

Public Document Pack



| | |
|-----------------|------------------------------------|
| MEETING: | Cabinet |
| DATE: | Wednesday, 2 November 2016 |
| TIME: | 10.00 am |
| VENUE: | Reception Room, Barnsley Town Hall |

AGENDA

1. Declaration of pecuniary and non-pecuniary interests
2. Leader - Call-in of Cabinet decisions

Minutes

3. Minutes of the previous meeting held on 19th October, 2016 (Cab.2.11.2016/3)
(Pages 3 - 4)

Items for Noting

4. Decisions of Cabinet Spokespersons (Cab.2.11.2016/4)

Petitions

5. Petitions received under Standing Order 44 (Cab.2.11.2016/5)

Items for Decision/Recommendation to Council

Leader

6. Health and Wellbeing Board - Review of Terms of Reference and Membership
(Cab.2.11.2016/6) (Pages 5 - 14)

Corporate Services Spokesperson

7. Quarterly Analysis of Selective Voluntary Early Retirement and Voluntary Severance - July to September 2016 (Cab.2.11.2016/7) (Pages 15 - 20)

Communities Spokesperson

8. Safer Barnsley Partnership Plan Consultation (2016 - 2020) (Cab.2.11.2016/8)
(Pages 21 - 42)
9. Housing Options and Welfare Review (Cab.2.11.2016/9) (Pages 43 - 70)

Place Spokesperson

10. Residential Investment Fund (Cab.2.11.2016/10) (Pages 71 - 78)

People (Achieving Potential) Spokesperson

11. Family Centres: Developing a Model of Early Help for Families in Barnsley - Review and Progress (Cab.2.11.2016/11) (Pages 79 - 88)

To: Chair and Members of Cabinet:-

Councillors Houghton CBE (Chair), Andrews BEM, Bruff, Cheetham, Gardiner, Howard, Miller and Platts

Cabinet Support Members:

Councillors Cherryholme, Franklin, David Griffin, Lamb, Mitchell and Saunders

Chair of Overview and Scrutiny Committee

Chair of Audit Committee

Diana Terris, Chief Executive

Rachel Dickinson, Executive Director People

Matt Gladstone, Executive Director Place

Wendy Lowder, Interim Executive Director Communities

Julia Burrows, Director Public Health

Frances Foster, Director Finance, Assets and Information Services

Julia Bell, Director Human Resources, Performance and Communications

Andrew Frosdick, Director Legal and Governance

Katie Rogers, Communications and Marketing Business Partner

Anna Morley, Scrutiny Officer

Ian Turner, Service Director, Council Governance

Corporate Communications and Marketing

Labour Group Room – 1 copy

Please contact Ian Turner on 01226 773421 or email governance@barnsley.gov.uk

Tuesday, 25 October 2016



| | |
|-----------------|------------------------------------|
| MEETING: | Cabinet |
| DATE: | Wednesday, 19 October 2016 |
| TIME: | 10.00 am |
| VENUE: | Reception Room, Barnsley Town Hall |

MINUTES

Present Councillors Andrews BEM (Chair), Bruff, Cheetham, Franklin, Howard, Miller and Platts

Members in Attendance: Councillors Cherryholme, Clements, Frost David Griffin and Sheard

96. Declaration of pecuniary and non-pecuniary interests

There were no declarations of pecuniary or non-pecuniary interests.

97. Leader - Call-in of Cabinet decisions

The Leader reported that no decisions from the previous meeting held on 5th October, 2016 had been called in.

98. Minutes of the previous meeting held on 5th October, 2016 (Cab.19.10.2016/3)

The minutes of the meeting held on 5th October, 2016 were taken as read and signed by the Chair as a correct record.

99. Decisions of Cabinet Spokespersons (Cab.19.10.2016/4)

The Record of Decisions taken by Cabinet Spokespersons under delegated powers during the week ending 7th October, 2016 were noted.

100. Petitions received under Standing Order 44 (Cab.19.10.2016/5)

It was reported that no petitions had been received under Standing Order 44.

Communities Spokesperson

101. Housing Options and Welfare Review (Cab.19.10.2016/6)

Item withdrawn.

102. Community Safety Restructure (Cab.19.10.2016/7)

RESOLVED:-

- (i) that the outcome of the Community Safety Review (CSR) and proposed redesign of the service as detailed in the report now submitted be approved;
- (ii) that the consultation and communication proposals detailed in the report be approved;

- (iii) that approval be given to the move to implementation stage as from 1st April, 2017; and
- (iv) that further information regarding the Council's enforcement powers in respect of Japanese knotweed be circulated to Members.

People (Achieving Potential) Spokesperson

103. Education Outcomes in Barnsley 2015-16 (Cab.19.10.2016/8)

RESOLVED:-

- (i) that the education outcomes for children and young people aged 5-18 in educational settings in Barnsley in 2015/16 and the progress made from 2015 results, as detailed in the report, be noted; and
- (ii) that the action to be undertaken to progress further improvements at all key stages, be noted.

104. Barnsley Alliance Education Improvement Strategy (Cab.19.10.2016/9)

RESOLVED that the Barnsley Alliance Schools Improvement Strategy, as detailed in the report now submitted, be endorsed and the Key Performance Indicators be noted.

.....
Chair

BARNSELY METROPOLITAN BOROUGH COUNCIL

JOINT REPORT OF THE DIRECTOR OF LEGAL AND GOVERNANCE AND EXECUTIVE DIRECTOR PEOPLE

HEALTH AND WELLBEING BOARD – REVIEW OF TERMS OF REFERENCE AND MEMBERSHIP

1. PURPOSE OF REPORT

- 1.1 The purpose of the report is to update Members on the terms of reference for the Barnsley Health and Wellbeing Board, and the Senior Strategic Development Group.

2. RECOMMENDATIONS

- 2.1 **That the changes to the terms of reference of the Health and Wellbeing Board and Senior Strategic Development Group (SSDG), and their memberships, be approved;**
- 2.2 **That both terms of reference be subject to a further review in 12 months.**

3. BACKGROUND

- 3.1 The Health and Wellbeing Board was established in April 2013 as a Council Committee in accordance with the Health and Social Care Act 2012. The Act requires the Leader of the Council to serve on the Board, together with other Elected Members as he determines, together with the Council's Directors of Adults Services, Children's Services and Public Health. The Act also requires representation from the local Clinical Commissioning Group(s), Health Watch and NHS England (in the form of the Local Area Team).
- 3.2 The Council approved the membership of the Health and Wellbeing Board at its meeting on 28th February, 2013, authorising Cabinet to make any subsequent changes to the membership or terms of reference. The membership and terms of reference were reviewed again in August 2013 and August 2014.
- 3.3 In January 2016, an Internal Audit review of the governance arrangements of the Health and Wellbeing Board identