards the expanded range of community provision whereas the One2One support and option of a direct payment which they may be accessing</p> | <p>Families who experience a reduction in services will be considered for a review (at critical /substantial levels) or assessment (at medium level).</p> <p>Equity of access will ensure those with highest need have</p> |

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|---|---|---|
| | <p>currently are both free to families.</p> | <p>access to the right services to support them, including those facing financial pressures.</p> <p>The Council will make it a condition of funding to community activity providers that they make provision within their grant application for a 'hardship' fund to enable children to access if their families are in financial difficulties.</p> |
| <p>Other Significant Impacts</p> | <p>Parents who work and use the short break time as child care, particularly during school holidays may need to find alternative child care arrangements. This can be particularly difficult for families of disabled children to find child care with suitable training and ability to support their child's individual needs.</p> | <p>Families and children will be able to request reviews if they feel the changes are having a negative impact. This will include a parent carer assessment to ensure the parent is supported to maintain their employment.</p> <p>We will ensure that there continue to be short break opportunities during holidays.</p> <p>We will work with the Early Years Team to ensure that families are able to access other child-care options such as the 2/3/4 year old funding and child minders who are well trained to support children with disabilities. The Early years Child Care Team</p> |

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| | | is able to provide information as to which child minders are specifically trained to support disabled children. |
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DRAFT

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|-------------------------------|---|---------------------------------------|----------------------------------|
| DECISION-MAKER: | CABINET | | |
| SUBJECT: | SCRUTINY INQUIRY PANEL – REDUCING DRUG RELATED LITTER IN SOUTHAMPTON FINAL REPORT | | |
| DATE OF DECISION: | 17 APRIL 2018 | | |
| REPORT OF: | CHAIR OF SCRUTINY INQUIRY PANEL | | |
| <u>CONTACT DETAILS</u> | | | |
| AUTHOR: | Name: | Mark Pirnie | Tel: 023 8083 3886 |
| | E-mail: | Mark.pirnie@southampton.gov.uk | |

| | |
|---|---|
| STATEMENT OF CONFIDENTIALITY | |
| None | |
| BRIEF SUMMARY | |
| <p>From October 2017 to March 2018 the Scrutiny Inquiry Panel undertook an inquiry looking at reducing drug related litter in Southampton. The Scrutiny Inquiry Panel final report, attached as Appendix 1, contains a number of recommendations. Cabinet needs to formally respond to these recommendations, summarised in Appendix 2, within two months to meet the requirements in the Council's constitution.</p> | |
| RECOMMENDATIONS: | |
| (i) | Cabinet is recommended to receive the attached Scrutiny Inquiry Panel report to enable the Executive to formulate its response to the recommendations contained within it, in order to comply with the requirements set out in the Council's Constitution. |
| REASONS FOR REPORT RECOMMENDATIONS | |
| 1. | The overview and scrutiny procedure rules in part 4 of the Council's Constitution requires the Executive to consider all inquiry reports that have been endorsed by the Overview and Scrutiny Management Committee (OSMC), and to submit a formal response to the recommendations contained within them within two months of their receipt. |
| ALTERNATIVE OPTIONS CONSIDERED AND REJECTED | |
| 2. | None. |
| DETAIL (Including consultation carried out) | |
| 3. | The OSMC, at its meeting on 10th August 2017, requested that the Scrutiny Inquiry Panel undertake an inquiry looking at reducing drug related litter in Southampton. |
| 4. | <p>The set objectives of the Inquiry were:</p> <ul style="list-style-type: none"> • To understand the prevalence and impact of drug related litter in Southampton. • To understand the reasons for the prevalence of drug related litter. • To review progress being made in Southampton to tackle drug related litter. • To understand what is being done to reduce drug related litter elsewhere. |

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|---|---|
| | <ul style="list-style-type: none"> To identify what additional initiatives could work in the city to reduce drug related litter. |
| 5. | The Scrutiny Inquiry Panel undertook the inquiry over 3 evidence gathering meetings and received information from a wide variety of organisations. This included Hampshire Constabulary, health professionals, street cleansing managers, charitable and voluntary organisations, commissioners, experts in harm reduction and residents concerned about drug litter. |
| 6. | The final report, attached as Appendix1, was considered and endorsed by the OSMC on 15 March 2018. The report contains 7 recommendations in total which, if implemented, the Panel believe will help to reduce incidence of drug litter in Southampton. The conclusions and recommendations are summarised in Appendix 2. |
| 7. | The Executive needs to consider the inquiry recommendations and to formally respond within two months of the date of receiving this report in order to meet the requirements set out in the Council's constitution. |
| RESOURCE IMPLICATIONS | |
| <u>Capital/Revenue/Property/Other</u> | |
| 8. | In practice any future resource implication arising from this review will be dependent upon whether, and how, each individual recommendation within the inquiry report is progressed by the Executive. More detailed work will need to be undertaken by the Executive in considering its response to each of the recommendations set out in the report. |
| LEGAL IMPLICATIONS | |
| <u>Statutory power to undertake proposals in the report:</u> | |
| 9. | The duty to undertake overview and scrutiny is set out in Part 1A Section 9 of the Local Government Act 2000. |
| <u>Other Legal Implications:</u> | |
| 10. | None |
| RISK MANAGEMENT IMPLICATIONS | |
| 11. | None. |
| POLICY FRAMEWORK IMPLICATIONS | |
| 12. | The proposals contained within the appended report are in accordance with the Council's Policy Framework. |

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| KEY DECISION? | No |
| WARDS/COMMUNITIES AFFECTED: | None directly as a result of this report |
| <u>SUPPORTING DOCUMENTATION</u> | |
| Appendices | |
| 1. | Reducing Drug Related Litter in Southampton Inquiry – Final Report |
| 2. | Reducing Drug Related Litter in Southampton Inquiry – Summary of conclusions and recommendations |

| | |
|---|--|
| Documents In Members' Rooms | |
| 1. | None |
| Equality Impact Assessment | |
| Do the implications/subject of the report require an Equality and Safety Impact Assessments (ESIA) to be carried out. | No |
| Data Protection Impact Assessment | |
| Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out. | No |
| Other Background Documents | |
| Equality Impact Assessment and Other Background documents available for inspection at: | |
| Title of Background Paper(s) | Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable) |
| 1. | None |

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Reducing Drug Related Litter in Southampton - Draft

Drug litter



PANEL MEMBERSHIP

Councillor McEwing (Chair)

Councillor Fuller (Vice Chair)

Councillor Coombs

Councillor Fitzhenry

Councillor Noon

Councillor Vassiliou

Councillor Whitbread

Scrutiny Manager – Mark Pirnie

mark.pirnie@southampton.gov.uk



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Councillor McEwing - Chair of the Reducing Drug Related Litter in Southampton Inquiry Panel (2017/18)

Most urban areas in the UK, including Southampton, experience problems with drug litter. In 2016/17 there were 7,567 pieces of injecting equipment found in Southampton, including 7,037 needles.

Discarded needles pose a potential health risk, can damage the reputation of communities and, if left in public places, place a cost on the local authority to remove.

Despite the genuine concerns raised through the inquiry the Panel are aware that the position in Southampton compares favourably to some other cities partly due to the effective work of services delivered by the Council, and partners, to limit the impact and prevalence of drug litter.

In particular the Panel recognise the essential role played by the City Council's cleaning staff clearing drug litter from public places. They ensure the swift removal of drug related litter found in public places, often before they have been noticed by members of the public. The Panel want to place on record their gratitude to the Council's cleansing teams for the key role they play in reducing the impact of drug related litter in our city.

Whilst as a Panel we are keen to applaud the good practice being employed in Southampton we recognise that more can be done here to reduce drug litter, and the impact of drug litter. Reflecting this the Scrutiny Inquiry Panel have identified 7 recommendations that, if implemented, we believe will have a positive impact on the position in Southampton.

As a Panel we are in agreement that it is never acceptable to dispose of drug litter irresponsibly, but we should make it as easy as possible for people who inject drugs to do the right thing with their used equipment. We also questioned the logic of the current legal position relating to drug consumption rooms. At present vulnerable people addicted to drugs collect sterile injecting equipment, leave the safe and secure environment provided by the needle exchange, and subsequently proceed to inject drugs in public places in unhygienic locations, increasing risk to users and the public. This is illogical and evidence available recognises that different approaches can produce better outcomes.

I would like to thank all those who provided evidence to the inquiry and ensured that the Panel were well informed. I would also like to thank members of the Panel for their contributions; the way in which the inquiry was conducted; and their willingness to consider different approaches and to discuss emotive, and at times distressing issues, with an open mind.

Reducing Drug Related Litter in Southampton

The Aim of the Inquiry

1. Since February 2016 the Community Safety team at Southampton City Council have been logging drug litter finds across Southampton. From April 2016 to March 2017 the total number of finds was 7,567 including 7,037 discarded needles.
2. Drug litter presents a health risk to the public and council employees, the discovery of which can cause fear, upset and anxiety for individuals and the wider community as well as potentially causing physical injury.
3. Reflecting concerns the recently approved Southampton Drugs Strategy includes, as a key outcome, 'to reduce the amount of drug related litter in the city'.
4. Given the scale of the problem, the linkages to outcomes within the Southampton Drugs Strategy, and the key role councils and partners can play in reducing incidence of drug related litter, the Overview and Scrutiny Management Committee recommended 'reducing drug related litter' as an appropriate subject for a scrutiny inquiry at the August 2017 meeting.
5. The set objectives of the inquiry were:
 - a. To understand the prevalence and impact of drug related litter in Southampton.
 - b. To understand the reasons for the prevalence of drug related litter.
 - c. To review progress being made in Southampton to tackle drug related litter.
 - d. To understand what is being done to reduce drug related litter elsewhere.
 - e. To identify what additional initiatives could work in the city to reduce drug related litter.
6. The full terms of reference for the inquiry, agreed by the Overview and Scrutiny Management Committee, are shown in Appendix 1.

How the inquiry was conducted

7. The Scrutiny Inquiry Panel undertook the inquiry over 3 evidence gathering meetings and received information from a wide variety of organisations. This included Hampshire Constabulary, health professionals, street cleansing managers, charitable and voluntary organisations, commissioners, experts in harm reduction and residents concerned about drug litter. A list of witnesses that provided evidence to the inquiry is detailed in Appendix 2.
8. A visit was also made to the Southampton Needle Exchange to develop the Panel's understanding of the services being provided in the city.
9. In undertaking this inquiry the Panel were made aware that the most sustainable way to reduce drug related litter was to reduce levels of rough sleeping and the prevalence of drug use in Southampton.

10. In recognition that these issues are the subject of significant cross agency working and developing strategies, the terms of reference, whilst reflecting these issues, and the need to understand the linkages between rough sleeping, drug use and drug related litter, focussed on the premise that people who are addicted to certain narcotics will continue to inject drugs. Therefore, there is a need to consider what more can be done, within reason, to ensure that the resulting drug litter is disposed of safely, thereby reducing the risks and impact of drug litter on all stakeholders.
11. The key findings, conclusions and recommendations from the inquiry are detailed succinctly later in this report.
12. Members of the Panel would like to thank all those who have assisted with the development of this review, in particular the following who have provided the Panel with invaluable advice throughout the inquiry:
 - Colin McAllister, Service Development Officer within the Integrated Commissioning Unit;
 - Charlotte Matthews, Public Health Consultant;
 - Mitch Sanders, Service Director for Transactions and Universal Services; and
 - DCI Ben Chivers, Hampshire Constabulary.

Introduction, Background and Findings

Drug related litter

13. Litter related to drug use can cover a range of materials including syringes, foils, swabs, spoons, plastic bottles and cans. It also includes inappropriately discarded prescription and over the counter medicines. The greatest concern is with injecting equipment, therefore the focus of the inquiry is on discarded injecting equipment – needles, syringes, swabs as well as ‘spoons’, vials of water and sachets of citric acid or vitamin C (used in the preparation of heroin for injection).

The position in Southampton

14. The Community Safety team at Southampton City Council have been logging drug litter finds in public places since 2016. Reports are sent in by various Council services including Cleansing; Parks and Open Spaces; Housing; Tree Team; and HMO Licensing.
15. In 2016/17 there were 7,567 pieces of injecting equipment found, including 7,037 needles. From April to August 2017 there had been a total of 3,312 finds, including 2,958 needles. The data does not clearly identify that drug litter is an increasing problem in Southampton.
16. Information presented to the Inquiry Panel identified that in excess of 90% of the drug litter finds are within the city centre. The largest finds are in the city centre car parks.

Where is the drug related litter in Southampton coming from?

17. In Southampton there are estimated to be 1483 opiate and/or crack users, including 636 who inject¹. Figures are not available for people who inject performance enhancing or other drugs however evidence indicates that drug litter usually relates to people who inject illicit drugs such as heroin, crack and amphetamines rather than those who inject performance and image enhancing drugs.
18. Primarily to reduce needle sharing and the transmission of blood borne viruses, Southampton, in accordance with identified best practice², has a needle exchange, that, as well as offering harm reduction advice and information, provides sterile injecting equipment. In addition 6 pharmacies across the city provide a needle exchange service and there is a limited needle exchange provision in two of Southampton’s homeless hostels.
19. In 2016/17 there were 775 unique clients of the Southampton Needle Exchange. In total 198,379 pieces of injecting equipment were provided by the needle exchange and an estimated 103,686 were returned (52%). This excludes returns to the pharmacy needle exchanges or returns to the hostels.
20. Evidence presented to the Inquiry Panel indicated that the majority of the drug litter found in Southampton in 2016/17 was originally distributed from the Southampton Needle Exchange.

¹ <https://www.gov.uk/government/publications/opiate-and-crack-cocaine-use-prevalence-estimates-for-local-populations>

² 2017 Drug Strategy, HM Government, July 2017, p32

Who is dropping the drug related litter in Southampton?

21. From personal experience Carl Nightingale, an employee at the Southampton Needle Exchange with a history of injecting drug use, informed the Panel that injecting drug users that have secure accommodation understandably, given the potentially unsafe and unhygienic injecting conditions associated with injecting in public places, tend to inject and store used equipment at home. This is not an option for rough sleepers and often for those in unsecure accommodation.
22. Most people who inject drugs return used equipment. However, within the group of people in the city who inject drugs, the people who are disposing of equipment in the community are likely to be those with the most chaotic lifestyles and who are also some of the most vulnerable.
23. This link between rough sleeping and substance misuse is reflected in the findings from a survey of people who are begging and /or rough sleeping in Southampton. The questionnaire, undertaken in November 2017, identified that 78% of all the people surveyed reported use of or dependence on drugs and or alcohol, and 31% reported drug dependence.
24. The connection between rough sleeping and drug litter is evidenced by the findings from the Community Safety reports. Over the last 2 years there has been a rise in the number of people sleeping rough and setting up encampments in car parks and open spaces. During 2016/17 257 notices were issued by the Council to rough sleepers / encampments in Council car parks and 53 notices were issued in open spaces.
25. During this time period the Community Safety reports make repeated references to drug litter being found close to encampments. Examples include 389 needles picked up in West Park Car Park in May 2016 associated with 9 tents forming an encampment, and 110 needles and spoons recovered from Mayflower Park in around 4 tents in July 2017.
26. Despite the relatively high levels of drug related litter removed in Southampton, feedback from employees at the Southampton Needle Exchange, who provide advice and information to people who inject drugs, and the Service Development Officer at the Integrated Commissioning Unit, estimated that the number of people thought to be irresponsibly disposing of their drug litter to be in the region of 20 individuals.



Bevois Ward - Southampton

The impact of drug related litter – Health risks

27. In his submission to the Panel Dr Anand Fernandes, Consultant in Communicable disease control at Public Health England, outlined the health risks associated with injuries sustained from needlesticks or ‘sharps’ and contact with potentially infectious body fluids.
28. The report identifies that needlestick injuries occur when a needle or other sharp instrument accidentally penetrates the skin (*percutaneous*). If the needle or sharp instrument is contaminated with blood or other body fluid, there is the potential for transmission of infection.
29. However, the submission concluded that there has been no evidence of a case of a blood borne virus being transmitted to a member of the public in Southampton through a needlestick injury, nationally, such transmissions occur very infrequently and that the main health risks from injury due to drug related litter is likely to be from stress and psychological trauma.
30. The people at greatest risk of transmission of blood borne viruses from drug litter are people who inject drugs, either through their exposure to such environments or the reuse of paraphernalia, and those involved in working with people who inject drugs and the clean-up of drug litter³.
31. Reflecting the above risks, needlestick injuries to cleansing operatives were recorded in 2015/16 (1) and in 2017/18 (1 to date) on the Council’s Health & Safety system.

The impact of drug related litter – Residents

32. Representatives from city centre residents’ associations and Friends of Town Quay Park were invited to provide the Panel with an insight into the impact that drug related litter has had on them and their communities.
33. At the meeting the representatives outlined the range of drug litter that they had encountered or that had been reported to them. This included syringes, needles, cannabis and legal high litter and nitrous oxide canisters.
34. Whilst no injuries were reported by the representatives they informed the Panel that the prevalence of drug litter was intimidating residents, creating fear, damaging the reputation of their estate and at times had resulted in children not going outdoors to play. These concerns reflected wider concerns within communities about drug use, associated behaviours and drug dealing.
35. The Panel were also informed that the cost to the Council’s Transactions and Universal Services Department associated with removing and recording drug litter was estimated to be approximately £135,000 per annum.



A nitrous oxide canister

³ [Health risks from needle stick injuries](#), (item 4) Written submission to the Reducing Drug Related Litter Inquiry, Dr Anand Fernandes, 18th October 2017

Action taken in Southampton to decrease the impact of drug related litter and to increase the level of returns to the Needle Exchange

36. The Council's Service Director for Transactions and Universal Services outlined a range of actions that were being undertaken to reduce the prevalence of drug litter and to ensure the swift removal of drug related litter found in public places. These included:
- Routine cleaning and response to reports from members of the public;
 - Civil Enforcement Officers patrol and serve notices;
 - Rolling programme - Community Safety, Police and Street Cleansing actively engage and remove rough sleepers;
 - Grosvenor Square Car Park locked down from 12.00am to 5.30am every night. Further car parks closures to follow;
 - Additional staff to clean our car parks;
 - New team of City Welfare Wardens introduced to engage with rough sleepers, remove unattended items and remove needles and drug litter. The Welfare Wardens will work closely with the homeless support services and outreach teams.
 - Opportunity to report drug litter through the Council's website, via Actionline and the emergency out of hours number.
37. The Panel were informed that it was too early to tell what impact the night time closure of City Council car parks might have on drug related litter and the potential that this action may displace the problem to other locations.
38. Residents' Association representatives in attendance at the meeting also raised a concern about the difficulty reporting drug litter to the Council, especially through the website (it can be found on the Council's website under report an environmental issue). This point was also made by the Southampton Needle Exchange:

"Colleagues and members of the public have commented on the difficulty to report incidence of DRL (drug related litter)."

Increasing returns to the Needle Exchange

39. Reiterating the point that most people who inject drugs return used equipment and are "horrified about drug litter", the Service Development Officer within the Council / CCG Integrated Commissioning Unit highlighted a range of initiatives that are employed, or are proposed, in Southampton to increase the return rate of used equipment. These include the following:
- Every person accessing the Southampton Needle Exchange is given a personal sharps box (various sizes to suit need);
 - Drug litter and safe disposal is discussed with every client;
 - 'Responsible users' are encouraged to speak to and support those that dispose of their equipment irresponsibly;
 - Photos of drug related litter are displayed to encourage conversations;
 - People who do not return equipment regularly are challenged;

- The Homeless and Vulnerable Adults Support Team (H-VAST) are now offering 'on street return opportunities';
 - Discussions have commenced with the Street Homeless Prevention Team (SHPT) and the Homeless Day Centre about the role they can play encouraging returns and safe disposal.
40. The Panel, whilst expressing concerns with the return rate of injecting equipment, recognised that the Southampton Needle Exchange is a cost effective harm reduction service that also provides an entry point to treatment and support.
41. The Panel also recognised that, given the drug dependence of many of the needle exchanges clients, the removal of the needle exchange services would not address the position relating to drug litter in Southampton but would increase the risks associated with people who inject drugs sharing needles:

“Reducing the provision of injecting and harm reduction equipment will not reduce the injecting that takes place but it will increase the prevalence of BBV (blood borne viruses)” – Feedback from the Needle Exchange.

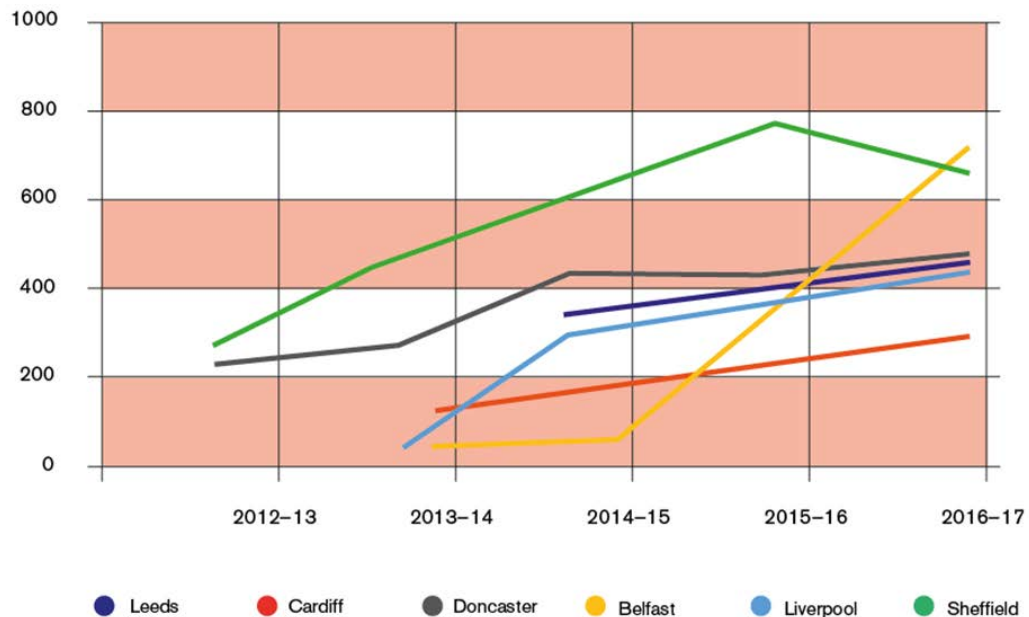
Rough sleeping, unsecure accommodation and illicit drug usage

42. Whilst recognising the importance of the initiatives designed to remove drug litter as soon as possible, and to encourage people who inject drugs to return used equipment to the needle exchange, the Panel, aware that the ability to reduce drug related litter in a sustainable way is linked to addressing rough sleeping in Southampton and the consumption of illicit drugs, were provided with an overview of some of the initiatives taking place across the city to improve outcomes relating to these complex issues.
43. Notwithstanding the various substance misuse services and housing support services that are available in Southampton the Panel were informed about the following key developments:
- The adoption of the Southampton Drugs Strategy 2017/2020. This strategy sets out how Southampton will seek to reduce the harm caused by illicit drugs - http://www.southampton.gov.uk/images/drug-strategy-2017-2020_tcm63-394492.pdf;
 - Homeless Vulnerable Adult Support Team (H-VAST) - Delivering the Government funded Rough Sleeper Initiative, through intensive support ensuring that, over the next two years, people who are homeless or at risk of returning to homelessness have access to substance misuse and mental health services;
 - Street-based Vulnerable Adults review – The Integrated Commissioning Unit has undertaken a 'Street based vulnerable adults review' as part of Prevention and Early Intervention – Phase 2.
 - Street Homeless Prevention Team (SHPT) - Provide outreach and a gateway into services and undertake joint outreach with drug services.

Drug related litter - How does Southampton compare to other areas?

44. Southampton City Council has only been using the current method for reporting drug related litter finds in the city since April 2016. Due to different collection methods and limited data it is not possible, at present, to objectively compare levels of drug litter across different areas.
45. Interestingly, evidence obtained from a Freedom of Information request, and presented to the Inquiry Panel, has indicated that call-outs for the removal of drug related litter have risen in urban areas over the past 5 years.⁴

Call Outs for the removal of Drug-Related Litter



46. To provide a local context the Panel were informed that the number of 'Sharps Reports by Public' in Southampton was as follows:

| 2015/16 | 2016/17 | 2017/18 (April to October) |
|---------|---------|----------------------------|
| 297 | 375 | 229 |

47. Reiterating the point raised in the previous paragraph this is not a directly comparable statistic as, for example, the above figures also include reports of glass which therefore inflates the Southampton figure considerably.
48. To help provide a comparison with other areas the Inquiry Panel invited Nigel Brunson, member of the UK Harm Reduction Alliance and Deputy Chair of the National Needle Exchange Forum, to visit the city and provide a view of the drug litter problem and services in the city.
49. During his day in Southampton he accompanied a Street Cleansing Team as they undertook their early morning city centre cleansing duties; visited the Needle Exchange; and met with representatives from Community Safety. The following observations were made at his presentation to the Panel:

⁴ Back Yard, [An investigation into the feasibility of establishing drug consumption rooms](#), Volteface, 2017, Chapter on need

- No needles were found in car parks, but other drug litter was found;
- The worst area for drug litter was near Six Dials, in close proximity to the Needle Exchange. Litter found included needles and a number of barrels (without needles);



Drug litter found near Six Dials, photos courtesy of Nigel Brunson. Injecting Advice.com

- Some needles were found pushed into the ground, but visible, seemingly in an effort to reduce the risk of harm;
- The largest quantity of 'drug litter' found related to alcohol - the numerous empty cans of strong cider and lager;
- Quantities of drug related litter seen in Southampton compares favourably to many other cities;
- Southampton is dealing with drug related litter more effectively than many other cities. Credit to the street cleansing teams for their proactive and reactive services; and
- The Needle Exchange provides a good service considering the available resources. The availability of different sized personal sharps bins to fit different clothing is innovative. Staff at the Needle Exchange are knowledgeable.

Best Practice – What more can be done to reduce drug related litter?

50. At the request of the Panel, a literature review of research evidence on best practice in reducing drug related litter was undertaken by Public Health Southampton.
51. The literature review identified a number of practices and initiatives that are already being delivered in Southampton. These include prompt cleansing service response to finds; needle exchange services; and, effective partnership working to understand, respond to and prevent drug related litter.
52. The literature review did however identify some approaches that are not utilised in Southampton that have been evidenced to reduce drug litter.

Public sharps bins

53. The Department for Environment, Food and Rural Affairs (Defra) published a good practice guide to tackling drug related litter in 2005.⁵ The Defra report identifies that whilst there may at times be local resistance to public sharps bins, it is clear from research that a significant barrier to disposal of drug litter is the lack of facilities, particularly outside the hours during which exchange schemes and other services operate.
54. This point was reaffirmed by Nigel Brunsdon during his presentation to the Inquiry Panel:

“While most litter in our society is just put in a bin anywhere in town, needle litter only has a small handful of places you can dispose of it, and those are not often open out of hours. So for a group that often doesn’t even feel able to carry their bedding around with them a used needle is just another thing to have to carry.”

55. Mr Brunsdon informed the Panel that good practice is to put public sharps bins near to locations where drug related litter is a consistent problem, preferably away from areas that are too public to reduce drug users fear of exposure. Some public sharps bins are very discrete and can be installed without the public being aware of them.



56. The Panel were informed that in Portsmouth, since 12 public sharps bins were installed in public toilets and public libraries, there has been no adverse publicity and the level of drug litter has reduced.
57. There are currently no public sharps bins in Southampton and needle exchange services are not operational 24 hours a day.
58. The Panel understand that, like the wider litter problem in society a small minority of people injecting drugs still won't use the sharps bins to dispose of drug litter safely. This is not acceptable behaviour. However, to minimise drug litter and the risk of harm, a sensible approach is to make it as easy as possible for users to do the right thing with their used needles.

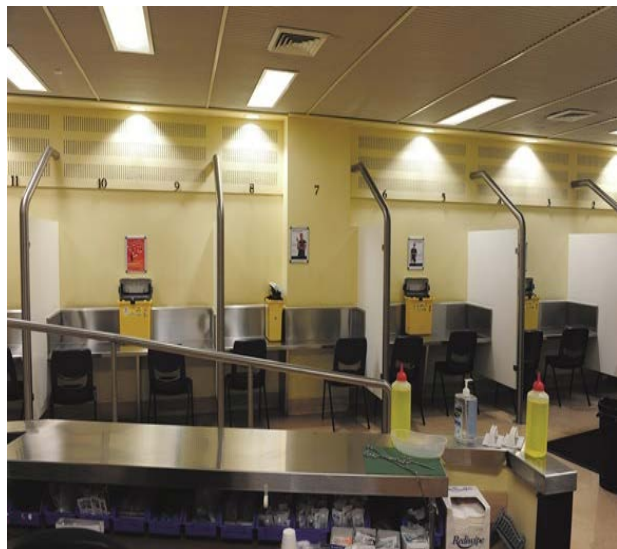
⁵ Tackling drug related litter: Guidance and good practice, Defra, October 2005

59. Reflecting this viewpoint the Defra report from 2005 recommended the following for local authorities and Community Safety Partnerships:
*'Partnerships should fully explore the potential for sharps bins, liaising closely with drug users to ensure the siting and promotion of bins is as effective as possible.'*⁶

Drug Consumption Rooms

60. The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) describes drug consumption rooms (alternatively know as Safe Injecting Facilities – SIFs) as “professionally supervised healthcare facilities where drug users can consume drugs in safer conditions.”⁷
61. They are not currently legal in the UK but have been operating in Europe, Australia and Canada for the past three decades. According to the EMCDDA, as of February 2017 there were 93 drug consumption rooms operating across 10 countries.
62. They can be in permanent clinics, mobile ambulance style units or temporary structures. They typically provide people who use drugs with:

- Sterile injecting equipment;
- A hygienic space to use drugs that they have bought illicitly under medical supervision;
- Primary medical care, and emergency care in the event of overdose;
- Counselling services and referral to social and health-care services;
- A gateway to drug treatment.



63. The EMCDDA report, based on a systematic literature review of 75 research articles, identifies that a number of features are common to the majority of drug consumption facilities, irrespective of where they are located. For example, access is usually restricted to registered service users, and certain conditions, for example minimum age and local residency, have to be met. Most target drug injectors, though they increasingly include users who smoke or inhale drugs.
64. Drug consumption rooms are designed to be available to vulnerable populations of users, especially marginalised groups and those who use on the streets or in other risky and unhygienic conditions.

Sydney Medically Supervised Injecting Centre (MSIC)

⁶ Tackling drug related litter: Guidance and good practice, Defra, October 2005, p37

⁷ Drug consumption rooms: an overview of provision and evidence, European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), June 2017

Drug Consumption Rooms – Impact on drug related litter

65. Australia, Canada and Spain have all collected data on drug related litter and have found that drug consumption rooms reduce public injecting and injection related litter in public spaces.
66. There were many concerns from the Canadian government on the opening of the InSite SIF in Vancouver in 2003. The legal exemption given to allow its opening was conditional on a rigorous scientific evaluation of its impact. The first part of the evaluation included examining the drug use patterns in the ten blocks around the SIF centre in the six weeks prior to its opening and the twelve weeks after its opening. The table below shows an immediate drop in both publicly discarded syringes and injection-related litter following the opening of the Vancouver SIF and the seasonally adjusted modelling shows a drop of almost 50% across all three measures:⁸

| Measure | Predicted daily mean no. (95% CI) | |
|-----------------------------|-----------------------------------|---------------------------|
| | Before the facility opened | After the facility opened |
| IDUs injecting in public | 4.3 (3.5-5.4) | 2.4 (1.9-3.0) |
| Publicly discarded syringes | 11.5 (10.0-13.2) | 5.4 (4.7-6.3) |
| Injection-related litter | 601 (590-613) | 310 (305-317) |

67. Sydney, Australia did not have a formal scientific evaluation and focused more on public perceptions of their SIF. Three surveys were conducted to survey residents and business managers in the immediate area around Sydney's SIF in 2000, 2002, and 2005. Across the five-year period, a reduction in publically discarded needles was seen across both groups:

Percent of Residents/Business Operators that witnessed publically discarded needles in the previous month⁹

| | 2000 | 2002 | 2005 | |
|--------------------|------|------|------|-----------|
| Residents | 67% | 58% | 40% | p < 0.001 |
| Business Operators | 72% | 64% | 57% | p = 0.01 |

68. In Barcelona the opening of a facility with a supervised drug consumption room in the inner city was associated with a huge reduction in the number of abandoned syringes in the city, while its number did not rise in the district where the facility was located. In Barcelona since the opening of drug consumption rooms they went from collecting a monthly average of over 13,000 syringes to around 3,000 a month in 2012.¹⁰

⁸ Wood, E., M. W. Tyndall, J. S. Montaner and T. Kerr (2006). "Summary of findings from the evaluation of a pilot medically supervised safer injecting facility." *Canadian Medical Association Journal* **175**(11): 1399-1404

⁹ Salmon, A. M., H. Thein, J. Kimber, J. M. Kaldor and L. Maher (2007). "Five years on: what are the community perceptions of drug-related public amenity following the establishment of the Sydney Medically Supervised Injecting Centre?" *International Journal of Drug Policy* **18**(1): 46-53

¹⁰ Vecino, C., Villalbí, J. R., Guitart, A., et al. (2013), [Safe injection rooms and police crackdowns in areas with heavy drug dealing: evaluation by counting discarded syringes collected from the public space] (in Spanish), *Addiciones* **25**(4), pp. 333–8

Drug consumption rooms – Additional benefits

69. In addition to reducing public drug use and the amount of publicly discarded injecting equipment, the review of evidence undertaken by the EMCDDA, and shared with the Panel by Dr Prun Bijral, Medical Director at CGL shows that drug consumption rooms are found to be effective in:
- Reducing self-reported injection risk behaviours, such as syringe sharing;
 - Reaching and staying in contact with highly marginalised target populations;
 - Reducing drug-related deaths at a city level, where coverage is adequate;
 - Increasing uptake of detoxification and drug dependence treatment, including opioid substitution;
 - Enhancing access to primary care;
 - Promoting safer injecting conditions.
70. The EMCDDA report also identified that there is no evidence that the availability of safer injecting facilities increases drug use, local crime rates or frequency of injecting.
71. Given the above it is understandable why the Advisory Council on the Misuse of Drugs (ACMD), official advisers to HM Government, recommended in its December 2016 report, ‘Reducing Opioid-Related Deaths in the UK, that:
- “Consideration is given – by the governments of each UK country and by local commissioners of drug treatment services – to the potential to reduce DRDs (drug related deaths) and other harms through the provision of medically-supervised drug consumption clinics in localities with a high concentration of injecting drug use”.*

Heroin Assisted Treatment

72. When considering the issue of drug consumption rooms the Panel briefly discussed heroin assisted treatment (HAT). HAT refers to the prescribing of synthetic, injectable heroin, administered under strict controls, to people who do not benefit from, or cannot tolerate treatment, with one of the established drugs used in opiate replacement therapy like methadone or buprenorphine.
73. Heroin assisted treatment and drug consumption rooms both offer an injecting environment in a hygienic and medically supervised setting, the key difference between the two approaches is that the latter allows people to inject illicit drugs that they have purchased elsewhere.
74. Both the UK government and the ACMD actively support HAT, the ACMD from a health perspective and the UK Home Office from a crime reduction viewpoint as well.
75. The UK Government’s Modern Crime Prevention Strategy states:
- “For a small cohort of entrenched, long-term opiate users who have not achieved recovery through optimised oral substitution treatment, there is evidence that heroin assisted treatment (supervised injectable heroin) reduces crime.”*

76. HAT has been demonstrated¹¹ to successfully reduce the level of discarded drug litter; fatal overdoses and needle sharing that can lead to infections, including HIV and hepatitis; high risk street injecting; and sex-work, while increasing take-up and retention in treatment.

Drug consumption rooms – Demand in Southampton?

77. Reflecting the potential benefits of drug consumption rooms and the client group that the facility would be targeted towards, namely, marginalised groups and those who use on the streets or in other risky and unhygienic conditions, the following statistics provide some insight as to whether a drug consumption room, legislation permitting, could be of benefit to Southampton:

- In Southampton there are estimated to be 1483 opiate and/or crack users, including 636 who inject.¹²
- 2014-16 - 43 people died from drugs, using the Public Health England and ONS definition. The Rate of 6.2 per 100,000 people is higher (worse) than:
 - England 4.2 – difference statistically significant
 - Similar Local Authorities 5.7
 - Southampton 2013-15 where the rate was 5.1
- Local audit of drug related deaths for 2015 identified that deaths were mostly from heroin +/- another substance including alcohol.
- In 2016/17 there were 775 unique clients of the Needle Exchange.
- In 2016/17 there were 7,567 recorded drug litter finds in Southampton, including 7,037 needles. From April to August 2017 there had been a total of 3,312 finds, including 2,958 needles.

78. As the Panel were informed during the visit to the needle exchange, there exists in Southampton a juxtaposition whereby a number of clients collect sterile injecting equipment, leave the safe and secure environment provided by the needle exchange, and subsequently proceed to inject drugs in public places in unhygienic locations, increasing risk to users and the public.

79. Given the number of injecting drug users within Southampton and the recent increase in drug related deaths there is potential for a pilot drug consumption room to provide significant benefits in relation to reducing drug related litter, saving lives as well as improving other outcomes. A key factor that could determine whether such a facility would be viable is whether there exists a high enough concentration of users in Southampton who inject in public.

80. Whilst recognising the potential benefits of drug consumption rooms and HAT, the Panel were keen to emphasise that any proposal should work in conjunction with, and not at the expense of existing services, and that any user of a drug consumption room would need to evidence a connection to Southampton.

¹¹ European Monitoring Centre on Drugs and Drug Addiction (2012) New heroin-assisted treatment: Recent evidence and current practices of supervised injectable heroin treatment in Europe and beyond.

¹² <https://www.gov.uk/government/publications/opiate-and-crack-cocaine-use-prevalence-estimates-for-local-populations>

Conclusions and Recommendations

81. A summary of the key evidence presented at each of the inquiry meetings is attached as Appendix 3. Conclusions were drawn from each meeting and disseminated to the Panel. All of the reports, presentations and minutes from the inquiry meetings can be found here:

<http://www.southampton.gov.uk/modernGov/ieListMeetings.aspx?CId=668&Year=0>

Conclusions

- The inquiry has identified that drug related litter is an issue of concern in Southampton that, despite not appearing to be as pervasive as in some other cities, is creating an element of fear, damaging the reputation of certain communities, and presents a potential health risk, particularly to the people who inject drugs and those working with people who inject drugs and clean-up drug litter.
- The Panel understand that the position in Southampton compares favourably to some other cities partly due to the effective and proactive work of services delivered by the Council, and partners, to limit the impact and prevalence of drug litter. In particular the Panel recognise the essential role played by the City Council's cleaning staff clearing drug litter from public places.
- The Panel, when considering best practice, were re-assured that many of the recommended approaches to tackling drug related litter are already being implemented in Southampton, including needle exchange services, effectively sharing information with partners and the prompt cleansing service response to finds.
- New initiatives designed to improve outcomes relating to the number of people rough sleeping, living in unsecure accommodation, and consuming illicit drugs in the city were welcomed by the Panel. It is recognised that these initiatives, in conjunction with existing approaches, will help to contribute to a more sustainable environment to reduce levels of drug litter in Southampton moving forward.
- The Panel expressed concerns that, whilst understanding the decision to close Grosvenor Square Car Park overnight, this could, if not supported by additional measures, potentially lead to the displacement of drug litter to other locations in the city that do not benefit from such regular cleansing. This could therefore present a greater risk to the public.
- The Panel would therefore welcome further analysis of drug litter finds since the night time closure of Grosvenor Square Car Park to better understand the link between car park closure and the location of drug litter finds in the city. This should help to inform future decisions relating to the night time closure of additional city centre multi-storey car parks.
- Information was also presented to the Inquiry Panel by representatives from residents' associations and the Needle Exchange, raising concerns relating to the difficulty reporting incidence of drug related litter to the Council. The concerns primarily focussed on finding out how to report it through the

Council's website. Opportunities therefore exist to improve the reporting processes, making it easier and clearer for members of the public.

- When considering alternative evidence based approaches to reducing drug related litter the Panel consider that the installation of discrete public sharps bins, near to locations where drug litter is a consistent problem, would have a beneficial impact on levels of drug litter in Southampton.
- There are currently no public sharps bins in the city and needle exchange services are not open 24 hours a day. Whilst all Panel Members are in agreement that it is never acceptable to irresponsibly dispose of drug litter, people who inject drugs understandably, for a number of reasons, do not want to carry used needles around with them.
- A logical approach therefore is to make it as easy as possible for people who inject drugs to do the right thing with their used equipment by installing discrete public sharps bins in appropriate locations, and communicate their existence to users through the needle exchange services.
- The final initiative considered by the Inquiry Panel was the potential to establish a drug consumption room in Southampton. The Panel understand that drug consumption rooms have been evidenced to be effective at decreasing public injecting and reducing drug related litter, and, especially when accompanied by the provision of Heroin Assisted Treatment, can also provide additional benefits relating to, for example, reducing harm and engaging people who use drugs in support services.
- Drug consumption rooms are currently illegal in the UK. If they were permitted they could be a local intervention, working in conjunction with, and not at the expense of existing services, responding to the needs of the local drug-using population.
- Whilst the Panel in principle support the establishment of drug consumption rooms, and the positive impact it could have on drug related litter, the Panel recognise that any policy decision would need to be supported by a robust evaluation to fully assess the demand, benefits and value for money of such a facility in Southampton.
- This approach would also need to include working in partnership across local government, providers and with other partners to lobby the Government for a change in legislation relating to drug consumption rooms.

Recommendations

82. Reflecting the key findings and conclusions the following actions are recommended to reduce drug related litter, and the impact of drug related litter in Southampton:
1. **Displacement of drug litter** - Undertake analysis of drug litter finds since the night time closure of Grosvenor Square Car Park to better understand the link between car park closure and the location of drug litter finds in the city. This information should then be used to help inform future decisions relating to the night time closure of additional city centre multi-storey car parks.

2. **Make it clearer how to report drug related litter** - To encourage public reporting, review the location and content of information on the Council's website that explains how to report drug litter and what to do if you find drug litter. This information should be made available to community groups who organise and undertake litter picks.
3. **Extend opening hours of the Southampton Needle Exchange** – To make it easier to dispose of injecting equipment, when recommissioning needle exchange services extend the opening hours of the Southampton Needle Exchange, to include weekend opening, and provide needle exchange services from the Cranbury Avenue Day Centre.
4. **Signpost out of hours services** – To raise awareness, include the location and opening hours of the out of hours needle exchange services on the Council's website, on appropriate needle exchange forums, and request that the information is signposted on the outside of the Southampton Needle Exchange.
5. **Public sharps bins** – Following informed consideration of potential sites and designs, pilot the locations for discrete public sharps bins where drug litter is a persistent problem. Information relating to the effectiveness of the sharps bins should be analysed and the whereabouts of the pilot public sharps bins should be communicated to people who inject drugs through the needle exchange services.
6. **Drug consumption rooms** – Undertake a robust evaluation to fully assess the potential benefits a medically-supervised pilot drug consumption room could bring to Southampton. The evaluation should include consideration of the potential impact on drug related litter, health and criminal justice outcomes, public finances and whether a facility would add value to current services. The provision of Heroin Assisted Treatment from a drug consumption room should also be factored into the analysis, as well as the safety and security of staff.
7. **Drug consumption rooms** – Working in partnership with local authorities, representative bodies, providers and other organisations that support the position, lobby the Government for a change in legislation relating to drug consumption rooms, enabling local commissioners of drug treatment services to commission the establishment of such facilities if local need is evidenced.

Appendices

Appendix 1 –Inquiry Terms of Reference

Appendix 2 – Inquiry Plan

Appendix 3 – Summary of Key Evidence

Appendix 1 – Terms of Reference

Reducing Drug Related Litter in Southampton Terms of Reference and Inquiry Plan

1. Scrutiny Panel membership:

- a. Councillor McEwing
- b. Councillor Coombs
- c. Councillor Fitzhenry
- d. Councillor Fuller
- e. Councillor Noon
- f. Councillor Vassiliou
- g. Councillor Whitbread

2. Purpose:

To identify opportunities to reduce incidence of drug related litter in Southampton.

3. Background:

- Litter related to drug use can cover a range of materials – including syringes, foils, swabs, spoons, plastic bottles and cans.
- Drug litter presents a health risk to the public and council employees, the discovery of which can cause fear, upset and anxiety for individuals and the wider community as well as causing physical injury.
- Action has been taken in Southampton, involving a number of agencies, to reduce incidence of drug related litter.
- Since February 2016 Community Safety have been logging drug litter finds across Southampton. From April 2016 – March 2017 the total number of finds was 7,620 including 7,037 discarded needles.
- Reflecting concerns the recently approved Southampton Drugs Strategy includes, as a key outcome, '*to reduce the amount of drug related litter in the city*'.
- Alternative and innovative approaches exist to improve awareness, reduce the amount of drug litter being discarded, and to lessen the risks and impact on local communities and those employed to clean up the litter.

4. Objectives:

- a) To understand the prevalence and impact of drug related litter in Southampton.
- b) To understand the reasons for the prevalence of drug related litter.
- c) To review progress being made in Southampton to tackle drug related litter.
- d) To understand what is being done to reduce drug related litter elsewhere.
- e) To identify what additional initiatives could work in the city to reduce drug related litter.

5. Methodology:

- a) Benchmarking the current position against other cities
- b) Seek stakeholder views
- c) Undertake desktop research
- d) Identify best practice

6. Proposed Timetable:

Four meetings between October 2017 and March 2018.

7. Draft Inquiry Plan (subject to the availability of speakers)

Meeting 1: 19 October 2017

- Introduction, context and background
 - What is the current position regarding drug related litter in Southampton?
 - Number of finds / trends / comparisons
 - Worst affected areas in Southampton
 - Identification of the groups of people who are discarding the drug related litter
 - Prevalence of drug injecting in the city
 - Impact of drug related litter
- Overview of approaches employed in Southampton to reduce drug related litter
- To identify what is working well and what can be improved in Southampton in relation to approaches employed to reduce drug related litter.

To be invited:

- Cabinet Member
- Public Health / NHS Support Services / Voluntary orgs
- Representatives from City Services / Community Safety / Housing / Integrated Commissioning Unit
- Hampshire Constabulary
- Residents groups

Meeting 2: 23 November 2017

- Examples of good practice and innovation
 - Communicating / reporting
 - Co-ordination of partners
 - Design of public spaces
 - Use and placement of sharps bins
 - Raising awareness / liaising with people injecting drugs

To be invited:

- To be confirmed

Meeting 3: 18 January 2018

- Examples of good practice and innovation
 - Alternatives to public injecting

To be invited:

- To be confirmed

Meeting 4: 8th March 2018

To approve the final report of the inquiry and recommendations.

Appendix 2 - Inquiry Plan

| DATE | MEETING THEME | TOPIC DETAIL | EVIDENCE PROVIDED BY |
|----------|---|---|---|
| 19/10/17 | Agree Terms of Reference and introduction to the inquiry | <p>Introduction, context and background</p> <p>To develop an understanding of the current position in Southampton</p> | <ul style="list-style-type: none"> • Councillor Shields - Cabinet Member for Health and Community Safety • Ray Williams - Chair of the Chapel Residents Association • Lynda Walton - Holyrood Estate Block Representative • Roger Townsend - Friends of Town Quay Park • Dr Anand Fernandes - Consultant in Communicable disease control, Public Health England • Mitch Sanders - Service Director for Transactions and Universal Services, SCC • Ralph Walling – Street Cleansing Manager, SCC • Gavin Derrick - Regulatory Services Team Leader, Environmental Health and Community Safety, SCC • Colin McAllister - Service Development Officer, Integrated Commissioning Unit, SCC/CCG |
| 23/11/17 | The barriers to safe disposal and best practice | Examples of good practice and innovation | <ul style="list-style-type: none"> • Nigel Brunsdon – Injecting Advice.com, member of the UK Harm Reduction Alliance and Deputy Chair of the National Needle Exchange Forum • Carl Nightingale – Employee at the Southampton Needle Exchange with a history of injecting drug use |

| DATE | MEETING THEME | TOPIC DETAIL | EVIDENCE PROVIDED BY |
|----------|----------------------------------|---------------------------------------|--|
| | | | <ul style="list-style-type: none"> • Helen Matthews – Structured Intervention Team Leader, Southampton Drug and Alcohol Recovery Service • Charlotte Matthews – Public Health Consultant, SCC • Jackie Hall – Commissioner, Integrated Commissioning Unit, SCC/CCG |
| 19/12/17 | Visit to the Needle Exchange | | |
| 18/01/18 | Alternatives to Public Injecting | Drug Consumption Rooms | <ul style="list-style-type: none"> • Dr Prun Bijral – Medical Director and Responsible Officer, Change Grow Live (CGL) • Charlotte Matthews – Public Health Consultant, SCC • Dr Jason Horsley - Director of Public Health, SCC • DCI Ben Chivers – Hampshire Constabulary |
| 08/03/18 | Agree final report | Approve report for submission to OSMC | N/A |

The minutes for each meeting, the evidence submitted to the Scrutiny Inquiry Panel and presentations delivered at each meeting is available at: - <http://www.southampton.gov.uk/modernGov/ieListMeetings.aspx?CId=668&Year=0>

Appendix 3 – Summary of Key Evidence

Scrutiny Inquiry Panel – Reducing Drug Related Litter in Southampton

Inquiry Meeting – 19 October 2017

Introduction to the inquiry, context and background

Summary of information provided:

Cabinet Member for Health and Community Safety, SCC – Councillor Shields

- Welcomes the inquiry. Recognition that drug related litter is a problem in urban areas across the country.
- Southampton is proactive at tackling the issue both through reporting and cleaning as well as providing support for individuals with drug problems.
- Keen to understand the extent of the problem in Southampton and to learn about additional opportunities to protect the public and alternative approaches to prevention.

The impact of drug related litter – A residents' perspective

- Ray Williams, Chair of the Chapel Residents Association identified the following issues:
 - Drug Related Litter has increased in the Chapel area due to increased drug dealing in the vicinity, but not necessarily needles;
 - Children have been seen playing 'games' looking for drugs stashed in bushes;
 - Different drug litter depending on residential areas. Student areas more nitrous oxide canisters, cannabis and legal high litter.
 - Prevalence of drug litter is intimidating to residents, creating fear.
- Lynda Walton, Holyrood Estate Block Representative, identified the following issues:
 - Historically needles have been found in open private garages and drug litter has been found in a sandpit that has now been removed;
 - Drug litter is often found by the bin areas where rough sleepers stay. They remove the litter when asked to;
 - Drug litter has not got worse recently;
 - Drug litter impacts on the reputation of the estate and at times has resulted in children not going outdoors to play;
 - A problem that has been raised is the difficulty reporting drug related litter to the council. (It can be found on the Council's website under report an environmental issue)
- Roger Townsend, Friends of Town Quay Park, identified the following issues:
 - Only seen 1 needle in the 4 years he has volunteered as a gardener at Town Quay Park. However, other volunteers have reported finding drug related litter in the park;
 - High shrubbery has been cut down to deter rough sleeping;
 - Concerned as primary school children from the school across the park are encouraged to volunteer.

Dr Anand Fernandes, Consultant in Communicable disease control – Health risk from Needle stick injuries

- The Panel were provided with a [written submission](#) (item 8 – Additional Documents) from Dr Anand Fernandes, Consultant in Communicable disease control, South East Public Health England Centre, on the health risks from needle stick injuries.
- The main health risk from injury due to drug related litter is likely to be from stress and psychological trauma, rather than the transmission of disease.

Dealing with Drug Litter – Mitch Sanders, Service Director for Transactions and Universal Services

- A [presentation](#) (item 8 – Additional Documents) was delivered by Mitch Sanders providing an overview of the approach employed by the City Council to record and remove drug litter in Southampton. Mitch was supported by Gavin Derrick, Team Leader for Environmental Health and Community Safety and Ralph Walling, Street Cleansing Manager.
- The Council is making every effort to remove drug litter before it is encountered by residents and visitors.
- Following a 2015/16 incident SCC started to record drug related litter finds, co-ordinated by Community Safety. The Panel recognised this as a positive development enabling targeting of services and sharing of information.
- The figures reported to the Panel represent needles discarded in public places. Drug litter is a problem in privately owned sites but this is not reported to SCC.
- In 2016/17 the total number of finds recorded was 7,567. Needles are usually found in batches, often within the vicinity of rough sleeper encampments.
- 95% of finds are within the city centre. There is no discernible trend and the data does not clearly identify that drug litter is an increasing problem in Southampton.
- On occasions needles are placed in potentially dangerous locations - Since 2015 there have been two needle stick incidents reported by SCC staff.
- Staff are trained and equipped to deal with drug litter. The risk of harm does have a psychological impact on staff and there is a safe working procedure in place which deals with prevention as well as what to do in the event of injury.
- The Council has trialled closing Grosvenor Square Car Park from 12:00am to 5:30am every night. Further night time car park closures are to follow. It is too early to tell whether this will have an impact on drug related litter city wide.
- To help address drug related litter, and a number of rough sleeper related issues, the Council is in the process of establishing City Welfare Wardens. The wardens will engage with rough sleepers, remove and store unattended items, and remove used needles and drug litter. This follows a successful pilot in Weymouth.
- The City Welfare Wardens will work closely with the homeless support services and outreach teams.
- At the request of the Panel the cost to Transactions and Universal Services identified with removing and recording drug litter was estimated to be circa

£135k per annum. This includes circa £70k for the cost of the 2 City Welfare Wardens (including on-costs).

- The Panel recognised the essential role played by City Council cleaning staff and wanted to record on record their appreciation for the work they do clearing drug litter from public places.

Drug Use in Southampton / Support Services – Colin McAllister, Service Development Officer, Integrated Commissioning Unit

- A [presentation](#) (item 8 – Additional Documents) was delivered by Colin McAllister providing an overview of the needle exchange service in Southampton and the prevalence of drug injecting in the city. Colin was supported by Helen Matthews, Team Manager at the Society for St James (providers of the Needle Exchange Service) and D.C.I Ben Chivers, Hampshire Constabulary.
- The majority of people who inject drugs dispose of their litter responsibly and live in houses. The majority of drug related litter is generated by people sleeping rough or people coming from outside of Southampton. The rough estimate of users disposing of their drug litter irresponsibly in public places was thought to be somewhere between 20 and 50 in Southampton.
- Limited evidence that people injecting performance or image enhancing drugs are disposing of their drug litter irresponsibly in public places.
- The estimated return to the Needle Exchange is 52%. This figure does not factor in needles being returned to the Pharmacy Needle Exchanges or hostels. Needles are also being disposed within sharps bins and placed in domestic waste containers.
- The Needle Exchange is an effective way of engaging with users. Responsible users are encouraged to speak with, and to support, users that dispose of their litter irresponsibly.
- The DCLG funded Homeless Vulnerable Adults Support Team (H-VAST) is a key service in helping to engage with adults leading chaotic lifestyles. People need to care about themselves initially, then they will consider their impact on others and the environment.
- Hampshire Constabulary experience problems with drug users who have chaotic lifestyles. Most users who are stopped by the police declare if they are carrying 'sharps' but some do not because they know that if they are found with needles in their possession it is likely that they will be searched for drugs. This may be a barrier for disposing of drug litter responsibly.
- The potential benefits of supervised drug consumption rooms and heroin assisted therapy in reducing drug related litter were raised. The Panel requested that this be the subject of a meeting of the Inquiry.
- Colin identified the following strengths in the Southampton approach
 - The Needle Exchange Services
 - The work of the Street Homeless Prevention Team, H-VAST and the cleansing teams
 - Cross-agency working
- The following weaknesses were identified:
 - Resources

- Difficulty reporting incidence of drug related litter has been raised by members of the public and Needle Exchange staff.

Conclusions from meeting:

- Southampton has a proactive and largely effective approach to removing drug relating litter in public places. Litter is usually removed before it is found by the general public. It is hoped that the new City Welfare Wardens will further improve the position.
- The approach to recording and sharing data on drug related litter is positive and not followed by all local authorities.
- The impact of the night time closure of SCC car parks on drug related litter, and the potential to displace the problem is not known.
- An opportunity exists to reflect on the comments made about the difficulty reporting incidence of drug related litter to the Council.
- The main health risk from injury due to drug related litter is likely to be from stress and psychological trauma.
- The majority of drug related litter disposed of irresponsibly in public places is by rough sleepers and those not resident in the city who have chaotic lifestyles. The number of people thought to responsible for this drug related litter is between 20 and 50.
- The Needle Exchange service is a cost effective harm reduction service that provides an entry point to treatment and support.

Scrutiny Inquiry Panel – Reducing Drug Related Litter in Southampton

Inquiry Meeting – 23 November 2017

The barriers to safe disposal and best practice

Summary of information provided:

Nigel Brunsdon – Injecting Advice.com, member of the UK Harm Reduction Alliance and Deputy Chair of the National Needle Exchange Forum

- [A presentation](#) (item 7 – Presentation) was delivered by Nigel Brunsdon on reducing incidence of drug related litter and the risk of harm caused by drug related litter. Nigel's advice for Southampton was informed by his Thursday 23rd November visit to services in the city, including Street Cleansing, the Needle Exchange and Community Safety.
- No needles were found in the car parks, but other drug related litter was found.
- The worst area for drug litter was near Six Dials, in close proximity to the Needle Exchange. Litter found included needles and a number of barrels (without needles).
- Some needles were found pushed into the ground, but visible, seemingly in an effort to reduce the risk of harm.
- The biggest drug litter found was empty cans of strong cider and lager.

- Quantities of drug related litter seen in Southampton compares favourably to many other cities.
- Southampton is dealing with drug related litter more effectively than many other cities. Credit to the street cleansing teams for their proactive and reactive services.
- The Needle Exchange provides a good service considering the available resources. The availability of different sized personal sharps bins to fit different clothing is innovative. Staff at the Needle Exchange are knowledgeable.
- Needle Exchange services are not open 24 hours a day. People injecting drugs do not want to carry used needles around with them for a number of reasons.
- Good practice is to put public sharps bins (needle drop boxes) near to locations where drug related litter is a consistent problem. Some public sharps bins are very discrete and can be installed without the public being aware of them.
- Like the wider litter problem in society a small minority of people injecting drugs still won't use the sharps bins to dispose of drug litter safely. This is not acceptable behaviour. However, to minimise drug litter and the risk of harm, a logical approach is to make it as easy as possible for users to do the right thing with their used needles.
- It was recognised that installing public sharps bins is not always popular. However, in Portsmouth since 12 public sharps bins have been installed in public toilets and public libraries there has been no adverse publicity and the level of drug litter has reduced. There are no public sharps bins in Southampton.
- Safe consumption rooms (drug consumption room / safe injecting facility) may also help to reduce drug related litter, as well as helping to address a number of other issues relating to injecting drug use.

Carl Nightingale – Employee at the Southampton Needle Exchange with a history of injecting drug use

- The vast majority of people who inject drugs dispose of their drug litter responsibly. Expectation that only a handful of users are irresponsibly disposing of their needles. The community self-polices itself. Unsafe disposal of drug litter is not acceptable.
- Injecting drug users that have homes tend to store used needles at home. This is not an option for those who are homeless. People would use public sharps bins if located in the right places. They need to be very secure.
- Expectation that a lot of drug litter is going into litter bins on the street or into communal tower block bins.
- A safe consumption room is a good idea for injecting drug users that are homeless in the city. At the moment users are collecting sterile equipment from the Needle Exchange, that has access to Naloxone and a clean toilet, and are injecting drugs on the streets in unhygienic environments.
- Pictures of unacceptable disposal of drug litter is displayed in the Needle Exchange to outline what is not appropriate. Staff try to encourage responsible users to promote responsible usage by others.

- The location of the 6 needle exchange pharmacies in Southampton is signposted in the Needle Exchange.
- Whilst recognising the small number of people injecting drugs that are irresponsibly disposing their drug litter in Southampton it is possible that, with access to peer support declining, newer users are not being informed as readily about good practice with regards to disposing drug litter.

Charlotte Matthews – Public Health Consultant, SCC

- Charlotte provided an overview of research undertaken on reducing levels of drug related litter. The specific interventions which are recommended within the literature review include:
 - Needle exchange services
 - A police protocol regarding the possession of used needles and other equipment
 - Prompt cleansing service response to finds
 - Sharps bins, with the type, siting and promotion to be determined locally
 - Safe Injecting Facilities

Conclusions from meeting:

- Whilst recognising that drug related litter is an issue in Southampton the quantity of drug related litter observed compares favourably to many other cities.
- Southampton is dealing with drug related litter more effectively than many other cities. Credit to the street cleansing teams for their proactive and reactive services.
- The Needle Exchange provides a good service.
- To minimise drug litter and the risk of harm, a logical approach is to make it as easy as possible for users to do the right thing with their used needles. This includes installing public sharps bins near to locations where drug related litter is a consistent problem.
- It was recommended that an appropriate public sharps bin is installed near to the Needle Exchange as soon as possible for a trial period. The impact should be monitored and outcomes discussed at the 18 January 2018 meeting of the Panel.
- That the potential for safe injecting facilities to reduce drug related litter, and address other drug related issues, be considered at the next meeting.

Scrutiny Inquiry Panel – Reducing Drug Related Litter in Southampton

Inquiry Meeting – 18 January 2018

Alternatives to public injecting

Summary of information provided:

Dr Prun Bijral – Medical Director & Responsible Officer, Change Grow Live (CGL)

- [A presentation](#) (item 7 – Presentation 1) was delivered by Dr Prun Bijral on drug consumption rooms (DCRs). Drug consumption rooms are professionally supervised healthcare facilities where drug users can consume illicit drugs in safer conditions. They are not currently legal within the UK but have been operating in Europe, Australia and Canada for the past three decades.
- Dr Bijral outlined the range of services that can be provided from DCRs and the findings from the systematic [review of evidence](#) by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). The review (attached as Appendix 1 to the Inquiry Panel papers) identified a number of benefits associated with DCRs, including decreasing public injecting and reducing the number of syringes discarded in the vicinity of the facility.
- The evidence does not suggest that a DCR increases drug use or frequency of injecting in the surrounding environment, or increases drug dealing, drug trafficking or drug related crime in the surrounding environment.
- The possibility of providing Heroin Assisted Treatment (HAT) from a DCR was discussed. HAT refers to the prescribing of synthetic, injectable heroin, administered under strict controls, to people who do not benefit from, or cannot tolerate treatment, with one of the established drugs used in opiate replacement therapy like methadone or buprenorphine. The UK Government supports HAT from a health and crime reduction perspective.
- The potential for HAT to transform people's lives, deliver value for money and to reduce criminal activity was outlined to the Panel.
- DCRs and HAT could, if permitted, potentially form part of a strategic approach to reduce the harm caused by the misuse of drugs. It was recognised that DCRs /HAT should not be developed at the detriment of existing services and would need to be integrated into existing provision to maximise potential.
- CGL are developing their theoretical models of DCRs and HAT as a service which works across the country.

Case Study – Barcelona Drug Consumption Rooms

- At the meeting a video outlining the impact of drug consumption rooms in Barcelona was played - <https://www.youtube.com/watch?v=YhLoLbORzi0>.
- Since the DCRs opened in the city of Barcelona they have gone from collecting a monthly average of over 13,000 syringes in 2004 to around 3,000 a month in 2012.

Charlotte Matthews – Public Health Consultant, SCC

- [A presentation](#) (item 7 – Presentation 2) was delivered by Charlotte Matthews providing a Southampton perspective on the potential usage of a DCR in the city.
- It was understood that, if permitted, a DCR could be a local intervention that responds to the needs of the local drug-using population.
- Key Southampton statistics presented include:
 - 43 people died from drugs from 2014-16: Increasing drug related deaths, rate higher than England
 - Estimated 1483 opiate and/or crack users, including an estimated 636 who inject
 - 219 distinct people were recorded as using the needle exchange in quarter 2 of 2017/18. Estimated to be approximately 600 people who used the needle exchange in 2017. This excludes those that use the 6 pharmacies that operate needle exchanges.
- People who use drugs are unlikely to travel to a DCR. Therefore, any potential locality would need to demonstrate that there is a sufficiently concentrated drug-using population that would use the facility and provide a return on investment.
- Reflecting the fact that any new service would need to be integrated with existing services, the Panel were informed about a number of services currently being provided in Southampton to support people who use drugs, many of which lead chaotic lifestyles, including:
 - Treatment and harm minimisation services, including needle exchange
 - Homeless Vulnerable Adult Support Team (H-VAST) pilot
 - Street-based Vulnerable Adults review.

DCI Ben Chivers – Hampshire Constabulary

- DCI Chivers provided an initial response on behalf of Hampshire Constabulary to the potential of a DCR and HAT in Southampton.
- Hampshire Constabulary support exploring the evidence and benefits of drug consumption rooms as part of the Drugs Strategy and our commitment to dealing with this issue in partnership.
- Recognise that the potential benefits of both DCRs and HAT is greater than just reducing drug related litter and understand that Southampton would be an ideal area within Hampshire to explore such an approach.
- Any decision to formally support implementation would need to be taken at an executive level within the Constabulary, with legal advice and potentially National Police Chief Council awareness, as the first English or Welsh area to pursue the route. Director of Public Prosecution involvement would also be key, as would British Transport Police and Thames Valley Police who also provide operational Policing services within our area.
- We would also be keen to see any policy change supported by a fully funded, robust research evaluation, designed in advance, to fully assess the benefits across a wide area of society gains including health, public safety and cost.

Conclusions from meeting:

- Drug consumption rooms have been evidenced to be effective at decreasing public injecting and reducing drug related litter.
- DCRs, especially those providing Heroin Assisted Treatment (HAT), can also provide additional benefits relating to, for example, reducing harm and engaging people who use drugs in support services.
- DCRs are currently illegal in the UK. If they were permitted DCRs could be a local intervention, working in conjunction with existing services, which responds to the needs of the local drug-using population.
- DCRs /HAT should not be developed at the detriment of existing services.
- Any policy decision relating to DCRs in Southampton would need to be supported by a robust evaluation to fully assess the benefits and value for money.
- This approach would need to include working in partnership across local government, providers and with other partners to lobby the Government for a change in legislation relating to DCRs.

Reducing Drug Related Litter in Southampton Scrutiny Inquiry - Conclusions and Recommendations

Conclusions were drawn from each meeting and disseminated to the Panel. All of the reports, presentations and minutes from the inquiry meetings can be found here:

<http://www.southampton.gov.uk/modernGov/ieListMeetings.aspx?CId=668&Year=0>

Conclusions

- The inquiry has identified that drug related litter is an issue of concern in Southampton that, despite not appearing to be as pervasive as in some other cities, is creating an element of fear, damaging the reputation of certain communities, and presents a potential health risk, particularly to the people who inject drugs and those working with people who inject drugs and clean-up drug litter.
- The Panel understand that the position in Southampton compares favourably to some other cities partly due to the effective and proactive work of services delivered by the Council, and partners, to limit the impact and prevalence of drug litter. In particular the Panel recognise the essential role played by the City Council's cleaning staff clearing drug litter from public places.
- The Panel, when considering best practice, were re-assured that many of the recommended approaches to tackling drug related litter are already being implemented in Southampton, including needle exchange services, effectively sharing information with partners and the prompt cleansing service response to finds.
- New initiatives designed to improve outcomes relating to the number of people rough sleeping, living in unsecure accommodation, and consuming illicit drugs in the city were welcomed by the Panel. It is recognised that these initiatives, in conjunction with existing approaches, will help to contribute to a more sustainable environment to reduce levels of drug litter in Southampton moving forward.
- The Panel expressed concerns that, whilst understanding the decision to close Grosvenor Square Car Park overnight, this could, if not supported by additional measures, potentially lead to the displacement of drug litter to other locations in the city that do not benefit from such regular cleansing. This could therefore present a greater risk to the public.
- The Panel would therefore welcome further analysis of drug litter finds since the night time closure of Grosvenor Square Car Park to better understand the link between car park closure and the location of drug litter finds in the city. This should help to inform future decisions relating to the night time closure of additional city centre multi-storey car parks.
- Information was also presented to the Inquiry Panel by representatives from residents' associations and the Needle Exchange, raising concerns relating to the difficulty reporting incidence of drug related litter to the Council. The concerns primarily focussed on finding out how to report it through the

Council's website. Opportunities therefore exist to improve the reporting processes, making it easier and clearer for members of the public.

- When considering alternative evidence based approaches to reducing drug related litter the Panel consider that the installation of discrete public sharps bins, near to locations where drug litter is a consistent problem, would have a beneficial impact on levels of drug litter in Southampton.
- There are currently no public sharps bins in the city and needle exchange services are not open 24 hours a day. Whilst all Panel Members are in agreement that it is never acceptable to irresponsibly dispose of drug litter, people who inject drugs understandably, for a number of reasons, do not want to carry used needles around with them.
- A logical approach therefore is to make it as easy as possible for people who inject drugs to do the right thing with their used equipment by installing discrete public sharps bins in appropriate locations, and communicate their existence to users through the needle exchange services.
- The final initiative considered by the Inquiry Panel was the potential to establish a drug consumption room in Southampton. The Panel understand that drug consumption rooms have been evidenced to be effective at decreasing public injecting and reducing drug related litter, and, especially when accompanied by the provision of Heroin Assisted Treatment, can also provide additional benefits relating to, for example, reducing harm and engaging people who use drugs in support services.
- Drug consumption rooms are currently illegal in the UK. If they were permitted they could be a local intervention, working in conjunction with, and not at the expense of existing services, responding to the needs of the local drug-using population.
- Whilst the Panel in principle support the establishment of drug consumption rooms, and the positive impact it could have on drug related litter, the Panel recognise that any policy decision would need to be supported by a robust evaluation to fully assess the demand, benefits and value for money of such a facility in Southampton.
- This approach would also need to include working in partnership across local government, providers and with other partners to lobby the Government for a change in legislation relating to drug consumption rooms.

Recommendations

Reflecting the key findings and conclusions the following actions are recommended to reduce drug related litter, and the impact of drug related litter in Southampton:

- 1. Displacement of drug litter** - Undertake analysis of drug litter finds since the night time closure of Grosvenor Square Car Park to better understand the link between car park closure and the location of drug litter finds in the city. This information should then be used to help inform future decisions relating to the night time closure of additional city centre multi-storey car parks.

2. **Make it clearer how to report drug related litter** - To encourage public reporting, review the location and content of information on the Council's website that explains how to report drug litter and what to do if you find drug litter. This information should be made available to community groups who organise and undertake litter picks.
3. **Extend opening hours of the Southampton Needle Exchange** – To make it easier to dispose of injecting equipment, when recommissioning needle exchange services extend the opening hours of the Southampton Needle Exchange, to include weekend opening, and provide needle exchange services from the Cranbury Avenue Day Centre.
4. **Signpost out of hours services** – To raise awareness, include the location and opening hours of the out of hours needle exchange services on the Council's website, on appropriate needle exchange forums, and request that the information is signposted on the outside of the Southampton Needle Exchange.
5. **Public sharps bins** – Following informed consideration of potential sites and designs, pilot the locations for discrete public sharps bins where drug litter is a persistent problem. Information relating to the effectiveness of the sharps bins should be analysed and the whereabouts of the pilot public sharps bins should be communicated to people who inject drugs through the needle exchange services.
6. **Drug consumption rooms** – Undertake a robust evaluation to fully assess the potential benefits a medically-supervised pilot drug consumption room could bring to Southampton. The evaluation should include consideration of the potential impact on drug related litter, health and criminal justice outcomes, public finances and whether a facility would add value to current services. The provision of Heroin Assisted Treatment from a drug consumption room should also be factored into the analysis, as well as the safety and security of staff.
7. **Drug consumption rooms** – Working in partnership with local authorities, representative bodies, providers and other organisations that support the position, lobby the Government for a change in legislation relating to drug consumption rooms, enabling local commissioners of drug treatment services to commission the establishment of such facilities if local need is evidenced.

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Agenda Item 8

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| DECISION-MAKER: | CABINET COUNCIL | | |
| SUBJECT: | CLEAN BUS TECHNOLOGY FUND (CBTF) | | |
| DATE OF DECISION: | 17 APRIL 2018 16 MAY 2018 | | |
| REPORT OF: | CABINET MEMBER FOR ENVIRONMENT AND TRANSPORT | | |
| <u>CONTACT DETAILS</u> | | | |
| AUTHOR: | Name: | David Garney | Tel: 023 8083 3657 |
| | E-mail: | David.Garney@southampton.gov.uk | |
| Director | Name: | Mike Harris | Tel: 023 8083 2882 |
| | E-mail: | Mike.Harris@southampton.gov.uk | |

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| STATEMENT OF CONFIDENTIALITY | |
| Not applicable. | |
| BRIEF SUMMARY | |
| <p>To consider the report of the Cabinet Member for Environment and Transport seeking approval for funding awarded to Southampton City Council (SCC) from the Department for Transport's (DfT) Joint Air Quality Unit (JAQU).</p> <p>SCC, in partnership with four bus companies, has secured £2,677,835 from the Government's Clean Bus Technology Fund (CBTF) to retrofit buses with technology that will reduce harmful emissions. Southampton is one of 20 cities from across the country who have won a share of a £40 million funding pot. This funding, that has been allocated by JAQU, is aimed specially at lowering emissions from older buses before the introduction of the Southampton Clean Air Zone.</p> <p>The total funding of £2,677,835 will be delivered over two financial years, £1,177,835 in 2017-2018 and £1,500,000 in 2018-2019, which will be allocated to the four Southampton bus operators as part of the contract agreement framework.</p> <p>As part of this project, there is £815,680 of match funding over the two years that has been secured from bus operators.</p> | |
| RECOMMENDATIONS: | |
| CABINET: | |
| | <p>(i) SCC will administer and monitor the use of CBTF grant funding approved by Council to reimburse bus operators on receipt of invoices following the purchase and installation of the CBTF approved technology from their chosen suppliers to support the Council's commitment to reduce emissions and improve air quality within the Southampton area.</p> |
| COUNCIL: | |

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| | (i) | To accept funding totalling £2,677,835, awarded by the DfT for 2017/2018 and 2018/2019. |
| | (ii) | To approve expenditure of £2,677,835 by the end of 2018/19 by way of reimbursement to bus operators on receipt of invoices following the purchase and installation of CBTF approved technology from their chosen suppliers. |
| REASONS FOR REPORT RECOMMENDATIONS | | |
| 1 | | SCC have been successful in securing funding to help improve the air quality in Southampton by retrofitting technology to 145 identified diesel buses to reduce harmful emissions. This is a positive initiative ahead of the introduction of the Southampton Clean Air Zone by the end of 2019. |
| ALTERNATIVE OPTIONS CONSIDERED AND REJECTED | | |
| 2 | | An option is not to approve the receipt of grant funding from the DfT. This would result in not being able to carry out the proposed project as outlined in the bid document, and therefore not contributing to the reduction of air pollution in Southampton which would be of detriment to the City. |
| DETAIL (Including consultation carried out) | | |
| 3 | | <p>What problem / opportunity is being addressed?</p> <p>The National Air Quality Plan for Nitrogen Dioxide in UK (2017) has identified Southampton as one of five UK cities, outside London, that are not expected to meet national air quality limit values by 2020. As such Southampton is mandated to establish a Clean Air Zone (CAZ) by the end of 2019. This project will form part of the SCC's Clean Air Zone Strategy and Clean Air Zone Implementation Plan (adopted in November 2016) of which the aim is to bring about compliance with the air quality objectives within the shortest possible time. At present the Council is pursuing CAZ options that could potentially include a penalty charge for non-compliant buses operating within its boundary. A recommendation of the CAZ Strategy and Implementation Plan is to introduce retrofit for buses as this is an effective mechanism for delivering direct emission reductions on a voluntary basis before the introduction of a CAZ. This CBTF funding bid addresses the priorities of the CAZ Strategy by collaborating and supporting operators to retrofit pre-Euro VI buses between now and 2019 with Selective Catalytic Reduction Technology (SCRT) and bring forward the benefits of reducing NO2 emissions while also ensuring operators are prepared for the introduction of the CAZ. SCRT technology will achieve reductions in Particulate matter pollutants from diesel exhaust gas as well as NO2. On official tests, harmful gasses such as Particulate Matter can be reduced by over 98%.</p> |
| 4 | | <p>Why is it important to address this?</p> <p>The bus network in Southampton is comprehensive and is experiencing passenger growth, helping to provide an attractive alternative to the private car, thereby supporting more sustainable travel patterns. In 2016/17 there were 21.2m passenger journeys in the city on a total bus fleet of 255 vehicles. Buses in the current fleet contribute typically between 3.5 and 8.5% of the NO2 emissions by source apportionment across 9 monitored sites but rising to as high as 20% and 42% on two monitored corridors with the highest frequency bus services. Operators have advised us that by late 2018/early 2019, there will be 110 Euro VI standard buses operating on routes in and</p> |

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| | into the city. This would mean that there would be 145 buses operating in Southampton that would not be CAZ compliant. This CBTF retrofit bid would bring all of these remaining 145 pre-Euro VI standard vehicles into compliance before the commencement of the Southampton CAZ in March 2019. |
| 5 | <p>What's the solution being proposed?</p> <p>SCC, in partnership with four bus companies currently identified as not meeting the proposed standards, has secured £2,677,835 from the Government's CBTF to retrofit buses with technology that will reduce harmful emissions. Southampton is one of 20 cities from across the country who have won a share of a £40 million funding pot. This funding, that has been allocated by the JAQU, is aimed specially at lowering emissions from buses.</p> <p>The programme of retrofitting these older buses will commence in spring 2018 and will take approximately ten months to fully retrofit all 145 identified vehicles. The bus operators will be responsible for procuring the equipment through the accredited suppliers within the overall approved funding allocation. SCC will retain the grant funding to be allocated to operators through a contractual agreement framework. This approach has previously been adopted by SCC and the operators for the Department for Transport's Better Bus Area Fund (2012) as well as other funding streams involving the bus industry and ensures compliance with EU state aid and procurement rules.</p> |
| 6 | <p>Process</p> <p>SCC has issued a Project Inception Document (PID) to all local bus operators. This sets out the process for governance of award of CBTF funds to operators, and the financial process for claiming funding.</p> |
| 7 | <p>Monitoring and evaluation.</p> <p>SCC will need the bus operators to provide evidence to demonstrate the NO2 emissions before the installation of the SCRT technology and after the installation of the technology to determine and monitor both the reduction in emissions and the success of the programme. It is anticipated that the SCRT technology will bring the pre Euro VI buses up to the equivalent Euro VI standard. This information will be used to produce an evaluation report at the end of CBTF retrofit programme for Southampton, and will assess the effectiveness and efficiency of the initiative during and after implementation.</p> |
| RESOURCE IMPLICATIONS | |
| <u>Capital/Revenue</u> | |
| 8 | Clean Bus Technology Fund Capital Grant of £1,177,835 in 2017-2018 and £1,500,000 in 2018-2019, which will be allocated to the four Southampton bus operators as part of the contract agreement framework. The total grant to SCC is £2,677,835. |
| 9 | As part of this project, there is £815,680 of match funding over the two years that has been secured from bus operators towards vehicle and engine refurbishments, fuel additives that reduce nitrogen dioxide emissions, driver training and fuel efficiency driver aids. |

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| <u>Property/Other</u> | |
| 10 | No conflict. |
| LEGAL IMPLICATIONS | |
| <u>Statutory power to undertake proposals in the report:</u> | |
| 11 | Air Quality Management Areas (AQMA's) together with the associated emission standards and access restrictions are designated in accordance with the Environment Act 1995. Clean Air Zones (charging zones) are established in accordance with the Transport Act 2000. S.1 Localism Act 2011 (the general power of competence) allows a local authority to do anything it considers necessary or appropriate to deliver any of its statutory functions including those related to improving air quality within the City. This would include introducing grant and contract funding schemes to support modal shift and vehicle emission compliance to support the introduction of CAZ's and reduction of emissions. |
| <u>Other Legal Implications:</u> | |
| 12 | A variety of associated secondary legislation supports emission reduction and clean air zone initiatives including PPG 16 (planning policy guidance), transport and environmental legislation and regulations and guidance supporting the same. In implementing a CAZ and measures designed to improve emission standards and air quality the Council must have regard to s.149 of the Equalities Act 2010 (the public sector equality duty) to ensure the proposals put in place proactively address the need to eliminate direct and indirect discrimination (including where these have positive impacts such as improving air quality in areas where there is a high proportional of individuals having protected characteristics or where they are disproportionately affected by emission levels due to disability and health related matters etc.). In addition, the Council must ensure that the proposals have regard to the right to respect private and family life and impact on property rights etc. protected under the Human Rights Act 1998. |
| RISK MANAGEMENT IMPLICATIONS | |
| 13 | The participating bus operators are working with their chosen suppliers to install the retrofit technology to vehicles identified in their respective fleets. SCC have advised the four participating bus operators that they will need to meet the cost of any bus retrofit that is completed and that once the CBTF grant has been received from Government (in two payments one for each of the two financial years), they would then be reimbursed by SCC in arrears for the work completed.. |
| POLICY FRAMEWORK IMPLICATIONS | |
| 14 | SCC is a Local Transport Authority as prescribed in the Transport Act 2000 and the Council's relevant Policy Framework is the City of Southampton Local Transport Plan (LTP) 2011-2031. The proposals in this report are not contrary to the requirements of the Policy Framework. |

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| KEY DECISION? | Yes | |
| WARDS/COMMUNITIES AFFECTED: | All Southampton Wards and Communities | |
| <u>SUPPORTING DOCUMENTATION</u> | | |
| Appendices | | |
| 1. | Southampton City Council CBTF Bid – November 2017 | |
| 2. | Equality and Safety Impact Assessment | |
| Documents In Members' Rooms | | |
| 1. | None. | |
| Equality Impact Assessment | | |
| Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out. | | Yes/No |
| This initiative will require a light touch ESIA, as there will be positive impacts arising from reduction of emissions on those having protected characteristics, and the proposals directly impact on the natural environment. | | Yes |
| Privacy Impact Assessment – Not applicable | | |
| Do the implications/subject of the report require a Privacy Impact Assessment (PIA) to be carried out. | | Yes/No |
| | | No |
| Other Background Documents | | |
| Other Background documents available for inspection at: Strategic Transport, Transport Policy Team, Civic Centre First Floor. | | |
| Title of Background Paper(s) | Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable) | |

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E01 Strategic alignment 20%

How does the project deliver against the objectives of the Clean Bus Technology Fund and form part of the areas wider air quality plan?

Project Description: Southampton City Council (SCC) working in partnership with the main bus operators (First Group, Bluestar, Unilink, Xelabus and Wheelers Travel) that provide bus services in Southampton to reduce local roadside NO₂ concentrations. The project will retrofit Clean Vehicle Retrofit Accreditation Scheme (CVRAS) accredited Selective Catalytic Reduction Technology (SCRT) equipment to 145 buses that currently are between Euro III and Euro V standard during 2017-18 and 2018-19. This will ensure that the vehicles achieve the desired reductions in NO₂ emissions in preparation for the implementation of the Southampton Clean Air Zone (CAZ) in March 2019. Currently there are 56 Euro VI buses operating in Southampton, with a further 52 new Euro VI buses due to be delivered by 2018. Accounting for these, the 145 buses represent all of the remaining non-Euro VI buses that will be operating in March 2019 in Southampton and the wider area via services beyond the city including those to Totton (the part of New Forest DC mentioned in the National Air Quality Plan for Nitrogen Dioxide in UK), Eastleigh and Winchester - where high concentrations of NO₂ exist in AQMAs.

Details of the buses that would be retrofitted, the Euro standard and age of the buses and routes:

The retrofit will cover 145 pre-Euro VI standard buses run on radial services into central Southampton. In total 3 Euro II buses, 52 Euro III buses, 32 Euro IV buses and 58 Euro V buses will be retrofitted. Vehicle ages of the 145 buses are as follows: 1x 1999; 1x 2000; 3x 2002; 1x 2004; 13x 2005; 15x 2006; 7x 2007; 11x 2008; 26x 2009; 2x 2010; 1x 2012; 23x 2013; 22x 2014 and 19x 2015). These buses operate on First Bus routes 2, 3, X4, X5, 6, 7, 8, 9, 11, 12 and 13; Bluestar routes 1, 2, 3, 4, 5, 6, X7, X7R, 8, 9, 11, 12, 16, 17, 18 and Quay Connect; Unilink routes U1, U2, U6, U9; Wheelers routes W1,301,302; and Xelabus route X4. Fifteen of these routes extend outside of Southampton (Totton, Eastleigh and Winchester) and improvements to the bus fleet will bring additional air quality benefits to AQMAs in these areas.

The Accredited Technology we propose to use: The scheme proposes to use SCRT retrofit technology. SCRT is an accredited technology and enables harmful emissions such as NO₂, Diesel Particulates, Carbon Monoxides and Hydrocarbons to be reduced by up to 95%. Retrofitting of SCRT has been successfully delivered for Euro II, III, IV and V diesel buses. These SCRT systems have been robustly tested and shown to meet the Euro VI equivalent designated emissions under CVRAS.

An explanation if you are submitting a bid on behalf of more than one local authority.

SCC is the sole authority for this submission, which is supported by Hampshire County Council, Eastleigh Borough Council and New Forest District Council – see their formal letters of support which are attached in the Technical/Commercial folder.

How this project fits into the area's wider air quality plan:

Southampton is the eighth most polluted city in the UK, accounting for 100 avoidable deaths each year. The National Air Quality Plan for Nitrogen Dioxide in UK (2017) has identified Southampton as one of five UK cities, outside London, that are not expected to meet national air quality limit values by 2020. As such Southampton is mandated to establish a CAZ by the end of 2019. This project will form part of the SCC's Clean Air Zone Strategy and Clean Air Zone Implementation Plan (adopted in November 2016) of which the aim is to bring about compliance with the air quality objectives within the shortest possible time. At present the Council is pursuing CAZ options that are likely to include a penalty charge for non-compliant buses operating within its boundary. A recommendation of the CAZ Strategy and Implementation Plan is to introduce retrofit for buses as this is an effective mechanism for delivering direct emission reductions. This CBTF funding bid addresses the priorities of the CAZ Strategy by collaborating and supporting operators to retrofit pre-Euro VI buses between now and 2019 with SCRT and bring forward the benefits of reducing NO₂ emissions while also ensuring operators are prepared for the introduction of the CAZ.

Alongside addressing the EU Directive exceedance, SCC has a responsibility to undertake Local Air Quality Management (LAQM) through review and assessment of monitoring data. The LAQM process has resulted in the designation of 10 Air Quality Management Areas (AQMA's) due to exceedances of the annual mean NO₂ objective. These exceedances result from road transport, therefore a programme to retrofit buses that regularly operate through these AQMA's will have a significant positive impact on concentrations. Once the 145 buses are retrofitted, the emission reductions will be immediate with this benefit subsequently resulting in reductions in NO₂ concentrations in AQMA and more widely across the city on main bus corridors.

Explanation of any other benefits beyond NO₂ reductions expected e.g. reduction in emissions of carbon dioxide (CO₂) and equivalents.

SCRT technology will achieve reductions in Particulate matter pollutants from diesel exhaust gas as well and NO₂. On official tests, harmful gasses such Particulate Matter can be reduced by over 98%.

E02 Delivering air quality benefits 20%

How does the project deliver improvements in air quality?

Demonstrate how the project will contribute to bringing local NO₂ concentrations within statutory limits¹ within the shortest possible time. Shorter timescales for compliance will be favoured.

The bus network in Southampton is comprehensive and is experiencing passenger growth, helping to provide an attractive alternative to the private car, thereby supporting more sustainable travel patterns. In 2016/17 there were 21.2m passenger journeys in the city on a total bus fleet of 255 vehicles. All of the ten designated Air Quality Management Areas (AQMAs) in the city (shown on Figure 1 in **F01 Air Quality**) have buses travelling through them. Buses in the current fleet of 255 vehicles contribute typically between 3.5 and 8.5% of the NO₂ emissions by source apportionment across 9 monitored sites but rising to as high as 20% and 42% on two monitored corridors with the highest frequency bus services*. Operators have advised us that by late 2018/ early 2019, there will be 110 Euro VI standard buses operating on routes in and into the city, based on current vehicle requirements (which are subject to change in light of operator network reviews). These Euro VI vehicles will either be purchased new or cascaded from elsewhere.

This would mean that there would be 145 buses operating in Southampton that would not be CAZ compliant. If successful, this CBTF retrofit bid would bring all of these remaining 145 pre-Euro VI standard vehicles into compliance before the commencement of the Southampton CAZ in March 2019. The programme of retrofitting would commence in mid-March 2018 and will take approximately nine months to fully retrofit the 145 identified vehicles, with the retrofit programme complete by early December 2018. As each vehicle is completed and tested we would expect there to be air quality benefits that would be realised immediately.

The accredited SCR technology identified for this provided by the suppliers we have currently identified (Eminox, HJS and Green Urban) and have been robustly tested to reduce emissions of NO_x and NO₂ by up to 99%, and particulate matter (PM_{2.5} & PM₁₀) by 95%. To ensure that local NO₂ concentrations are brought down the suppliers would undertake a full detailed survey of the buses to be retrofitted to validate the condition of the vehicles and prioritise those that the suppliers are already familiar with. A Gantt chart provided in section E03 setting out the approach to implementation.

Parts will then be ordered and a number of vehicles will be fitted with Temperature/NO_x Sensors in order to carry out in-service datalogging on the buses while they operate on their normal bus routes. Any design work or prototyping will be done during the first 6 weeks while waiting for the key components to arrive. On arrival of the parts a “First Off” system will be built and then installed on each of the different vehicle types. A post emissions measurement and system sign-off will then take place prior to finalising the timeframes for the completion of the retrofit programmes with bus operators.

The retrofit installations would take place within the four bus operators’ depot premises, with the accredited suppliers fitting SCRT technology to up to three vehicles per week. Where possible local specialists will be contracted to work with the supplier’s installation team. Local bus operators have the skills and experience to ensure they can maintain the systems well throughout the 5 years that the vehicles are expected to remain in service. Bus operators will select one of three suppliers of CVRAS Accredited Technology retrofit systems:

Eminox’s SCRT system is CVRAS approved and is capable of reducing NO_x and NO₂ by 99%, and particulate matter by 95%. It has been successfully fitted to 4,000 vehicles across Europe, including 2,000 vehicles in the UK and was used in 12 projects who have previously been successful in securing funding via the CBTF/CVTF. SCRT systems are designed for each each make and model of bus. Eminox Generation 3 catalyst technology developed by Johnson Matthey is supplied as standard with all our SCRT systems. They are designed to be highly reactive on NO₂. On a standard bus tested at Millbrook, the system can achieve NO₂ reductions of 99.5 % (for an ADL E400 Euro V)

HJS’ Real Blue SCRT system combines a CRT system with an SCR system. This system has been Millbrook tested and TfL/DfT approved for the ULEZ and CAZ’s. For Euro V vehicles tested, reductions of 99% of NO_x have been achieved. It has been successfully fitted to 3,000 vehicles across Europe including vehicles in the fleets of over five operators of TfL bus services. The Real Blue system is in compliance with TfL Euro 6 standards and will be CVRAS approved imminently.

GreenUrban’s “ecoNO_xt Generation 6” retrofit SCRT system – which combines a DPF (Diesel Particulate Filter) and DOC (Diesel Oxidation Catalyst) to reduce CO, HC and Particulate with SCR (Selective Catalytic Reduction) has been shown in Millbrook testing for a Euro 5 ADL Enviro 400 to deliver a 99.2% reduction in NO_x/NO₂, hence meeting the Euro VI equivalent designated emissions under the Clean Vehicle Retrofit Accreditation Scheme (CVRAS). The system comes complete with an ECU, Adblue Tank, pump & injector,

*For Stage 3 assessment, please refer to “F01 Air Quality” – which sets out more detail on how the Southampton CBTF retrofit project will contribute to bringing local NO₂ concentrations within statutory limits within the shortest possible time

pre/post NOx sensors, temperature/ back pressure and Load/Speed sensors to help calibrate the correct dosing within the exhaust flow. The system is expected to be CVRAS approved in the coming weeks.

Provide details of features such as on-board diagnostic (OBD) systems and the vehicles' capacity to impose a 'limp-home mode' operation, as described in the Clean Vehicle Retrofit Accreditation Scheme technical requirements.

The OBD systems provided by the three suppliers of SCRT are summarised below:

The **Eminox SCRT** system is designed to fully integrate with the vehicles' OBD and uses a Control and Diagnostics Interface (CADI). This integrates with the vehicle's OBD to actively manage SCRT systems and optimise performance. The CADI displays information on NOx reduction, Ad Blue Level & Back Pressure. Where limp mode (vehicle de-rate) is supplied on the original vehicle, the upgrade will replicate the original bus procedure. The OBD integration complies with CVRAS accreditation. There is integration with the vehicle MIL lights, Urea level and Engine derate alarms and these are displayed in the same manner as the original system. Eminox conduct extensive development and road testing to ensure every system has fully integrated OBD as designed by the OEM.

The **HJS Real Blue SCRT** system integrates fully with the vehicles original OBD systems (Euro 4/5) and the de-rate or limp home mode remains unaffected. The HJS After-treatment Control Unit (ACU) is connected via CAN-bus to the vehicles' ECU and transmits error codes to the vehicles diagnostic system. Full OBD integration is provided for all Euro 4/5 applications. For all Euro 3 applications all diagnostics and warnings are controlled by the HJS system as there is no existing after treatment system installed. As the de-rate function is not available on Euro 3 applications, the vehicle will continue to operate as normal in these circumstances.

GreenUrban's "ecoNOxt generation 6" system - has its own "On-Board Diagnostics" utilising the "engine out" and "tailpipe" NOx sensors which measures "Real-Time" NOx emissions reductions that get stored within the ECU for downloading via a Windows Friendly Software or through a Telematics Package. The system also comes with sensors to measure Adblue Level and Adblue Pressure and a visual display to warn the bus operator of the Adblue Levels which remains in the system. The sensors interface with the vehicles Can-Bus System so that if the operator fails to replenish the Adblue it will invoke a "Limp Home" Mode. Once the Adblue is replenished it is picked up by the systems ECU and normal operation/dosing will be resumed.

Provide details of the real time, or near to real time remote monitoring equipment (telematics) you propose to install and explain how tailpipe emissions will be monitored once the retrofits are complete (mandatory requirement).

Eminox – If chosen by operators, the Eminox SCRT system will be supplied with a telematics system using validated components from established telemetry system providers that will transmit real time performance data via our control and Diagnostics Interface (CADI). This allows real time monitoring of NOx, urea levels and DPF back pressure. Performance is reported by a telemetry system via a web based data reporting system. This can show that the system is operating as intended and provide maintenance and service triggers for operators. The telemetry provides detailed data tracking of tailpipe emissions by time and location.

HJS - If chosen by operators, the HJS telematics system is fully integrated with the HJS after treatment system. The HJS ACU supplies the telematics system with power and also supplies the unit with all of the system data required for transmission via the telematics unit. The telematics system uploads every 2 minutes of operation and provides the data measurements in real time via GSM on exhaust gas temperature upstream DOC [°C]; exhaust gas temperature upstream SCR [°C]; exhaust gas temperature downstream SCR [°C]; engine intake temperature [°C]; AdBlue® tank temperature [°C]; DPF Backpressure [mbar]; AdBlue® tank level [l]; NOx concentration tail pipe [ppm]; NOx concentration engine out [ppm] and NOx conversion %.

GreenUrban - If chosen by operators, the GreenUrban "ecoNOxt generation 6" system comes complete with its own OBD utilising the "engine out" and "tailpipe" NOx sensors which measures "Real-Time" NOx emissions reductions which gets stored within the ECU for downloading via a Windows Friendly Software or through a Telematics Package. The Telematics runs on the Microsoft "Azure" platform which can store up to 30 different parameters such as NOx reductions, Adblue levels/usage, Temperature, Backpressure, RPM, Date, Time, Mileage, Fuel Usage etc. The system can also be setup to measure the average daily NOx reductions being achieved in real-time. The system provides operators with on-going "Real-Time" Emissions Reporting.

For all three systems, if the temperature sensor, dosing unit, upstream NOx sensor or ACU develops a fault, then the original fault code message as used by the OE system is transmitted by the HJS ACU to the vehicles ECU. Where predetermined system operating limits are breached, text message and e-mail alerts can be created and sent to the operator. This can then be looked into by technicians.

E03 Deliverability 20%

How will you ensure that the project delivers its objectives to time and budget?

You must include detail of an expression of interest from one or more bus operator.

We have developed this bid in partnership with the main operators in Southampton – First Hampshire Dorset & Berkshire, Bluestar, Unilink, Wheelers and Xelabus. The operators are continuing to invest in new Euro VI vehicles and have provided full details of their fleet composition (accounting for operational movements and capital expenditure) and their commercial arrangements with preferred suppliers of SCRT retrofit technologies. See the appended letters of support from operators in the Technical/ Commercial folder.

Detail of discussions with technology providers & reasons for chosen Accredited Technology.

We have had discussions with James Thorpe UK Sales Manager at EminoX, Mark Cooper, UK Sales Manager at HJS and Alan Barnard, Sales Manager at GreenUrban to understand their respective SCRT retrofit technology systems and their performance in reducing NO₂. Our reasons for choosing to work with these three suppliers are set out below:

EminoX

- Have already secured CVRAS accreditation for their SCRT system
- Strong performance and track record in delivery of retrofit programmes
- Offer SCRT training and diagnostic support for operators
- Have experience of servicing fleets and offer annual maintenance package post-retrofit
- Offer filters exchange and reconditioning
- Fleet of Mobile Technicians and fully trained sub-contractors with stocked vans
- Fitting of SCRT system will be delivered by EminoX led engineering teams

HJS:

- Are well-advanced in the process of securing CVRAS accreditation for their SCRT system – expected to be secured by mid-November 2017
- Are also one of the approved suppliers for the TfL project involving 6,000 buses)
- Over 800 SCRT installations completed in the UK, 3,000 in Europe
- Several common applications for particular vehicle types designed and ready to go
- Several Millbrook test results available
- Have commercial relationships with large operators in the UK who run services in Southampton
- Long term in service testing successfully completed for TfL

GreenUrban:

- Are well-advanced in the process of securing CVRAS accreditation for their SCRT system
- Have already undertaken the accredited “Revised LUB Test Cycle” at Millbrook and demonstrated that they can easily meet the required emissions standards
- Have already demonstrated in other cities on previous Clean Bus/Technology Funded programs that they can complete similar projects on time and within budget and were also selected recently to supply the largest project outside of London which was supply and installation of SCRT systems to Birmingham’s “National Express West Midlands” fleet of 210 double deck buses within a 6-month timeframe with fits at the operator’s depots outside of normal working hours
- Can provide on-going “Real-Time” Emissions Reporting
- Can provide an in-service R & M package throughout the life of the program
- Offer a standard parts & labour warranty for 3 years with an option for extended 2-year warranty to cover the 5 year period that the buses are required to remain in service after being retrofitted.

An explanation of the procurement process the local authority will undertake to award any necessary contracts.

If SCC is successful, it will issue a Project Inception Document (PID) to all local bus operators. This will set out the process for governance of award of CBTF funds to operators, the financial process.

The bus operators will be responsible for procuring the equipment through the accredited suppliers. This route has been chosen as it will make best use of the operators understanding of the technology, market, and their requirements can be tailored to their own needs subject to compliance with national procurement legislation. SCC will retain the grant funding to be allocated to operators through a contractual agreement framework. This approach has previously been adopted by SCC and the operators for the DfT’s Better Bus Area Fund (2012) as well as other funding streams involving the bus industry and ensures compliance with EU state aid and procurement rules. The process will be:

- Step 1 - Issue a ‘call’ for bids to bus operators
- Step 2 Bids received with costings / quotes / operator contribution
- Step 3 Decision made on bids
- Step 4 Letter issued confirming allocation to operator(s)
- Step 5 Operator(s) sign and return the Grant Award Letter

- Step 6 Project delivered by operator(s)
- Step 7 Claims submitted to SCC by bus operator(s)
- Step 8 Claims paid by SCC
- Step 9 Operators complete monitoring forms on as per the grant award letter terms.

Regarding Step 5, above, operators are required to confirm their compliance with the grant conditions by signing and returning to SCC a copy of the Grant Award Letter.

Following the initial call for bids, the outputs (number of units delivered) and remaining budget will be reviewed. This may result in subsequent 'calls' in accordance with the steps outlined above. The key issue will be to maximise the delivery of SCRT retrofits (in terms of fleet coverage), whilst ensuring a consistent and quality service from the each operator and their retrofit equipment suppliers. Clear processes for ensuring this will be set out in the grant agreements made by SCC with each operator.

Detail of the state aid advice received (mandatory requirement) and, if appropriate, details of how you will ensure agreements to implement the project will comply with EU State Aid rules and enable you to recover any grant which is deemed to be unlawful State Aid.

We have received the following advice regarding state aid:

CBTF funding awarded must be spent in accordance with State Aid rules. State Aid arises where:

- I. funding is provided from state resources (including grants from central or local government etc or subsidised services), AND
- II. the funding / measures favour certain undertakings or operators etc, AND
- III. the measure / funding has the potential to distort competition, AND
- IV. the measure / funding could affect trade between member States.

All four elements must be in place for unlawful State Aid to be present. In order to mitigate against unlawful State Aid arising there are a number of measures that can be relied upon, including use of competition to award funding and use of De Minimus provisions where appropriate.

To remove the State Aid risks, the introduction of an element of competition with the bidding process for funds is required, in a way that ensures all undertakings have equal access to funding (regardless of whether they are local, national or international undertakings). This will remove II) and III) above. Competition and bidding arrangements must be fair, transparent and genuine.

There is the power to provide funding that would otherwise amount to State Aid through the De-Minimus process, which can assist in relation to supporting some smaller, locally based undertakings. This applies where an operator has received aid in the current year and previous two financial years that amounts to no more than €200,000 (the limit for transport related undertakings). That must encompass ALL state funding from ANY source over the three year rolling period so any company that receives subsidies or other grant funding from other state sources will need to be carefully audited to ensure they meet De-Minimus levels and the limits apply to the whole registered company (not just the locally based arm of it). However, given the level of annual BSOG payments, it is unlikely this will apply locally, other than for the very smallest operators.

Any mechanisms for awarding funding to operators will need to be designed and implemented to meet the above restrictions in relation to any funding that is used to enhance third party / private sector commercial or subsidised vehicles in any way.

Confirm ability to provide quarterly reports, attend review meeting and provide a final report by 30th September 2019.

The three potential suppliers which bus operators would choose to appoint from have confirmed to us that they can provide the required quarterly reports to local bus operators. Operators will then provide this information to Southampton City Council. The process for provision of reports by operators will be clearly set out through the grant agreement and reported through the mechanisms stated in this agreement. Suppliers would be able to supply data to operators to meet the requirements of the CBTF program in a final report at the end of September 2019.

A clear project plan in the form of a Gantt chart showing the milestones, dependencies and outcomes. This will include the submission of quarterly reports.

| | Duration | Jan-18 | Feb-18 | Mar-18 | Apr-18 | May-18 | Jun-18 | Jul-18 | Aug-18 | Sep-18 | Oct-18 | Nov-18 | Dec-18 | Jan-18 |
|-------------------------------|------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| CBTF funding award | 1 day (Fri 5 Jan) | ◆ | | | | | | | | | | | | |
| Call for bids to operators | 1 day (Mon 8 Jan) | ◆ | | | | | | | | | | | | |
| Operators submit bids | 1 day (Fri 12 Jan) | ◆ | | | | | | | | | | | | |
| SCC assesses bids | 2 days (by Tue 16 Jan) | ■ | | | | | | | | | | | | |
| Operators told outcome | 1 day (Wed 17 Jan) | ◆ | | | | | | | | | | | | |
| Operators notify suppliers | 1 day (Fri 19 Jan) | ◆ | | | | | | | | | | | | |
| Suppliers check vehicles | 1 week (by Fri 26 Jan) | ■ | | | | | | | | | | | | |
| Suppliers order parts | 6-8 weeks | | ■ | ■ | ■ | | | | | | | | | |
| Design work new types | 6-8weeks | | ■ | ■ | ■ | | | | | | | | | |
| Agree access to vehicles | 2 weeks | | | ■ | ■ | | | | | | | | | |
| 1st stage of retrofits (x40) | 9.5 weeks | | | | ■ | ■ | ■ | ■ | | | | | | |
| First Quarterly Report | 1 day (by 5 Apr) | | | | ◆ | | | | | | | | | |
| Prototyping for new vehicle | 2 weeks | | | | ■ | ■ | | | | | | | | |
| Testing of telematics | 4 weeks | | | | | ■ | ■ | ■ | ■ | | | | | |
| Second quarterly report | 1 day (by 5 July) | | | | | | | ◆ | | | | | | |
| 2nd stage of retrofits (x117) | 24 weeks | | | | | | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Driver training/ driver aids | 8 weeks | | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| 3rd quarterly report | 1 day (by 5 Oct) | | | | | | | | | | ◆ | | | |
| Testing of telematics | 14 weeks | | | | | | | | | ■ | ■ | ■ | ■ | ■ |
| Refurbs of buses | 14 weeks | | | | | | | | | | | ■ | ■ | ■ |
| 4th quarterly report | 1 day (by 5 Jan) | | | | | | | | | | | | | ◆ |
| Monitoring & evaluation | Ongoing | | | | | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |

Confirm there is committed resource for delivery of the project

Project Management Resource - The project will be managed by SCC through our Sustainable City Team, which is led by Neil Tuck. The Senior Responsible Officers (SROs) are Mike Harris, Service Director – Growth and Mitch Sanders, Service Director - Transactions. To ensure that the project is delivered to time and budget it will report to the existing Clean Air Board, chaired by Cllr Hammond Cabinet Member for Sustainable Living, and the Strategic Bus Punctuality Taskforce Board, attended by representatives from each operator and chaired by Cllr Rayment, Cabinet Member for Environment & Transport.

Retrofitting resource - Each of the suppliers have their own specialist team of installers are comprised of several teams of OE trained bus and coach technicians who each have extensive experience in the installation of emission abatement systems. They also have arrangements in part with suitably qualified third party installers who have experience of retrofit for a range of vehicle types. These teams have successfully installed over several hundred SCRT systems in London and other UK cities. Their teams of technicians have been accredited by VOSA in the existing London Low Emission Zone introduced in 2012 who can undertake the installation work in full or work together with an accredited third-party installer. All installs will be quality checked by team leaders. Each supplier has experience in project management of delivery of retrofits. Some suppliers have retrofit commitments in London that area currently underway, there is capacity to deliver retrofits as part of this bid in February and March 2018 and over the period from April to November.

An assessment of the main risks to the successful delivery of the project

| Main Risks | How risk will be mitigated against |
|--|--|
| <i>Business failure of installation partner</i> | the suppliers can provide several installation options |
| <i>Breakdown of relationship with installer</i> | suppliers can provide trained alternatives on standby |
| <i>Delays to project</i> | SCC, operators and suppliers will provide an experienced project management team to mitigate impact |
| <i>Loss of key members of staff involved with retrofitting</i> | suppliers can provide other trained technicians and will ensure multiple technicians are trained for standby |
| <i>System installation errors</i> | ensure installations are signed off by team leader and operator Poor vehicle pre condition ahead of installations – suppliers will carry out vehicle pre checks circa two weeks in advance of fitment |
| <i>Poor relationship with operator</i> | supplier is able to provide team leader on site to manage relationship and handle issues |
| <i>Changes to project</i> | the suppliers would implement change management procedure |
| <i>Vehicle availability</i> | suppliers would conduct project meetings with operator staff prior to project kick off |

| | |
|---|--|
| Changes to vehicle layout (on the same make/model retrofit application) | suppliers would carry out pre install checks across vehicles, minor changes can be completed on site |
|---|--|

E04 Value for money 20%

How will the project deliver value for public money?

Clearly state the amount of funding requested from the Authority in 2017/18 and in 2018/19.

SCC is requesting £2,677,835 from the CBTF (including VAT) with match funding of £815,680.

| Year | 2017/18 (£) | 2018/19 (£) | Total for 2017/18-2018/19 |
|---------------------------|-------------|-------------|---------------------------|
| CBTF capital grant sought | 700,000 | 1,997,835 | 2,677,835 |
| Local Match Funding | 82,840 | 732,840 | 815,680 |
| Total | 782,840 | 2,710,675 | 3,493,515 |

Provide a breakdown of the costs of the project and an explanation of how the costs have been calculated.

The £2,677,835 of CBTF funding sought would cover the cost of manufacture, fitting, monitoring equipment and 5 year warranties for accredited SCRT technology systems for the 145 buses. These have been calculated based on quotations operators have received from the suppliers of retrofit systems for specific vehicle types.

Cost breakdown of SCRT technology manufacture and install:

| No of buses | Make/ Model | Engine | Euro Strd | Operator | Retrofit system | Cost per bus £ | Total Cost £ |
|-------------|---|-----------------------|-----------|----------|---|----------------|--------------|
| 30 | Wrightbus StreetLite midi single decker | Cummins 6l | V | First | Eminox /HJS /Greenurban SCRT | 14,335 | 430,050 |
| 21 | Volvo B7 RLE Wrightbus single decker | | IV | First | | 14,335 | 301,035 |
| 4 | Volvo B70L Wrightbus single decker | | III | First | | 14,335 | 57,340 |
| 10 | ADL Trident double decker | | III | First | | 14,335 | 143,350 |
| 34 | Mercedes 0530N Citaro single decker | OM906hLA 6.4l | III | Bluestar | GreenUrban ecoNOxt SCRT (Adblue) System | 14,335 | 487,390 |
| 1 | Optare Excel 2 Single decker | OM906hLA 6.4l | III | Bluestar | | 14,335 | 14,335 |
| 21 | ADL Enviro 400 Double Decker | Cummins ISBe6 6.7l | V | Bluestar | | 15,192 | 319,032 |
| 12 | Scania CN230UD OmniCity Double Decker | DC916 8.9l | V | Bluestar | | 15,192 | 182,304 |
| 2 | DAF SB120 Cadet ISBe4 Single Decker | Cummins B series 3.9l | III | Bluestar | | 13,327 | 26,654 |
| 3 | Volvo B7TL Enviro 400 Double Decker | Volvo D7C 7.3l | II/ III | Bluestar | | 14,335 | 43,005 |
| 1 | ADL Dart Nimbus Single Decker | Cummins ISBe6 5.9 Ltr | II | Bluestar | | 13,327 | 13,327 |
| 4 | Scania N230UD East Lancs Double Decker | | IV | Whealers | Eminox /HJS /Greenurban SCRT | 15,192 | 60,768 |
| 2 | Volvo B7RLE Wrightbus Single Decker | | V | Xelabus | | 14,335 | 28,670 |
| 145 | | | | | Total = | | 2,107,260 |

Cost of monitoring equipment and warranties: In addition to the SCRT systems themselves, CBTF grant is sought for monitoring equipment and extended 5 year warranties for all 145 vehicles. These further SCRT-related costs total £570,575 including VAT. This works out at £3,935 per bus, broken down as follows:

Cost of £708 per bus x145 of installing the telematics package (Total = £102,660).

Cost of £1,200 per bus x 145 of providing real time data feeds to meet CVRAS requirements (Total = £174,000)

Cost of £2,027 per bus x145 of upgrading standard 2 year manufacturer’s warranty to 5 years (Total = £293,915)

Therefore the total cost of all SCRT systems, telematics, data feeds and warranties is £2,677,835

Explain why particular technologies are being chosen to give maximum value and why others have been considered, but not chosen.

The project of retrofitting existing older vehicles with the accredited NOx Abatement SCRT Technology to upgrade them in line with Euro 6 emissions levels is deemed to be extremely cost effective and timely. For any of the three suppliers SCRT systems, this represents very good value for money you can retrofit at least 15 vehicles for the cost of one new Euro 6 vehicle.

SCRT was chosen above any other technology because it was the only one that can meet the requirements of the CVRAS issued by DEFRA/LowCVP.

Operators consider that there is a strong air quality case for utilising CBTF funding to meet the costs of installing e-fan technology because this will mitigate against increases in CO2 emissions that would otherwise arise from retrofitting pre-Euro VI fleets with SCRT systems. Utilising CBTF funding in this complimentary measure, will also help to improve mpg and address the expected reduction of mpg for operators resulting from the retrofitting of SCRT systems.

Detail how value for money will be incorporated into procurement processes.

From discussions with operators and suppliers, the City Council has a clear understanding of the average costs of retrofit systems. If quotes for retrofit work received from suppliers are higher than these benchmark costs, we will ask for clarification from bus operators as to the reasons for the higher costs (i.e. supplier has not already developed retrofit systems for a particular bus vehicle type – so extra prototyping costs incurred). Bus operators would carry the risk of any increases in unit costs for SCRT and monitoring equipment.

Disclose the amount of any additional funding being provided from other sources towards the project.

As part of this project, there is £815,680 of match funding over the two years that has been secured from bus operators.

| Year | 2017/18 | 2018/19 | Total for 17/18-18/19 |
|--------------------------------|---------------|----------------|-----------------------|
| Driver training | 40,000 | 40,000 | 80,000 |
| Vehicle/ engine refurbishments | 30,000 | 680,000 | 710,000 |
| Driver green aids | 12,840 | 12,840 | 25,680 |
| Total | 82,840 | 732,840 | 815,680 |

Give assurance that the retrofitted buses will remain in service in the area for 5 years or 150,000 miles, whichever is earliest.

We confirm from our discussions with all of the local bus operators that this will be the case, and is backed up in the letters of support attached in the Technical/ Commercial folder. This will be a condition of all grants awarded to operators for retrofit technology. Vehicles that would not remain in service for five years have been excluded, and these would be replaced by Euro VI buses.

Assurance processes to ensure the funds are spent in a correct, transparent and effective way

The project will be managed by SCC through our Sustainable City Team, which is led by Neil Tuck. The Senior Responsible Officers (SROs) are Mike Harris, Service Director – Growth and Mitch Sanders, Service Director - Transactions. To ensure that the Southampton accredited SCRT bus retrofit project is delivered to budget it will report to the existing Clean Air Board, chaired by Cllr Hammond Cabinet Member for Sustainable Living, and the Strategic Bus Punctuality Taskforce Board, attended by representatives from each operator and chaired by Cllr Rayment Cabinet Member for Environment & Transport.

The assurance process to ensure that funds are spent in a correct and effective way is summarized below:

Southampton City Council requires the following in respect of funding claims by the local bus operators:

- In advance of providing funding, SCC will need to see quotes for work from each operator.
- Claims for vehicle retrofit work will be paid in arrears, upon receipt of invoices from bus operators.
- A project claim form will need to be signed by the bus operator and Southampton City Council for each claim. The form will ask for claims to be identified as capital and for which project component (e.g. SCRT technology supply and fitting/ telematics package costs/ e-fan supply and fitting).
- Each project claim form should be accompanied by an invoice to Southampton City Council for the amount being claimed. The invoice should set out what has been purchased and that it is for application on buses operating in Southampton. Copy invoices paid by operators to their suppliers which support the claim in full should be attached. Southampton City Council will refund costs including VAT (where an operator is not VAT registered).

F01 Air Quality 20%

As set out in clause 5 of Section 1 of this ITA, if there is insufficient funding available to fund all successful applications at stage 2 the successful applications will be further assessed for their air quality benefits to ensure optimal support towards the objectives of the fund.

A score out of 100 (see page 17) will be given to each bid against the following requirement:

- Applicants are to demonstrate how significant the project will be to bringing local NO₂ concentrations within statutory limits within the shortest possible time

Higher scores will be awarded: where the project will deliver a greater portion of the necessary reductions in NO₂; where it is clear how the project fits into a wider air quality compliance plan for the area; and where the reductions will be delivered in a short timescale.

That score will be added to the scores from the stage 2 and the applications will be ranked. Grants will be awarded to the highest-ranking applications until the fund is exhausted.

Grant Applicants should submit all the information requested in this question in the Online Commercial envelope.

How this project fits into the area's wider air quality plan:

Strategic – Wider Council policy support; EU Directive and CAZ/Supporting Measures

The **Southampton City Strategy** sets four outcomes to achieve. One of these is that “People in Southampton live safe, healthy, independent lives”. One of the priorities to achieve is to improve air quality.

The **Southampton Local Transport Plan 2011-2031** provides the local policy framework for transport in the city. On a cross-boundary basis jointly agreed with neighbouring local authorities, Policy E seeks to deliver improvements in air quality through Air Quality Action Plans and promotion of cleaner, greener vehicle technologies. At the city level, Policy SO6 seeks to achieve improved air quality and environment, and reduced greenhouse gas emissions.

The four key priorities set out in the **Clean Air Strategy for Southampton** are: Improve air quality in the city, support businesses and organisations, collaborate with communities and residents and promoting sustainability. At present, the preferred option for introducing a CAZ to Southampton is a Class B that is citywide. This means that non-compliant buses (pre-Euro VI) will be required to pay a daily penalty charge. The extent of the Clean Air Zone has yet to be confirmed, but is likely to be either covering the whole city administrative area or the city centre.

If successful, this CBTF funding bid will address these four key priorities by collaborating with and supporting all the local bus operators to retrofit pre-Euro VI buses between now and 2019 with SCRT technology and bring forward the benefits of reducing NO₂ emissions while also ensuring operators are prepared for the introduction of the CAZ in 2019.

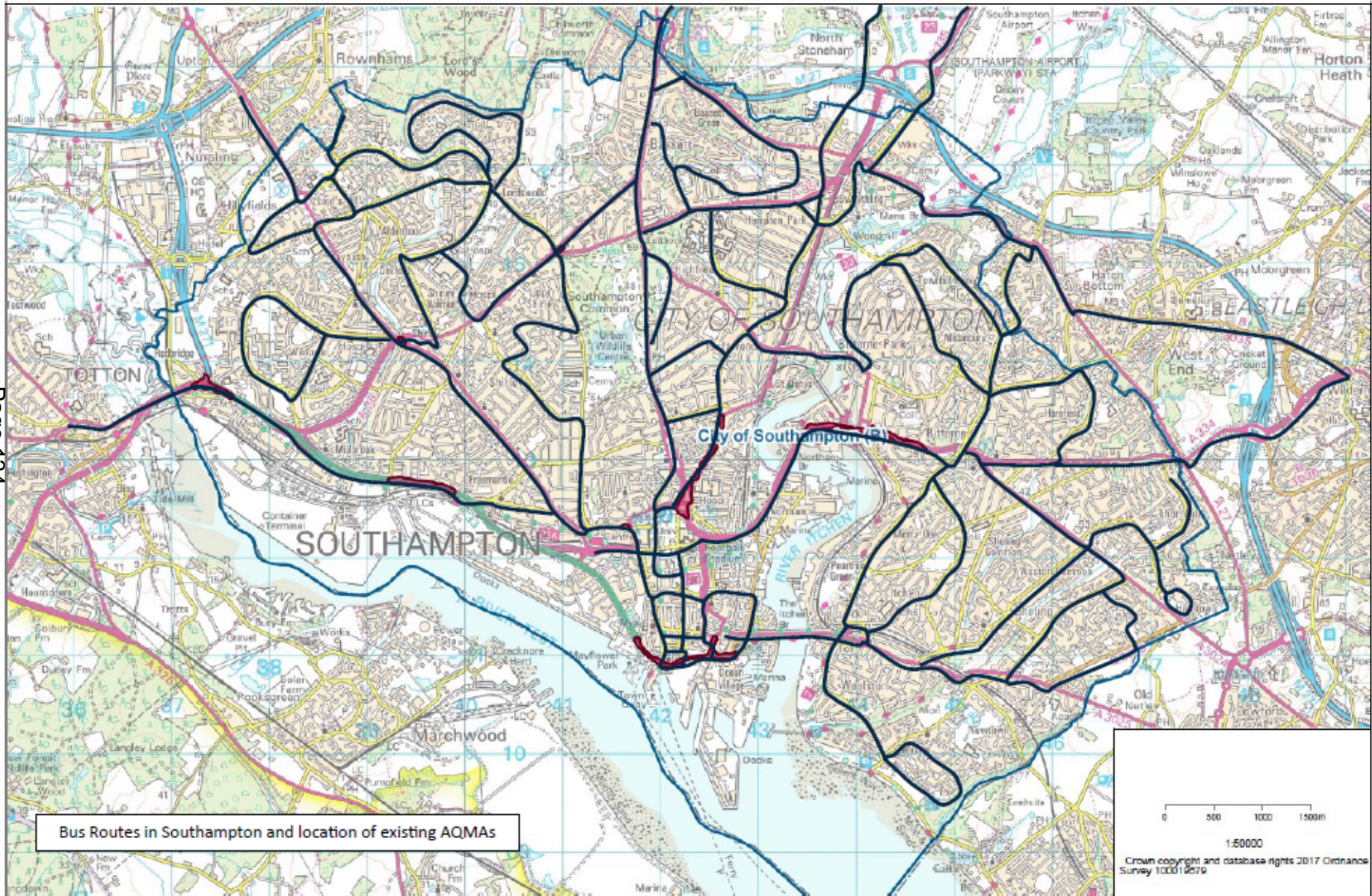
As well as planning for the mandated penalty charging system by 2019, the **Clean Air Zone Strategy and Implementation Plan** includes a package of measures to support the CAZ and deliver further improvements in air quality which were identified following an assessment of the options by independent consultants (Ricardo and Low Emission Strategies 2014). This package was developed following extensive stakeholder engagement, air quality modelling, cost benefit analysis and assessment to gauge deliverability. One of the key recommendations of the CAZ Strategy and Implementation Plan is to introduce retrofit for buses. This was recognised as being an effective mechanism for promoting change amongst local stakeholders. A further recommendation was anti-idling enforcement for buses, retrofit technology. SCC will be encouraging operators to consider installing stop-start technology on appropriate vehicle types.

The project will deliver a greater portion of the necessary reductions in NO₂

Figure 1 shows a map of the bus routes operating within the Southampton City Council administrative area and the AQMAs within the city (marked in red). Routes (shown in black) continue north to Eastleigh and Winchester, north east to Hedge End, east to Hamble and Fareham and north west to Salisbury and west to Totton, Marchwood, Hythe and towns in the New Forest

Based on the Low Carbon Vehicle Partnership Clean Bus/Vehicle Technology Fund Evaluation Study findings, SCR retrofit of Euro III, IV and V buses demonstrated NO_x emission reduction up to 99%, 97 and 98%, respectively and the report also concludes that excellent conformity between lab and “in service” reductions is demonstrated. These findings, and the fact that the majority of buses that are being proposed under this scheme are Euro III, IV and V provides confidence that this proposal will deliver NO_x emissions reductions.

Figure 1: Map showing the bus network in Southampton and locations of AQMAs



To understand the scale of contribution buses have to emissions in Southampton, simple emissions source apportionment based on the DfT's 2016 traffic count data and the Emissions Factor Toolkit v8.0 are summarised in Table 1, where it is evident that contribution of buses and coaches to total NO_x emissions (g/km) ranges from 3% up to 38% and PM₁₀ contribution ranges from 2% to 24%. The final column of Table 1 puts the emissions reductions into context with the air quality monitoring data for 2016 (provisional data only). Assumptions and uncertainty include using DfT count points as close to AQMA's, assuming speed limit speeds (kph), estimating journeys based on timetables published on operator webpages and on information of routes and buses provided by operators or published online.

Analysis of a DfT count point location on Shirley High Street close to the Romsey Road AQMA shows that buses and coaches contributed 38% to NO_x emissions (g/km) from road vehicles. According to bus timetables, there is approximately 500 trips by CBTF scheme targeted routes through the Romsey Road AQMA, which has a 2016 maximum monitored annual mean NO₂ of 43 µg/m³ (just north of Shirley High Street Count Point). Retrofitting these buses with technology capable of up to 99% reductions in NO_x and NO₂ emissions will result in an immediate step change in emissions. It is therefore feasible that targeting this significant source of emissions could bring about compliance in a short time, limited only by how quickly the retrofit technologies can be installed.

The simple source apportionment also identifies that at AQMA's the Bitterne Road West AQMA (2016 maximum annual mean NO₂ result - 43 µg/m³) estimated NO_x emissions contribution from buses and coaches is 17%. This retrofit scheme will potentially reduce NO_x emissions by 99% on ~236 trips through this AQMA, significantly reducing the bus and coach contribution while also reducing overall concentrations. Furthermore, source apportionment undertaken as part of the Western Approach AQMA air quality assessment (2014) indicates that % of total modelled NO_x from buses ranges from 2.2% up to 13.3% at NO₂ monitoring locations along this AQMA. This particular section of road was identified as an area in exceedance of the EU Air Quality Directive limits. This scheme proposes to retrofit buses that undertake approximately 260 timetabled journeys through this area, likely a significant portion of all movements contributing to total modelled NO_x on this route.

All potential routes identified so far by bus operators as suitable for this scheme travel through at least one AQMA, with many routes operating through two or three AQMA's (see table 1). It is therefore expected that improvements will be citywide, addressing both LAQM and Air Quality Directive exceedances. There are also wider benefits where routes are through AQMA's of neighbouring authorities. In particular, the Eastleigh Borough Council A335 Southampton Road AQMA sees regular movements from Bluestar and UniLink buses from the depot, located north of the AQMA in Chickenhall Lane, to the city Centre. There are also routes with stops located along this section of the AQMA. The Bluestar 1 route also terminates in Winchester City centre, also an AQMA, while many Bluestar routes operate through the New Forest District Council EU Air Quality Directive exceedance on the Redbridge Causeway and Bluestar 6 extends to the Lyndhurst AQMA. At present, retrofit technology is the most feasible and immediate method by which emissions reductions from buses can be made. Collaborating with operators to retrofit avoids the limited fleet upgrade to CAZ compliant diesels (Euro VI) with air quality benefits plateauing beyond 2019/2020, whereas the proposal for retrofit along with engine remapping, the potential for start stop technology and monitoring to feedback and influence driver behaviour will deliver improvements beyond CAZ compliant diesels. Furthermore, the accreditation of proposed technologies ensures that if successful, the project will deliver the reductions in emissions required. Other measures influence the contribution of buses to air quality including the introduction of bus lanes has been explored and implemented where feasible and the Council continues to work with operators within the Quality Bus Partnership framework as other methods to deliver improvements.

Table 1: Bus Route and AQMA Information

| AQMA | Proposed routes through AQMA | Approximate Trips by Routes (Average per day Mon-Sun) | Approximate Buses and Coaches Source Apportionment (% of total road transport NO _x emissions g/km using EFT v8.0 and nearby DfT Count Points) | Approximate Buses and Coaches Source Apportionment (% of total road transport PM ₁₀ emissions g/km using EFT v8.0 and nearby DfT Count Points) | Approximate Buses and Coaches Source Apportionment (% of total road transport PM _{2.5} emissions g/km using EFT v8.0 and nearby DfT Count Points) | AQMA Max 2016 Annual Mean NO ₂ (µg/m ³) |
|---|-------------------------------------|---|--|---|--|--|
| Redbridge/ Millbrook (SCC PCM Area of Exceedance) | BS6, BSX7(+R), BS8, BS9, BS11, BS12 | 263 | CP56347 Millbrook Rd West = 5.1% | CP56347 Millbrook Rd West = 3.0% | CP56347 Millbrook Rd West = 3.2% | 52 |
| | | | CP6368 Near School = 3.0% | CP6368 Near School = 1.8% | CP6368 Near School = 1.9% | |
| | | | CP73615 Causeway = 3.3% | CP73615 Causeway = 2.0% | CP73615 Causeway = 2.1% | |
| Romsey Road | F2, F3, BS4, BS17, BS18 | 513 | CP7580 Shirley High St = 38.4% | CP7580 Shirley High St = 24.3% | CP7580 Shirley High St = 25.6% | 43 |
| Winchester Road | U6, X11 | 94 | CP56347 Winchester Rd = 16.0% | CP56347 Winchester Rd = 9.0% | CP56347 Winchester Rd = 9.7% | 31 |
| Buttress Road | U9 | 2 | No representative count point | No representative count point | No representative count point | 47 |
| Bevois Valley | F7, BS2, U1, U6, U9 | 539 | CP73615 Bevois Valley South = 3.3% | CP73615 Bevois Valley South = 2.0% | CP73615 Bevois Valley South = 2.1% | 53 |
| | | | CP46964 Bevois Valley North = 2.8% | CP73615 Bevois Valley North = 1.8% | CP73615 Bevois Valley North = 1.9% | |
| Bitterne Road West | F2, F8, BS3, BS16, BS18 | 560 | CP616891 East of Bridge = 2.9% | CP616891 East of Bridge = 1.7% | CP616891 East of Bridge = 1.8% | 43 |
| | | | CP646963 West of Bridge = 17.1% | CP646963 West of Bridge = 9.7% | CP646963 West of Bridge = 9.7% | |
| Victoria Road | F6, F9, F11, F13 | 236 | No representative count point | No representative count point | No representative count point | 40 |
| New Road | F8, BS3, BS16, BS18 | 357 | No representative count point | No representative count point | No representative count point | 45 |
| Town Quay/Platform Road | F2, F6, BSQC, U1 | 320 | CP38212 Town Quay = 7.4% | CP38212 Town Quay = 4.2% | CP38212 Town Quay = 4.5% | 42 |
| | | | CP75251 Platform Road = 4.3% | CP75251 Platform Road = 2.4% | CP75251 Platform Road = 2.5% | |

It is clear how the project fits into a wider air quality compliance plan for the area

This project will form part of the SCC's Clean Air Strategy and Clean Air Zone Implementation Plan (adopted in November 2016) of which the aim is to bring about compliance with the air quality objectives within the shortest possible time. The four key priorities set out in the Clean Air Strategy for Southampton are:

1. Improve air quality in the city
2. Support businesses and organisations
3. Collaborating with communities and residents
4. Promoting sustainability

Working in collaboration with local bus operators to improve air quality through installing retrofit technologies addresses these four priorities, while also providing a mechanism of supporting them through a period of rapid change with regards to the implementation of the proposed Clean Air Zone. The use of accredited suppliers ensures that these improvements are robust and reliable and will deliver continued improvement for the following 5 years that the vehicles are expected to be in operation.

As well as planning for a penalty charging CAZ by 2019, the plan includes a package of measures to support the CAZ and deliver further improvements in air quality which were identified following assessment of the options by independent consultants (Ricardo and Low Emission Strategies). This package was developed following extensive stakeholder engagement, air quality modelling, cost benefit analysis and assessment to gauge deliverability. One of the key recommendations of the plan is to introduce retrofit for buses: SCRT for older buses. This was recognised as being an effective mechanism for delivering direct emission reductions whilst promoting change amongst local stakeholders. A further recommendation was a campaign of anti-idling for buses. Retrofit technology which includes stop start technology also addresses this recommendation. Furthermore, targeting buses for retrofit that operate throughout the cities AQMA's ensures that the Council is addressing air quality exceedances that have been identified through the LAQM monitoring and review process.

Finally, the CBTF will supplement a range of measures that the Council is currently undertaking to improve air quality within the City. Currently under development is a Clean Air Network (CAN) to provide a platform for businesses to share best practice and experience in delivering air quality improvements. The CBTF would be a foundation from which to build the bus CAN in the city and the wider sub-region. The holistic approach by the Council also includes measures to encourage low emission private transport through city centre parking concessions, creating a city-wide publically accessible EV charging network, incentivising low emission taxis through the licencing process and promoting active travel modes. The CBTF sits alongside these measures, which together will bring about compliance more quickly.

The reductions will be delivered in a short timescale

The CVRT/CBTF LowCVP Evaluation study identifies technologies that delivered emissions reductions. Using this information and assurances by suppliers that they are working toward, or have achieved accreditation gives confidence that these emissions reductions will be delivered. The Gantt chart in E03 that the first stage of retrofits will commence in March 2018. It is expected that emissions reductions will be immediate from installation of retrofit on vehicles. This immediate reduction will be translated to reduction in pollutant concentrations in AQMA's and at the area of AQ Directive exceedance as routes selected for retrofit operate through these areas. The evaluation study conclusions and accreditation scheme also provides confidence that the emissions reductions will continue for the expected life of the vehicle ensuring reductions are maintained, while monitoring means that any issues that are flagged can be identified and dealt with. Retrofitting pre-Euro VI buses through the CBTF is the most feasible immediate and cost effective measure to reduce emissions from buses with operators, suppliers and the Council prepared to implement immediately.

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Equality and Safety Impact

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

| | |
|---|----------------------------------|
| Name or Brief Description of Proposal | Clean Bus Technology Fund (CBTF) |
| Brief Service Profile (including number of customers) | |
| <p>Southampton City Council, in partnership with four bus companies, has secured £2,677,835 from the Government’s Clean Bus Technology Fund (CBTF) to retrofit buses with technology that will reduce harmful emissions in the City. Southampton is one of 20 cities from across the country who have won a share of a £40 million funding pot. This funding, that has been allocated by the Joint Air Quality Unit is aimed specially at lowering emissions from older buses before the introduction of the Southampton Clean Air Zone.</p> <p>All buses in Southampton comply with the latest accessibility regulations, with a number of new buses brought in by operators at the end of 2016 to replace older double deck vehicles that would not meet the latest guidelines from 1 January 2017.</p> <p>The Public Service Vehicle Accessibility Regulations (PSVAR) applies to all new public service vehicles (buses or coaches):</p> <ul style="list-style-type: none"> • introduced since 31 December 2000 • with a capacity exceeding 22 passengers • used to provide a local or scheduled service • All full size single deck buses over 7.5 tonnes will be fully accessible | |

from 1 January 2016, and all double deck buses from 1 January 2017.

- New buses weighing up to 7.5 tonnes and coaches have been required to have wheelchair access from 1 January 2005.
- All buses weighing up to 7.5 tonnes have been required to be fully accessible from 1 January 2015 and coaches will be fully accessible from 1 January 2020.

Therefore in essence all of the identified buses for the CBTF retrofit technology are fully accessible and can operate on all bus services offered by the relevant bus operator in the City. The whole City will benefit from the retrofit technology, which will bring the identified 145 buses up to the same standard as the most recent Euro VI classified buses. Apart from commercial route branding on some buses, there are no specially adapted buses that are used for particular passenger types, schools, elderly or the disabled.

The number of customers cannot be determined as this is a Citywide initiative to retrofit buses with the latest Euro VI exhaust technology.

Summary of Impact and Issues

The National Air Quality Plan for Nitrogen Dioxide in UK (2017) has identified Southampton as one of five UK cities, outside London, that are not expected to meet national air quality limit values by 2020. As such Southampton is mandated to establish a Clean Air Zone (CAZ) by the end of 2019. This project will form part of the SCC's Clean Air Zone Strategy and Clean Air Zone Implementation Plan (adopted in November 2016) of which the aim is to bring about compliance with the air quality objectives within the shortest possible time. At present the Council is pursuing CAZ options that could potentially include a penalty charge for non-compliant buses operating within its boundary. A recommendation of the CAZ Strategy and Implementation Plan is to introduce retrofit for buses as this is an effective mechanism for delivering direct emission reductions on a voluntary basis before the introduction of a CAZ. This CBTF funding bid addresses the priorities of the CAZ Strategy by collaborating and supporting operators to retrofit pre-Euro VI buses between now and 2019 with Selective Catalytic Reduction Technology (SCRT) and bring forward the benefits of reducing NO₂ emissions while also ensuring operators are prepared for the introduction of the CAZ. SCRT technology will achieve reductions in Particulate matter pollutants from diesel exhaust gas as well as NO₂. On official tests, harmful gasses such as Particulate Matter can be reduced by over 98%.

Potential Positive Impacts

There will be positive impacts arising from reduction of emissions on those

having protected characteristics, and the proposals directly impact on the natural environment.

By retrofitting this technology, on official tests, harmful gasses can be reduced by over 98%, which will contribute to cleaner air for all in the City.

| | |
|------------------------------------|---------------|
| Responsible Service Manager | Pete Boustred |
| Date | 21 March 2018 |
| Approved by Senior Manager | |
| Date | |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|--|--|
| Age | In terms of passenger demographics, all bus services in Southampton have a proportion of elderly and younger patronage, and all buses used on schools work in Southampton are included in the scheme and are not solely dedicated to schools work. | Not applicable |
| Disability | All buses in Southampton are fully accessible and meet the latest regulations including wheelchair access. | Not applicable |
| Gender Reassignment | No direct impact | Not applicable |
| Marriage and Civil Partnership | No direct impact | Not applicable |
| Pregnancy and Maternity | All buses in Southampton are fully accessible and meet the latest regulations including pushchair/buggy access. | Not applicable |
| Race | No direct impact | Not applicable |
| Religion or Belief | No direct impact | Not applicable |
| Sex | No direct impact | Not applicable |
| Sexual Orientation | No direct impact | Not applicable |
| Community Safety | The majority of buses in Southampton feature CCTV | Not applicable |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|----------------------------------|---|---|
| | recording equipment which is managed by the bus operators. Images can be provided after an incident whether on or off the bus. | |
| Poverty | The 145 identified buses will serve all areas of the City, including the poorer neighbourhoods, which will help to improve air quality in these areas. | Not applicable |
| Health & Wellbeing | Clean bus technology will help to reduce air pollution by ensuring that 145 of the City's oldest buses are brought up to the equivalent Euro VI standard for exhaust emissions. | None |
| Other Significant Impacts | No significant impacts identified. | Not applicable |

| | | | |
|-------------------------------|---|---|---------------------------------|
| DECISION-MAKER: | CABINET | | |
| SUBJECT: | COMMUNITY ASSET TRANSFER STRATEGY – PROGRESS AND REVIEW | | |
| DATE OF DECISION: | 17 APRIL 2018 | | |
| REPORT OF: | CABINET MEMBER FOR COMMUNITIES, CULTURE AND LEISURE | | |
| <u>CONTACT DETAILS</u> | | | |
| AUTHOR: | Name: | Vanessa Shahani | Tel: 023 80832599 |
| | E-mail: | vanessa.shahani@southampton.gov.uk | |
| Director | Name: | Mike Harris | Tel: 023 80833655 |
| | E-mail: | mike.harris@southampton.gov.uk | |

| |
|-------------------------------------|
| STATEMENT OF CONFIDENTIALITY |
| None |

BRIEF SUMMARY

This report recommends approval for a Community Asset Transfer Policy as a successor to the current Community Asset Transfer Strategy and revisions to the application process. It also provides an update on progress of transferring community centres and community buildings.

RECOMMENDATIONS:

- (i) To note progress on transferring community centres and buildings since implementation of the Community Asset Transfer Strategy
- (ii) To delegate authority to the Service Director (Growth) following consultation with the Leader of the Council, the Cabinet Member for Communities, Culture and Leisure, the Cabinet Member for Finance, the Service Director, Legal and Governance and the Associate Director, Capital Assets to transfer Swaythling Neighbourhood Centre at Less than Best Consideration (where appropriate) to the current tenants following the new application process and to subsequently agree detailed disposal terms and negotiate and carry out all ancillary matters to enable disposal of the site.
- (iii) To approve the new Community Asset Transfer (CAT) Policy
- (iv) To approve changes to the CAT process attached at Appendix 1 to further streamline the process
- (v) To delegate authority to the Associate Director, Capital Assets following consultation with the Cabinet Member for Communities, Culture, and Leisure, the Service Director (Growth) and the Service Director, Legal & Governance to make any minor or consequential amendments and/or refinements to the CAT Policy or process as may arise from time to time
- (vi) To delegate authority to the Service Director (Growth) following consultation with the Cabinet Member for Communities, Culture and Leisure, the Cabinet Member for Finance, the Associate Director,

Capital Assets and the Service Director, Legal & Governance to do anything necessary to give effect to the recommendations contained in this report

REASONS FOR REPORT RECOMMENDATIONS

1. To ensure that progress continues to be made with the Council's Community Asset Transfer programme and that to ensure that the council makes decisions in a consistent, transparent, fair and open way and that such decisions are made on the basis of sustainability and robust financial, property and needs assessments.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. Do nothing and continue with the Council's Community Asset Transfer Strategy and associated application process. This option was rejected.
3. Southampton City Council's Community Asset Transfer Strategy was approved by Cabinet on 18th June 2013 to cover the period to 2017 during which a proactive programme of transfers would be progressed. The Community Asset Transfer (CAT) Strategy provided the framework to drive forward the first phase of the Community Asset Transfer Programme. A Strategy was required at this point because it was the first time that the council proactively considered transferring assets at less than best consideration to community, voluntary and faith organisations. The first phase is nearing its conclusion so the priorities and processes captured in the Strategy have become 'business as usual'. It is therefore more appropriate to develop a Community Asset Transfer policy that captures the aspirations of the Strategy while providing guidance to support officers to progress future community asset transfers.
4. The option of continuing with the current application process was also rejected as previous feedback from community, voluntary and faith organisations supported streamlining of the process. The process was reviewed and changes approved by Cabinet at its meeting on 21 April 2015. This report recommends a further change to shorten the process for applicants who are not existing tenants. It also recommends extending the time for organisations to prepare their applications. The option of adhering to the current timeframes was considered but rejected based on the experience of the pilot phase as applicants require sufficient time to discuss their proposals with their governing bodies prior to submission.

DETAIL (Including consultation carried out)

5. In June 2013, Cabinet approved the Community Asset Transfer (CAT) Strategy. It was introduced to meet the twin objectives of bringing benefits and added value to communities and contributing to the Council's aims and priorities. The strategic drivers continue to be commitment to support local communities, the Council's financial position, speculative interest from organisations and maximising opportunities to use and deliver services from local bases, with partners. Transfers may be on a freehold or long leasehold basis (25 – 125 years).
6. Update on CAT progress
To date 18 community assets, just over 70% have either been transferred or been approved for disposal. Six have been transferred and a further seven approved for disposal and the council is actively negotiating the terms of the transfers. One tenant is preparing a community asset transfer and a range

of agreements with other tenants have either been agreed or are in the process of being negotiated.

7. Each asset's progress is detailed in the table below.

| TRANSFERRED | |
|--|---|
| Community asset | Progress |
| Townhill Park Community Centre Meggeson Avenue | 25 year lease to City Life Church, working with Townhill Park Community Association |
| St. Albans Resource Centre Northumberland Road | 860 year lease to West Itchen Community Trust (WICT), working with Black Heritage Community Association |
| Woolston Community Centre Church Road | The Council already has a long lease in place with Woolston Community Association, that meets CAT requirements, so the building has effectively transferred |
| St. Denys Community Centre Priory Road | Freehold sale to St. Denys Area Community Association |
| Red Lodge Swimming Pool Vermont Close | Freehold sale to Red Lodge Community Pool Ltd |
| Bitterne Manor Community Centre Vespasian Road | 99 year lease to Bitterne Manor Community Association |
| NEGOTIATING TERMS | |
| Freemantle Community Centre Randolph Street | Freehold sale to Freemantle and Shirley Community Association |
| Merryoak Community Centre Acacia Road | Freehold sale to West Itchen Community Trust working with Merryoak Community Association |
| Moorlands Community Centre Townhill Park Way | 125 year lease to West Itchen Community Trust working with Moorlands Community Association |
| Sholing Community Centre Butts Road | Freehold sale to West Itchen Community Trust working with Sholing Community Association |
| Kingsland Community Centre Winton Street | Freehold sale to West Itchen Community Trust, working with Kingsland Community Association |
| Northam Community Centre Kent Street | 125 year lease to West Itchen Community Trust working with Northam Community Association |

| | |
|---|---|
| Harefield Community Centre Yeovil Chase | Freehold sale to West Itchen Community Trust. |
| ORGANISATION PREPARING FOR COMMUNITY ASSET TRANSFER | |
| Swaythling Neighbourhood Centre Off Broadlands Road | 24 year lease to existing tenant should be completed by end April 2018. Once completed the tenant will progress their application for community asset transfer |
| OTHER AGREEMENTS | |
| Lordshill Community Centre (former nursery building next to Oaklands Community Pool) Cromarty Road | 24 year lease to Lordshill Community Association (formerly based in Andromeda Road) completed. The tenants have security of tenure and no longer want to progress an application for CAT. NB: The former Lordshill Community Centre building has been leased for two years to Majesty House Church. |
| Regents Park Community Centre | 20 year lease to Regents Park Community Association completed. |
| Lordswood Community Centre | 24 year lease to existing tenant should be completed by end April 2018. |
| Coxford Community Centre | 5 year lease to Oaklands Community Pool Ltd should be completed by end April 2018 |
| Clovelly Centre | Tenancy at Will under negotiation with current tenants. |

8. This table illustrates that some existing tenants have chosen to progress community asset transfers on their own; others have chosen to partner with another organisation. Several community associations have chosen to partner with West Itchen Community Trust.
9. The leases agreed for Lordshill and Regents Park Community Centres and under negotiation for Swaythling, Clovelly, Coxford require the tenants to undertake all repairs maintenance, insurance and compliance, thus relieving the Council of any financial involvement with these buildings.
10. It has been over a year since the first three transfers were completed and as part of the CAT process a monitoring form was issued to each of the tenants asking for an update on progress against the aspirations made as part of their applications:-
 - Townhill Park Community Centre was transferred to City Life Church working in partnership with Townhill Park Community Association in October 2016. Three new regular bookings have been secured since the transfer and they also have approximately one to two 'one-off' bookings per month. Back in May 2017 they held a 'May Fest' Event which was attended by 300 local people and directly resulted in the formation of a community choir.
 - St. Albans Resource Centre, was transferred in July 2016 to West Itchen Community Trust working in partnership with The Black Heritage Community Association (BHCA). As the leaseholder, WICT is committed to ensure the continuation of the BHCA as prior to the

transfer the group was in danger of folding. The transfer has enabled the group to continue to use the venue on a rent free basis. WICT has secured a commercial loan against the value of the property to enable improvements to the building to be carried out.

- Red Lodge Community Swimming Pool continues to thrive and since the freehold sale in November 2016. Bookings for one off parties have continued to grow and they now average 10 per month. They have secured four new regular bookings and with the popularity of one, Romsey Arthritis Hydro Group, increasing their sessions from one to four per week they now have little capacity to take on any new bookings. They also reported that their management committee has expanded.

11. This progress demonstrates how the community asset transfer process has been able to secure locally valued assets for the future. The transfers of St. Albans and Townhill Park have shown how partnership working between likeminded organisations can lead to sustainable community assets.
12. Adoption of a Community Asset Transfer Policy
The Community Asset Transfer (CAT) Strategy provided the framework to drive forward the first phase of the Community Asset Transfer Programme. A Strategy was required at this point because it was the first time that the council proactively considered transferring assets at less than best consideration to community, voluntary and faith organisations
13. The first phase is nearing its conclusion and that, together with the fact that the end date of the Strategy has been reached means it is appropriate to review it and create a Policy in order that any future transfers can be undertaken as part of business as usual.
14. The proposed Community Asset Transfer Policy sets out the principles and process by which all council community asset transfers should be carried out. It therefore creates a common reference point to ensure that principles are consistently applied.
15. As part of creating a Policy the CAT process has also been reviewed both in the light of experience and with the objective of developing a process which meets future requirements.
16. The key differences between the existing Community Asset Transfer Strategy and process and the proposed Community Asset Transfer Policy and revised process are:
 - there is greater emphasis on operational detail including the process in the draft policy document
 - the policy makes it more explicit that the council has the flexibility to transfer assets that would have the potential to generate capital receipt whereas the Strategy simply contained the phrase “The council also retains the right not to transfer assets that have been identified as having potential significant capital receipt”
 - The CAT process has been shortened to a ‘one stage’ application process for both existing tenants and new applicants to further streamline the process
 - The time frame for submission of documents when the council advertises an asset has been increased from a maximum of 8 to a

maximum of 12 weeks. This is based on the experience of applicants in the first phase.

RESOURCE IMPLICATIONS

Capital/Revenue

17. The costs associated with the disposals are the internal council resource costs and other professional fees which will be met from existing budgets within the relevant portfolio.
18. Cabinet agreed on 18th June 2013 that the need for capital investment to facilitate a community asset transfer will be considered on a case by case basis. Such consideration will be subject to the availability of financial resources and subject to Cabinet approval following appraisal of the detailed application. If there is a capital receipt from buildings on HRA land, the funds would need to be transferred to the HRA.

Property/Other

19. There are transfers taking place where the assets in question (Moorlands and Northam Community Centres) have been improved following agreement to licence to Early Years Education and Childcare Services (EYEC). Under the terms of grants from the Department for Education (DfE), the council must guarantee provision of EYEC for 25 years. If the interests of such early years' services are not adequately protected, then the Council would be subject to clawback and need to repay the capital investment back to Central government. Any disposal of property where central government capital has been invested requires a formal notification to the Secretary of state to decide whether the Council is in breach of the terms within their original funding agreement by disposing of the asset. As long as the Council can evidence protection that EYEC services will continue to be delivered for the duration of the liability period then there are no grounds for clawback
20. The disposal terms for Moorlands and Northam Community Centre premises will therefore include provision to allow the council to nominate EYEC providers and Children's Centre services to occupy such premises under reasonable terms subject to the approval of each community, voluntary or faith organisation's governing body. If the EYEC providers and Children's Centre services materially breach the licence terms agreed, and as a consequence, the community, voluntary or faith organisation, acting reasonably, terminates the EYEC provider's licence, then the Council may choose to exercise their right to identify an alternative EYEC provider and Children's Centre services to meet the demand for early years' places.
21. An exception to this is Merryoak Community Centre, as the early years provision has been relocated to the nearby Festival Hall. The DfE is has deferred (but not waived) the clawback to Festival Hall as an asset of at least equal value which will continue to be used for purposes consistent with the grant. This released Merryoak from the terms of the grant allowing the CAT to become a freehold transfer rather than leasehold.
22. The Council can transfer its own property interests (either freehold or long leasehold) to a third party. This transfer to a third party could either be a freehold or a long leasehold.
23. Disposals will be at less than best consideration where the disposal terms are less than at full open market value

24. Building Contract Services (BCS) provides a repairs and maintenance service to a number of Council-owned community centres and community buildings. Transferring the assets would mean the community, voluntary or faith organisation would be able to choose whether to continue to purchase services from BCS or enter into agreements with other contractors.
25. Under the terms of leases and statute, tenants will have full health and safety and compliance duties.
26. For nominal value freehold sales, it will be necessary to reserve pre-emption or “buy back” rights whereby the council will be entitled to buy back the sites for the same value that they were sold in the event that there is no longer a community use for the asset.
27. On 20 December 2016 Cabinet considered a progress report on the community asset transfer programme. That report noted that the responsibility for administering any ongoing or new CAT transfers will be transferred to the Service Director for Growth and rest within the Capital Assets Team. This transfer will take place from 10th April 2018. The staffing resource to support CAT within this team has been identified as part of the recent restructure.

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

28. Under Section 1 of the Localism Act 2011, the Council has a general power of competence to do anything that individuals generally may do; however that general power is subject to other statutory limitations. Section 123 of the Local Government Act 1972 provides that the Council must dispose of land for best consideration, save for cases where the consent of the Secretary of State has been obtained for any disposal at less than best consideration. Under the General Disposal Consent (England) 2003, such specific consent is not required for any disposal where the difference between the unrestricted value of the interest and the consideration accepted, is £2M or less, provided that:

“the purpose for which the land is to be transferred is likely to contribute to the “promotion or improvement” of the economic, social or environmental well-being of the area.”

In order to use the General Disposal Consent (England) 2003, the properties must be held under the Local Government Acts. There are a number in the HRA which means they will need appropriation from Housing Acts to Local Government Acts. This is an internal administrative process.

29. In determining whether or not to dispose of land for less than best consideration the Council should have regard to a number of factors including its accountability and fiduciary duty to local people, its community strategy, all normal and prudent commercial practices, clear and realistic valuation advice on the asset in question and EU State Aid rules.

Other Legal Implications:

30. State Aid rules are designed to ensure that the single market is not subject to national distortion through State support to particular companies or sectors. Since the tests for State Aid relate to an organisation’s activities (and whether or not they are the subject of trade between Member States), it cannot categorically be stated that State Aid does not apply to all Community

Asset Transfers. However, where an organisation can show that it is carrying out purely local activities, on a 'not for profit' basis, then this should be a good basis for showing there is no State Aid. Where the recipient of a Community Asset Transfer is engaged in carrying out 'not for profit' activities to meet local community need (i.e. with no cross-border trade), then the transfer is unlikely to count as State Aid in itself. However, what also needs to be considered is the status of organisations that are tenants in the building. If their activities fall under the State Aid Rules it could lead to accidental 'leakage' of Aid which inadvertently leads to the other bodies gaining an unfair advantage over their competitors.

31. Any pre-emption, asset lock or buy back right would need to be protected by a restriction entered onto the title of the relevant asset.
32. Assets transferred on a leasehold basis will be carried out on the basis that the entire responsibilities for managing and repairing the building, including all health and safety responsibilities, will be transferred from the council to the receiving organisation.

RISK MANAGEMENT IMPLICATIONS

33. If there is no common reference point for community asset transfers, there is a risk that the principles are inconsistently applied across. This might increase the risk of legal challenge and reduce the fairness and effectiveness of the council's approach.
34. Specific risks and mitigating actions have been addressed in the sections on Resources and Legal Implications above.

POLICY FRAMEWORK IMPLICATIONS

35. The recommendations in this paper support the delivery of the Southampton City Council Strategy 2016 – 2020 outcome Southampton is an attractive modern city where people are proud to live and work. This is because the community buildings are a base from which a range of activities will be provided including family friendly events and the organisations managing the facilities have access to funding sources to improve the assets that aren't available to the Council.
36. The recommendations also support the delivery of the Health and Wellbeing Strategy 2017 – 2025 outcome Southampton is a healthy place to work with strong, active communities. The range of activities provided from community buildings include those with a positive health impact as well as opportunities for people in local communities to come together, strengthening local networks.

| | | |
|---|---|------------|
| KEY DECISION? | Yes | |
| WARDS/COMMUNITIES AFFECTED: | All | |
| <u>SUPPORTING DOCUMENTATION</u> | | |
| Appendices | | |
| 1. | Community Asset Transfer Policy | |
| 2. | Key Stages in the Community Asset Transfer Process | |
| 3. | Equality and Safety Impact Assessment | |
| Documents In Members' Rooms | | |
| 1. | None | |
| Equality Impact Assessment | | |
| Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out. | | Yes |
| Privacy Impact Assessment | | |
| Do the implications/subject of the report require a Privacy Impact Assessment (PIA) to be carried out. | | No |
| Other Background Documents None | | |
| Other Background documents available for inspection at: | | |
| Title of Background Paper(s) | Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable) | |
| 1. | Not applicable | |

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Southampton City Council Community Asset Transfer Policy



Southampton City Council Community Asset Transfer Policy

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| Community Asset Transfer Policy | | | |
|---------------------------------|---|-----------------------|------------|
| Version | V2 | Approved by | Cabinet |
| Date last amended | 06/02/2018 | Approval date | 17/04/2018 |
| Lead officer | Vanessa Shahani, Service Lead, Business Services, Business Operations and Digital | Review date | 30/04/2019 |
| Contact | CAT@southampton.gov.uk | Effective date | 01/05/2018 |

INTRODUCTION

1. The council sees community asset transfer as a positive opportunity to encourage and strengthen long term partnerships with community, voluntary and faith based organisations that will contribute towards enhancing communities and their involvement in Southampton.
2. The council has been developing its strategic approach to asset management which includes community used buildings in localities. Community asset transfer offers a way of reconciling the consolidation of assets belonging to the council with a genuine community empowerment approach that seeks to build the capacity of local groups.
3. The council believes that through such asset transfer, local groups will be able to gain access to and secure other sources of additional investment, develop innovative and creative partnerships and thus secure the future of assets into the longer term.

WHAT IS COMMUNITY ASSET TRANSFER (CAT)?

4. The council owns and manages a wide variety of property assets including land and buildings. The council defines a Community Asset as a building and/or land that has a community use and from which a community based activity or service is delivered. Asset transfer means moving the responsibility for the ownership, management and running of assets from the council to a community, voluntary or faith based organisation. Transfers are therefore done on a full repairing, maintenance and insuring basis. Community asset transfer has the potential to achieve a range of key objectives from promoting civic renewal, community cohesion, active citizenship and improving local public services to tackling poverty and promoting economic regeneration.
5. CAT relates primarily to long leasehold (25–125 years) or freehold arrangements with community, voluntary or faith based organisations. This will apply either where the council owns the freehold or has a long lease that can be transferred to another organisation. The terms of transfer to an organisation will be negotiated on a case by case basis. This strategy applies to council owned assets where community based services and activities are offered, or have the potential to be, for the benefit of local residents. The council will not consider applications for transfer with respect to schools, social care establishments, sheltered accommodation and other properties from which council run services are delivered that are not deemed by the council as suitable for transfer, youth and play buildings are also currently excluded. The council will not transfer properties to be used solely for religious activities. The council also retains the right not to transfer assets that have been identified as potentially having significant capital receipt.
6. The council recognises that in some cases, buildings that are available for CAT may not be vacant and a transfer may take place with a sitting tenant. In such situations details will be discussed on an asset by asset basis in liaison with the existing tenants, relevant council departments and other stakeholders (where applicable).

COMMUNITY ASSET TRANSFER POLICY

7. Our policy is based on our commitment to community empowerment and supports the development and sustainability of a thriving community and voluntary sector. This policy sets out the principles and process we will use to manage applications for the transfer

of community based buildings or land to a voluntary, community or faith organisation, in a way that also complies with the council's Corporate Property Strategy and other relevant council policies.

8. This policy will take into account relevant legislation that relates to the transfer of land or buildings at less than market value, provided the transfer is likely to contribute to the "promotion or improvement" of the economic, social or environmental well-being of the area, and the difference between market value and actual price paid is less than £2 million (If the difference is more than £2 million then the request will require ministerial approval). The council's disposal's policy reflects this legislation and all transfers will ultimately be considered by Cabinet.
9. We recognise that community asset transfer comes with risks and liabilities to both the council as well as community, voluntary and faith based organisations. Therefore the process must include a robust framework to assess and manage risks so that all parties can make informed decisions. The Council's policy to enable the transfer of assets is based on the following principles:
 - Transparency in process, timescales and decision making.
 - Partnership with community, voluntary and faith organisations and encouragement of collaboration between groups.
 - Inclusivity of provision so that the assets remain genuinely open and accessible to all sections of the community irrespective of their faith, culture, gender, sexuality or religion.
 - Evidence based rationale for the transfer of assets – each proposal will be based on individual merits.
 - Any proposed transfer of asset must promote social, economic or environmental wellbeing and support the aims and priorities of the council.
 - Asset transfer will be in exchange for the agreement by the community, voluntary or faith based organisation to deliver agreed benefits to local people.
 - Existing tenants will be given 'first right of refusal'.
 - The council's interest on nominal value freehold sales will be protected by reserving pre-emption or 'buy back' rights. These 'buy back' rights to recognise the value of the investment in the asset post transfer.
 - Transfers will include clauses to prevent the asset being assigned or sold for unintended financial gain and loss of community benefits.
 - In the case of a multiple community asset transfer to one provider, operating a mixed portfolio of community and commercial use, the terms of the transfer will ensure that buildings remain for community benefit and use as long as there is a need. Any change in use needs to reflect planning policy and will be subject to the commissioning of an independent community needs survey to demonstrate there is no longer a need for the building. The terms of the transfer will also require that any capital or revenue gained from any change in use will be reinvested back into community provision in the city.
 - Disposals at less than best consideration will follow relevant legislation, Government guidance and the Royal Institute of Chartered Surveyors (RICS) guidance and state the best consideration that would otherwise have been received.

OUTCOMES

10. The council wants to achieve the following outcomes through community asset transfer:
- Community empowerment and benefits to the wider local community.
 - Capacity building through the use of local skills, experience, knowledge and time.
 - Retaining valued local provision, thus improving local services in times of austerity, while contributing to savings.
 - Delivering local services that address local needs through community led and community controlled assets.
 - Extending the use of a building or land.
 - Value for money and the ability to draw in other sources of funding not available to the council.
 - Social enterprise and social wellbeing, including community cohesion.
 - Financial viability, long term sustainability and external investment.
 - Delivery of council objectives through other partners.
 - A stimulus to partnership working.

AIMS

11. The council recognises that the increasing emphasis on community resilience means that it is even more important to work closely in partnership with local community, voluntary and faith based groups that can help us achieve the outcomes of delivering quality services, tackling poverty, protecting vulnerable people and encouraging growth and sustainability. Our aims are to:
- Encourage and support the retention of local facilities which are used for a variety of social, community and public purposes without the use of council funds in the future – on the basis that we are satisfied that the business case for such a transfer is financially viable and sustainable in the long term.
 - Increase the effectiveness and efficiency of council owned community assets through local management.
 - Maintain local public facilities through community management.
 - Explore innovative ways of enhancing existing community facilities, for example by transferring multiple assets to one provider who can then deliver benefits linked to economies of scale. This could include balancing income streams from commercial and community property portfolios.

COMMUNITY ASSET TRANSFER CRITERIA

12. In the interest of supporting a vibrant local community and voluntary sector, the council will consider and prioritise the transfer of assets to local organisations. Therefore, it is unlikely that the council will prioritise transfer of assets to organisations whose remit is regional or nationwide. The prioritisations will be based on a geographical analysis of the community based properties within an area and the needs of that area. The transfer of assets may be to either long established, stable and secure formal organisations or newly formed community based groups provided they can demonstrate they have the necessary expertise and experience to manage the asset. Each application will be considered on a case by case basis.

13. The council will consider transferring assets in the following circumstances:
- They must be in the ownership of the council or have a long lease that can be transferred to a third party.

- They are currently delivering community based services where there is a demonstrable need for the asset and associated services to continue.
- They are assets that the council has identified in savings proposals, or as potentially surplus or where there is no clear rationale for the retention to continue due to cost of maintenance, condition of the building or low levels of usage.

14. The council will not consider applications for transfer in the following circumstances:

- Assets which accommodate fixed or core services (e.g. schools, social care establishments, sheltered accommodation etc. - this is not an exhaustive list).
- Assets which have been identified as having a potential significant capital receipt, or where a significant amount of revenue income would be lost unless the council's Cabinet deem the social, environmental and/or economic benefits match/outweigh any potential financial loss.
- Assets which have been identified as being required for strategic, planning or redevelopment/regeneration reasons.
- Transfers to individuals or businesses to be used **purely** as a vehicle for commercial ventures. This does not include, for example, charitable organisations with trading arms, where profits are given back to communities.
- Transfers to individuals.
- Where transfers contravene State Aid or procurement rules.
- Assets which may be used solely for religious or political purposes/activities.

15. This is to ensure that any successful transfer is sustainable, will be of benefit to local communities as well as the voluntary, community or faith organisation and will instil long term reassurance for the community which it serves.

16. The final decision on any transfer will be taken by the council in line with the council's constitution at the time.

Who can apply?

17. Community, voluntary or faith organisations who can demonstrate that they are or will be:

- Properly constituted with strong and open governance arrangements.
- In a position to hold property.
- Able to demonstrate strong financial and performance management and accountable processes.
- Non-profit making and exist for community/ social/ environmental/ economic benefit, whilst recognising that they may have a business element to how they operate, such as a community café. However, this type of business and financial gain will not be the main driver and it will not distribute any financial surplus to owners or members but apply it to serving its core community aims and objectives.
- Open to and demonstrate an inclusive approach to members of the wider community.

Assessment Criteria

18. Any application received will be assessed. Applicants must demonstrate how they meet the following criteria:

- Clear benefits to the council, its aims and priorities, the community based group and the wider community to justify the subsidised transfer.
- Demonstrate that the asset will continue to be used to support local community based services and activities.
- Strong and robust governance arrangements (including how local people will be involved in decision making in relation to the building/land and its use).
- Evidence of a track record in delivering services and/or managing property (if a new group evidence of this track record linked to management committee members and/or staff and volunteers).
- Have in place a robust and sustainable business plan or show the willingness to create an acceptable plan within a specified time frame before the building is transferred. This business plan will need to:
 - Demonstrate a realistic approach to managing and running the facility.
 - Identify sources of finance that asset transfer will release or attract, future investment in and maintenance of the asset.
 - Include a needs assessment.
 - Describe the planned outcomes and social, economic and environmental benefits to result from the asset transfer.
 - Identify liabilities and how these will be addressed.
 - Provide evidence of the capability and skills within the community based group to manage, repair and maintain, insure and sustain the asset transfer including a capacity building plan and how this will be delivered.
 - Outline how much space is required and its potential usage, how services and activities will be 'joined up' with those of other organisations to maximise the efficient use of the asset by providing new and innovative services, which may be linked to current council provision.
 - Provide evidence of compliance with legislation and regulatory controls such as equality legislation, child and vulnerable adult protection, health and safety, employment and plans for regular monitoring and evaluation.

19. Assets will also be assessed to establish whether they have a potential significant capital receipt, or where a significant amount of revenue income would be lost, as well as whether the social, environmental and/or economic benefits match/outweigh any potential financial loss. This will inform a Cabinet decision about whether the Asset should be excluded as at section 14 of this policy.

20. In the event that all application(s) are unsuccessful, the asset's suitability for transfer will be reassessed.

Risk Management

21. It is accepted that there are a number of risks which may arise from asset transfer. The proposals must show that the group has considered the key risks and how they will be managed, including:

- Potential for a negative impact on community cohesion.
- Potential loss of existing community services or facilities.
- Capacity of recipient to deliver promised services/outcomes.

- Control of asset by unrepresentative minority.
- Conflict with other legal, regulatory constraints.
- Potential for ongoing council liability.
- Financial sustainability.
- Lack of value for money.
- Conflict with other funders.
- Potential unfair advantage for one group over another.

22. In line with the Southampton Compact, risks will be discussed and allocated to the organisation(s) best equipped to manage them. Delivery terms and risks will be proportionate to the nature and value of the transfer.

Basis for the Asset Transfer

23. These are:

- Long term lease (25 – 125 years) or freehold.
- The organisation will be responsible for all costs such as, running costs, repairs and maintenance, compliance with statutory inspections, health and safety regulations and other legislation.
- The asset will revert back to the council in cases of bankruptcy, corruption, non-payment of rent, non-performance, a breach of the agreement and if the organisation wants to return the asset – in these cases, the council will reserve its right to dispose of the asset in the open market.
- The organisation cannot transfer the asset on to a third party.

Community Asset Transfer Process

24. Any community asset transfer (CAT) process works best when all parties are open, flexible and accessible. The process itself is about being of mutual benefit to all parties involved and the main aim is to achieve a joint investment in a goal that is shared. If there is any part of the process which the applying organisation doesn't understand, then seeking clarity at an early stage is encouraged.

25. The process may be initiated in two ways:

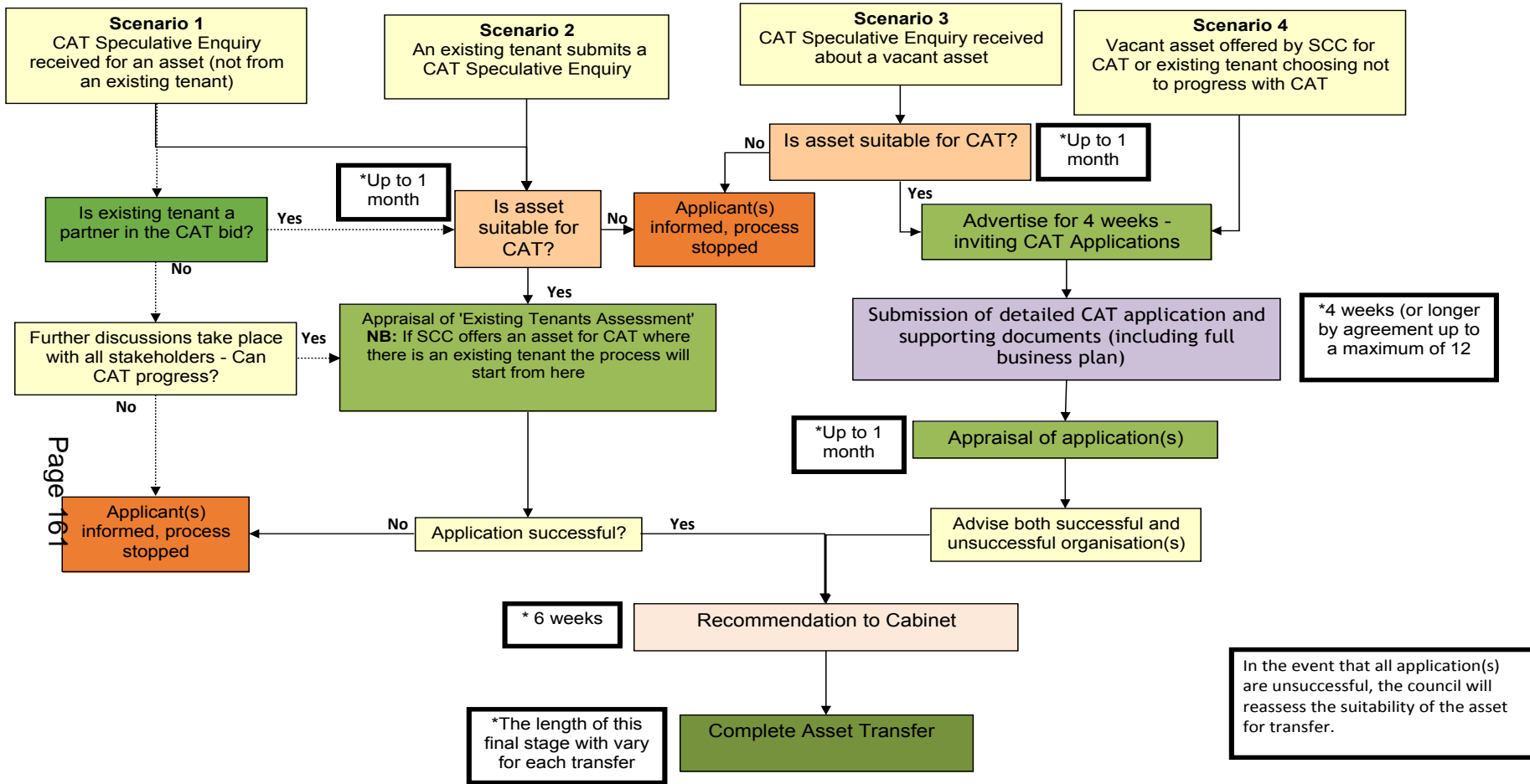
- By a community, voluntary or faith organisation approaching the council with a proposal, in which case the council will assess the initial request to determine whether the asset is suitable for transfer. Should the asset be deemed suitable to transfer, it will be promoted as being so in order to ensure an open and transparent process.
- By the council identifying assets as being appropriate to transfer, in which case the council will invite community, voluntary and faith organisations to submit proposals. This will be based on a proper review of assets and an agreement that they are suitable for transfer.

26. The process is detailed in the flowchart at appendix 1.

Monitoring

27. Following a successful transfer the council will reserve the right to undertake annual monitoring to ensure that the intended outcomes continue to be delivered.

Key Stages in the Community Asset Transfer Process



(Dotted lines indicate actions done in parallel to main tasks)

* All time frames are estimates

Please note: If an asset has been listed as an Asset of Community Value under the Community Right to Bid legislation then the process will take longer. This is because under this legislation, community groups have 6 weeks to say if they are interested in purchasing an asset. This then pauses the community asset transfer process and then the group has 6 months from when the property was first advertised to put together their bid. This applies to all the scenarios above. For more information about the Community Right to Bid Process see our website

<http://www.southampton.gov.uk/people-places/community-places-rights/community-rights/right-bid.aspx>

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Equality and Safety Impact Assessment

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

| | |
|---|--|
| Name or Brief Description of Proposal | Community Asset Transfer Policy: To transfer council assets (land or buildings) to community, voluntary or faith organisations at less than market value through community asset transfer. |
| Brief Service Profile (including number of customers) | |
| The asset transfer approach will involve the council reviewing any speculative inquiries submitted in respect of its assets. The Council may also choose, if appropriate, to offer an asset for CAT. Speculative inquiries could be received for a range of assets from unoccupied land to community buildings with sitting tenants. It is difficult to provide more information until inquiries about specific assets have been received. Each disposal at less than market value will be considered by Cabinet and ESIA’s for specific assets will be produced as part of this decision making process. | |
| Summary of Impact and Issues | |
| The transfer of assets to the community will create a different range of impacts, depending on the facilities’ current users, the local community, the new owners, etc. These impacts will be both positive and negative so individual, regularly updated, Equality and Safety Impact Assessments will be created for each asset transfer to explore possible impacts and whether these need mitigating. | |
| Potential Positive Impacts | |
| There are a range of potential positive impacts to the community being empowered to take ownership of assets, including: <ul style="list-style-type: none"> • Increased community activities that better meet local needs • Increased community cohesion | |

- Increased local skills base
- Increased partnership working

These positive impacts will also be explored in the individual ESIA for each asset transfer.

| | |
|-----------------------------------|--|
| Project Officer | Sandra Zebedee |
| Date | 20/02/2018 |
| Approved by Senior Manager | Vanessa Shahani – Service Lead Business Services |
| Date | 20/02/2018 |

DRAFT

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|---|
| Age | Depending on the assets that are transferred there may be activities already running there for older or younger people. There could be a positive impact if the activities continue or develop after transfer or a negative impact if they cease. | <p>Identify organisations with sufficient capacity, skills and experience to ensure continuance of existing provision.</p> <p>Map alternative provision and work with local groups and residents to ensure activities continue to run from other bases.</p> <p>Effective signposting to infrastructure support and funding opportunities.</p> <p>These will be fully investigated in the individual ESIA for each asset transfer.</p> |
| Disability | Depending on the assets that are transferred there may be activities already running there for disabled people, or people with impairments. There could be a positive impact if the activities continue or develop after transfer or a negative impact if they cease. | As above |
| Gender Reassignment | Depending on the assets that are transferred there may be activities already running there for transgendered people. There could be a positive impact if the activities continue or develop after transfer or a negative impact if they cease. | As above |
| Marriage and Civil Partnership | Depending on the assets that are transferred there may be activities already running there for married people or those in a civil partnership. There could be a positive impact if the activities continue or develop after transfer or a negative impact if | As above |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|--------------------------------|--|---|
| | they cease. | |
| Pregnancy and Maternity | Depending on the assets that are transferred there may already be early years activities running there e.g. Sure Start provision, NCT. There could be a positive impact if the activities continue or develop after transfer or a negative impact if they cease. | As above |
| Race | Depending on the assets that are transferred there may already be activities running there that contribute towards cohesion, for particular minority groups or for people of a particular faith. There could be a positive impact if the activities continue or develop after transfer or a negative impact if they cease. | As above |
| Religion or Belief | Depending on the assets that are transferred there may already be activities running there that contribute towards cohesion, for particular minority groups or for people of a particular faith. There could be a positive impact if the activities continue or develop after transfer or a negative impact if they cease. | As above |
| Sex | Depending on the assets that are transferred there may already be activities running for men or women. There could be a positive impact if the activities continue or develop after transfer or a negative impact if they cease. | As above |
| Sexual Orientation | Depending on the assets that are transferred there may already be activities running for lesbian, gay or bisexual people. There could be a positive impact if the activities continue or develop after transfer or a | As above |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|----------------------------------|--|---|
| | negative impact if they cease. | |
| Community Safety | Development of programmes of activities could have a positive impact on community safety e.g. increased youth provision could reduce levels of ASB. Conversely, should facilities close, there could be a negative impact on community safety, including community tensions, especially in inner-city locations and areas where there are greater levels of deprivation. | As above |
| Poverty | Many community buildings are located in priority neighbourhoods and provide facilities within walking distance for local people. An enhanced programme of local activities e.g. job clubs could have a positive impact on poverty. Conversely, should facilities have to close, there could be a negative impact on poverty. | As above |
| Health & Wellbeing | Depending on the assets that are transferred there may already be activities running that encompass health and wellbeing. There could be a positive impact if the activities continue or develop after transfer or a negative impact if they cease. | As above |
| Other Significant Impacts | Many community buildings house statutory services such as early years provision. Should facilities close then the council could struggle to meet its statutory obligations. | As above |

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| DECISION-MAKER: | CABINET | | |
| SUBJECT: | KENTISH ROAD FORMER RESPITE CARE CENTRE | | |
| DATE OF DECISION: | 17 APRIL 2018 | | |
| REPORT OF: | LEADER OF THE COUNCIL | | |
| <u>CONTACT DETAILS</u> | | | |
| AUTHOR: | Name: | Paul Juan | Tel: 023 8083 2314 |
| | E-mail: | paul.juan@southampton.gov.uk | |
| Director | Name: | Paul Juan | Tel: 023 8083 2314 |
| | E-mail: | paul.juan@southampton.gov.uk | |

| | |
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| STATEMENT OF CONFIDENTIALITY | |
| None | |
| BRIEF SUMMARY | |
| <p>At the Cabinet meeting on 30 November 2017, the Leader of the Council gave his assurance that the Kentish Road site would in the long term be used to support vulnerable adults and that an annexe would be refurbished to provide respite care. This paper sets out the next steps required to achieve the long term plan, including recommending approval for disposal of the site at “less than best consideration” to a local community or voluntary organisation, for the purpose of supporting vulnerable adults. This would include the provision of respite care for adults living with a learning disability. Taking into account the views of carers and their representatives, approval is also sought to re-open part of the main building in order for the council to provide a respite service at weekends in advance of the disposal, as an alternative to opening an annexe. This will give extra respite options and more choice in the short term, until the whole site is handed over. The additional cost of re-opening the scheme is forecast to be £10k a month, which can be met from existing budgets.</p> | |
| RECOMMENDATIONS: | |
| (i) | To approve the principle of disposal of the entire Kentish Road respite care centre site as shown on Appendix 1 at less than best consideration. |
| (ii) | To delegate authority to the Associate Director, Capital Assets after consultation with the Leader of the Council, the Cabinet Member for Finance, the Cabinet Member for Housing and Adult Care, the Service Director, Legal and Governance, the Service Director, Finance and Commercialisation and the Service Director, Adults, Housing, and Communities to transfer the site to a community or voluntary organisation following a competitive application process and to subsequently agree detailed disposal terms and negotiate and carry out all ancillary matters to enable disposal. |
| (iii) | To approve a limited direct provision by the council of respite care for adults living with a learning disability at 32 Kentish Road, subject to registration by the Care Quality Commission, pending |

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| | disposal of the site to a local community or voluntary organisation. |
| REASONS FOR REPORT RECOMMENDATIONS | |
| 1. | To ensure that the council makes a decision in a fair and transparent way about the disposal of the former Kentish Road respite care centre site. |
| 2. | To ensure that the Kentish Road site continues to be used to provide support for vulnerable adults in the longer term, including the provision of a respite service for adults living with a learning disability. |
| 3. | In the longer term, this will support the uptake of direct payments, which give people more choice and control over their care arrangements. When the site has transferred to the new provider, people will be able to use direct payments to purchase services to meet assessed needs. |
| 4. | Since the Cabinet resolution to close the scheme in November 2017, three local charities have expressed a firm interest in acquiring the site for the purpose of providing ongoing support to vulnerable adults, including providing respite care for adults living with learning disabilities. |
| 5. | Re-opening the scheme in advance of the transfer of the site will provide additional choice in the short term, will help meet preferences of people and their carers who wish to receive respite care at Kentish Road and support a smooth transition to the longer term arrangements. |
| ALTERNATIVE OPTIONS CONSIDERED AND REJECTED | |
| 6. | The alternative option of keeping Kentish Road as a council-run respite scheme in the long term was considered by Cabinet on 30 November 2017 and was rejected on the basis of this being inconsistent with the council's strategic aim of increasing choice and control and promoting individual approaches through the uptake of direct payments, and supporting the development of a diverse and vibrant market for care and support services. |
| DETAIL (Including consultation carried out) | |
| 7. | The site at Kentish Road comprises a two storey main building (32), which until November 2017 was used as an eight-bed unit providing residential respite care for adults living with a learning disability; an annexe formed of two semi-detached houses (32A and B); with associated grounds and a car park. |
| 8. | On 30 November 2017, Cabinet resolved to progress the refurbishment of one of the annexes at Kentish Road to provide a smaller, reconfigured respite service with an independence focus, replicating the service model at the Weston Court scheme, which opened in December 2017. |
| 9. | The council has since been approached by three charitable organisations wishing to explore the potential for running services for adults with care and support needs, including an element of respite care for adults living with a learning disability, from the site. These discussions have led to the conclusion that a vibrant and diverse market for care and support services can most effectively be delivered through disposing of the whole site, including the annexes and car park, to a community or voluntary sector partner. |

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| 10. | Initial meetings have been held with each of the three charitable organisations to explore the potential for a collaborative bid, which would maximise the potential of the site to meet adult social care needs in Southampton. |
| 11. | The proposals being developed by these charities would promote and improve the social wellbeing of people in Southampton and would support people to lead independent, safe and healthy lives. |
| 12. | Any disposal process would need to be open and transparent to allow all potential interested parties to engage and for applications to be appraised. |
| 13. | <p>The appraisal process will comprise of the following two stages:</p> <ol style="list-style-type: none"> 1. Initial expression of interest 2. Detailed application, including a financial strategy for implementation of proposals and financial offer <p>The process will involve a panel of officers and two representatives nominated by the Learning Disabilities Partnership Board to assess applications against outcomes based on which proposals would best meet the social care needs of adults in Southampton, including supporting independence, promoting choice and the provision of respite care for adults living with a learning disability.</p> |
| 14. | The opportunity to apply to run a service from the former Kentish Road site will be advertised on the council's website and offered to community and voluntary organisations via its community contacts database to ensure that all potentially interested parties are notified. |
| 15. | Applicants will have four weeks to submit an initial expression of interest. Once this has been appraised, successful short listed applicants will be invited to progress to the second stage and submit a detailed proposals and the accompanying financial offer. Four to eight weeks is anticipated to be allowed for this second stage. |
| 16. | In order to expedite the process, it is recommended that authority is delegated to the Associate Director, Capital Assets, after consultation with others as set out above, to progress the disposal of the site and to make any minor changes to the process. |
| 17. | It is proposed that the council will directly provide respite care for adults living with a learning disability, after obtaining registration by the Care Quality Commission (CQC) and until the disposal of the site. The re-opening the interim service is dependent on the date of CQC registration, successful employment of suitable staff and implementation of the necessary Health and Safety arrangements. |
| 18. | The council has applied to the CQC to add Kentish Road as a location to its approved regulated activity, which is a legal requirement prior to the scheme re-opening. The Registered Manager of the Shared Lives Service, currently based on the first floor at Kentish Road and rated as "good" by the CQC, has applied to extend her registration to include the new respite service. |
| 19. | The Leader of the Council has written to the Chief Inspector of Adult Social Care at the CQC seeking her support to expedite the registration process. |

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| 20. | The interim service provided by the council will operate from Friday afternoon to Monday morning, offering up to three nights of respite care at the time of greatest demand, in order to offer additional choice and to complement the other residential and non-residential respite services available locally. It is intended there will be four beds available, one for people with more complex needs (fitted with a hoist and other adaptations) and three for people with less complex needs. The service will be offered to people assessed as requiring residential care, taking into account the suitability of Kentish Road to meet the individuals' needs, in accordance with CQC requirements. People who were previously supported by Kentish Road will have the opportunity to return, if they wish, subject to a Care Act review. The majority of people who previously used Kentish Road have been supported to transition successfully to a suitable alternative and the impact of any further change will be considered as part of this review to determine what would be in an individual's best interests, taking into account relatives' and carers' views, in the usual way. |
| 21. | It is proposed that the interim service directly provided by the council will be staffed on a pro rata basis, as follows: a part time Registered Manager (combined with Shared Lives Service, as outlined above), one Deputy Manager, one Night time Coordinator, five support staff and a part time business support officer (combined with the Shared Lives Service). Support staff will be employed on fixed term contracts. If fully occupied, there will be a minimum ratio of one member of staff for two residents, but staffing will be reviewed in accordance with the needs of people using the service. The council has arrangements to provide additional agency staff with the necessary skills, knowledge and experience, as required. |
| RESOURCE IMPLICATIONS | |
| <u>Capital/Revenue</u> | |
| 22. | The costs associated with the disposal will be internal council costs and other professional costs which will be met from existing budgets. |
| 23. | The Council can transfer its own property interests (either freehold or long leasehold) to a third party. This transfer to a third party could either be a freehold or a leasehold. |
| 24. | The disposal will be at less than Best Consideration where the disposal terms are less than market value (taking into account any additional amount which might be expected to be paid by a purchaser with a special interest) but taking account of any elements of the transaction of commercial or monetary value to the Council. |
| 25. | The cost of re-opening the scheme at weekends is forecast to be £20k a month. Taking into account the cost of current provision for people who will be using the scheme, this is estimated to be an additional £10k per month, which can be met from current budgets. |
| 26. | In addition, a contingency of £67k has been allowed to ensure the scheme meets CQC, fire safety and other standards. |
| <u>Property/Other</u> | |
| 27. | Under the terms of any transfer, responsibility for all repairing, statutory compliance and health and safety duties will pass to the successful applicant. |

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

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| 28. | Under Section 1 of the Localism Act 2011, the Council has a general power of competence to do anything that individuals generally may do; however that general power is subject to other statutory limitations. Section 123 of the Local Government Act 1972 provides that the Council must dispose of land for best consideration, save for cases where the consent of the Secretary of State has been obtained for any disposal at less than best consideration. Under the General Disposal Consent (England) 2003, such specific consent is not required for any disposal where the difference between the unrestricted value of the interest and the consideration accepted, is £2M or less, provided that the purpose for which the land is to be transferred is likely to contribute to the “promotion or improvement” of the economic, social or environmental well-being of the area. |
| 29. | In determining whether or not to dispose of land for less than best consideration the Council should have regard to a number of factors including its accountability and fiduciary duty to local people, its community strategy, all normal and prudent commercial practices, clear and realistic valuation advice on the asset in question and EU State Aid rules. |

Other Legal Implications:

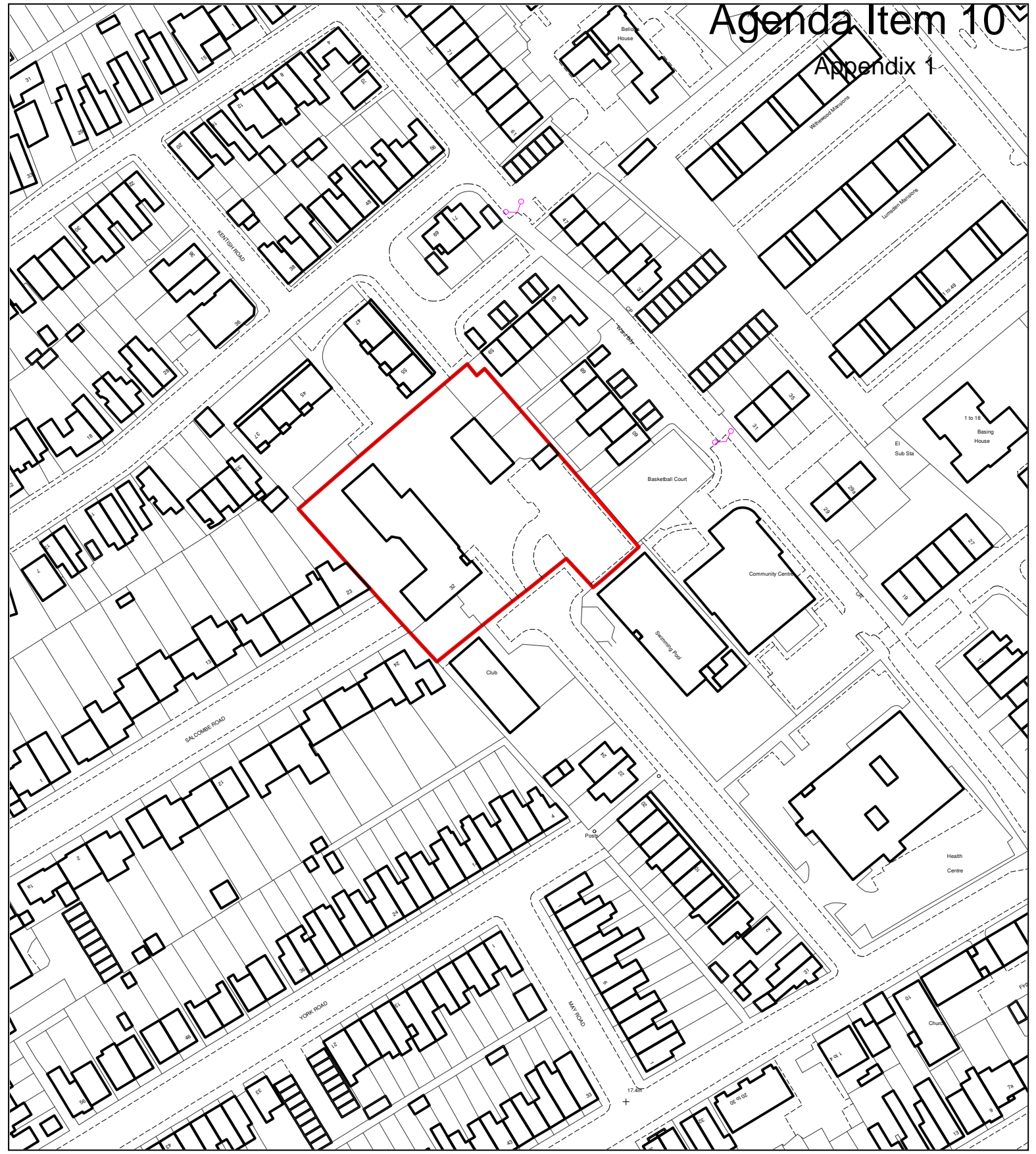
| | |
|-----|---|
| 30. | The asset will be transferred on the basis that all responsibilities for managing and repairing the building, including all health and safety responsibilities, will be transferred from the council to the receiving organisation. |
| 31. | The Equality Act 2010 imposed various duties on Local Authorities and in particular all Local Authorities must have due regard to it Public Sector Equality Duty when carrying out any function. In particular the duty to eliminate discrimination, harassment and victimisation and advance equality of opportunity and fostering good relations. Local Authorities also have a duty under the Human Right Act 1988 when carrying out any function, not to act incompatibly with rights under the European Convention for the Protection of Fundamental Rights and Freedoms, including Article 8 right to respect for private and family life and Article 14 prohibition of discrimination. |
| 32. | Local Authorities when carrying out any function must adhere to the United Nations Convention of the Rights of Person With Disabilities and in particular respect for dignity, autonomy, freedom to make own choices, equality and elimination of discrimination. |
| 33. | The Care Act 2014 imposes various statutory duties on Local Authorities when exercising Adult Social Care functions. This includes the duty to promote the individual’s well-being and protect them from abuse and neglect, including self-neglect; the duty to prevent or delay needs for care and support; the duty to provide advice and information on care and support available. The Act also places various duties and responsibilities on Local Authorities to commission appropriate, efficient and effective services and encourage a wide range of service provision to ensure that people have a choice of appropriate services and an emphasis on enabling |

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| | people to stay independent for as long as possible. The recommended option of moving to a more integrated and personalised service approach with a broader range of activities would support greater compliance with the Care Act 2014. |
| RISK MANAGEMENT IMPLICATIONS | |
| 34. | Specific risks and mitigating actions have been addressed in the sections on Resources and Legal Implications above. |
| 35. | The financial sustainability of adult social care is identified as a strategic risk for the council, which can be mitigated by supporting a vibrant and diverse care and support market. Transfer of the site to a community or voluntary sector organisation for this purpose would support this. |
| POLICY FRAMEWORK IMPLICATIONS | |
| 36. | The recommendations in this paper support the delivery of the council's key outcome of supporting people in Southampton to live safe, healthy, independent lives. |

| | |
|------------------------------------|---------------------------------------|
| KEY DECISION? | Yes |
| WARDS/COMMUNITIES AFFECTED: | none |
| <u>SUPPORTING DOCUMENTATION</u> | |
| Appendices | |
| 1. | Site plan |
| 2. | Equality and Safety Impact Assessment |

Documents In Members' Rooms

| | |
|---|---|
| 1. | None |
| Equality Impact Assessment | |
| Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out. | Yes |
| Privacy Impact Assessment | |
| Do the implications/subject of the report require a Privacy Impact Assessment (PIA) to be carried out. | No |
| Other Background Documents | |
| Other Background documents available for inspection at: | |
| Title of Background Paper(s) | Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable) |
| 1. | Not applicable |



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CAPITAL ASSETS

3rd Floor, One Guildhall Square,
Above Bar Street, Southampton. SO14 7FP

SCALE

1:1250

DATE

05/04/2018

Plan No
V3047

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32 Kentish Road, Southampton



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Equality and Safety Impact Assessment

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

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| Name or Brief Description of Proposal | To re-open Kentish Road respite centre for individuals living with a learning disability at weekends, pending the disposal of the site to a voluntary or community organisation for the long term provision of care and support to vulnerable adults |
| Brief Service Profile (including number of customers) | |
| The previous service was closed in November 2017 with suitable alternative respite arrangements put in place to support its former users. The majority of individuals have taken up these alternatives, but a small number have chosen not to at this time. Although there is sufficient alternative provision of residential and other types of respite care, reopening the scheme at weekends will provide additional choice and options at the time of greatest demand for residential respite services. It is proposed that the respite centre will reopen at weekends only (Friday afternoon to Monday morning) in order to complement other respite services at times of greatest demand; to ensure that the required number of staff can be recruited and trained to re-open the service as quickly as possible; to support a smooth transition to the proposed longer term arrangements; and to help avoid any liabilities for the incoming charity or voluntary-sector provider. It is not known how many people will take up the offer of receiving respite care at the re-opened Kentish Road scheme and the ESIA will be updated once the decision has been made by Cabinet and more is known about potential customers. This is not expected to have any detrimental impact on individuals living with a learning disability or their carers, as existing services will not be reduced or amended, and the proposal will bring additional choice and options. The proposed scheme will be able to support up to four people a night. Information about the former users of Kentish Road is contained in the Cabinet papers published to inform the decision taken on 30 November 2017 to close the previous scheme. In the longer term, the proposed disposal of the site to a voluntary or community organisation in order to | |

support vulnerable adults including the provision of respite care is expected to have positive equality impacts, when assessed against the alternative of selling off the site for residential development purposes.

Summary of Impact and Issues

- More choice/options for residential respite at weekends for people living with a learning disability and their carers
- Complement new existing service at Weston Court and other respite options (residential and non-residential) including shared lives
- The short term council-provided service will be in place pending disposal of the site to a voluntary or community organisation, following a selection process
- The long term plans for supporting vulnerable adults will be taken into account during the selection process, and this ESIA will be updated accordingly
- The decision not to dispose of the site for residential development may have an adverse impact on the availability of affordable housing in Southampton, which may impact adversely on poverty, but any adverse impacts are expected to be significantly outweighed by the positive impact on social wellbeing that will be delivered by the new occupier of the site

Potential Positive Impacts

- Additional choice and options for respite care for people living with a learning disability and their carers in the shorter term
- A community wellbeing hub incorporating services for older, vulnerable and disabled adults, including the provision of residential respite care and other services, is anticipated to be provided on the site following its disposal to a voluntary or community organisation
- The longer term potential positive impacts will be reviewed and ESIA updated once detailed plans have been received as part of the selection process

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| Responsible Service Managers | Dean Samber (Adult Social Care) and Neville Payne (Capital Assets) |
| Date | 9 April 2018 |
| Approved by Senior Manager | Paul Juan, Service Director, Adults, Housing and Communities |
| Date | 9 April 2018 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|----------------------------|--------------------------|--|
| Age | No adverse impact | |
| Disability | No adverse impact | |
| Gender Reassignment | No adverse impact | |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|--|
| Marriage and Civil Partnership | No adverse impact | |
| Pregnancy and Maternity | No adverse impact | |
| Race | No adverse impact | |
| Religion or Belief | No adverse impact | |
| Sex | No adverse impact | |
| Sexual Orientation | No adverse impact | |
| Community Safety | No adverse impact | |
| Poverty | Decision to dispose of the site for long term use to support vulnerable adults may have a minor impact on the provision of new affordable housing in Southampton. | Separate plans to identify sites for affordable housing development are being actioned. Any adverse impact is likely to be small when weighed against the significant positive impact on social wellbeing associated with the proposals. |
| Health & Wellbeing | No adverse impact | |
| Other Significant Impacts | No adverse impact | |

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| DECISION-MAKER: | CABINET MEMBER FOR ENVIRONMENT AND TRANSPORT | | |
| SUBJECT: | RENEWAL OF GLASS PROCESSING CONTRACT FOR SOUTHAMPTON CITY COUNCIL AND ALL AUTHORITIES IN HAMPSHIRE | | |
| DATE OF DECISION: | 17 APRIL 2018 | | |
| REPORT OF: | SERVICE DIRECTOR - TRANSACTIONS & UNIVERSAL SERVICES | | |
| <u>CONTACT DETAILS</u> | | | |
| AUTHOR: | Name: | Gale Williams | Tel: 023 8083 2536 |
| | E-mail: | gale.williams@southampton.gov.uk | |
| Director | Name: | Mitch Sanders | Tel: 023 8083 3613 |
| | E-mail: | mitch.sanders@southampton.gov.uk | |

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| STATEMENT OF CONFIDENTIALITY | |
| None | |
| BRIEF SUMMARY | |
| <p>Southampton City Council (SCC) are part of a Hampshire wide glass processing and disposal contract procured by Portsmouth City Council on behalf of Project Integra in late 2010. This was a five year contract with a two year extension, which has been further extended to cover the procurement of a new contract, which should come into effect 6 July 2018. This contract is currently being retendered and arrangements to dispose of glass will continue in similar way.</p> | |
| RECOMMENDATIONS: | |
| (i) | To agree and accept new glass processing and disposal contract procured by Hampshire County Council as the managing authority in order to dispose of glass effectively. |
| (ii) | To delegate authority to the Service Director: Transactions and Universal Services to do what is necessary to implement recommendation (i) above. |
| REASONS FOR REPORT RECOMMENDATIONS | |
| 1. | Continue with a Hampshire-wide glass processing and disposal contract in order to provide a consistent approach to glass disposal and a stable income source. |
| ALTERNATIVE OPTIONS CONSIDERED AND REJECTED | |
| 2. | None, as it would not be cost effective for SCC to procure a new contract separately from partners. |
| DETAIL (Including consultation carried out) | |

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| 3. | The current contract is between Project Integra and Veolia for the processing of glass collected from bring sites, kerbside and household waste recycling centres. The contract was let by Portsmouth City Council and was subsequently novated to Hampshire County Council (HCC), who manage the contract on behalf of partners for a nominal fee. |
| 4. | The glass processing contract will expire in July 2018 and a new contract is being procured on behalf of authorities by Hampshire Council, who are the lead and managing authority for this contract. The new contract will commence 6 July 2018. |
| 5. | A partnering agreement between all councils underpins the relationship between HCC as contract manager and the partners as users of the service. This partnering agreement will continue with the new contract. |
| 6. | The new contract is for a period of two years with the option to extend the contract in three annual periods until 5 July 2023. |
| 7. | <p>Glass income per tonne currently received is generally above the UK average and our glass is of good quality. The example below sets out how the rate of income will be calculated:</p> <p>If the rate of income in any given quarter is £15 per tonne, the bulk bay fee is £1.50 per tonne, and that the management fee is £350 per month.</p> <p>For “Authority X” which delivers 600 tonnes of glass to a Bulk Bay in the quarter, the quarterly income would be calculated as follows:</p> <ul style="list-style-type: none"> • Gross Income = 600 tonnes x £15 per tonne = £9,000 • MINUS bulk bay fee = 600 tonnes x £1.50 per tonne = £900 • MINUS management fee = £350 per month x 3 = £1,050 = £75 per party (£1050/14) • Net income = £9000 - £900 - £75 = £8,025 |
| 8. | <p>The glass collection and disposal process will be:</p> <ul style="list-style-type: none"> • SCC collects glass from householders from the kerbside, via bring banks and from the Household Waste Recycling Centre for recycling. • Glass collected is delivered to the contractor and the contractor collects the glass, processes it to improve the quality and sells it. • The contractor passes an agreed amount per tonnage from the sale of glass to the managing authority under the terms of the contract and SCC and each authority receives an apportioned share of the income. • SCC and other Hampshire authorities already work together through the Project Integra partnership and have agreed to join together for the purposes of obtaining the best value from the sale of glass collected. |
| RESOURCE IMPLICATIONS | |
| <u>Capital/Revenue</u> | |
| 9. | SCC needs to dispose of the glass generated by residents. There are no capital implications as the infrastructure is already in place to dispose of the glass. Disposal of glass generates an income to the Council. The rate of income per tonne for glass is set by the market, not through the contract. The letting of the contract therefore does not impact on the gross income received. |

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| | The contract cost of processing the glass is borne by Hampshire County Council, and the partnership organisations are charged a proportion of the contract cost as a management fee. If there is a variation in the price of the new contract, the management fee may change. This will not be known until after the procurement exercise has been completed. |
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| <u>Property/Other</u> | |
| 10. | No property implications are identified. |
| | |
| LEGAL IMPLICATIONS | |
| <u>Statutory power to undertake proposals in the report:</u> | |
| 11. | The Environmental Protection Act 1990 sets out the Council's powers and duties to make arrangements for the collection and disposal (and sorting of recyclable materials) for household waste within its administrative area. The proposals for glass recycling and disposal under the proposed contract are wholly in accordance with the Council's powers and duties as a waste disposal authority under the EPA 1990. |
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| <u>Other Legal Implications:</u> | |
| 12. | The procurement must be carried out having regard to and in compliance with UK Procurement legislation and the Council's duty to secure Best Value under the Local Government Acts. |
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| RISK MANAGEMENT IMPLICATIONS | |
| 13. | This is a low risk contract. The glass market is mature and there is still a high demand for new glass products in UK and Europe along with a strong circular economy. It is not impacted by restrictions in China as it uses European based recycling infrastructure. |
| POLICY FRAMEWORK IMPLICATIONS | |
| 14. | No policy framework implications are identified. |
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| KEY DECISION? | Yes |
| WARDS/COMMUNITIES AFFECTED: | All wards |
| <u>SUPPORTING DOCUMENTATION</u> | |
| Appendices | |
| 1. | |
| 2. | |

Documents In Members' Rooms

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| 1. | |
| 2. | |
| Equality Impact Assessment | |
| Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out. | No |
| Privacy Impact Assessment | |
| Do the implications/subject of the report require a Privacy Impact Assessment (PIA) to be carried out. | No |
| Other Background Documents | |
| Other Background documents available for inspection at: | |
| Title of Background Paper(s) | Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable) |
| 1. | |
| 2. | |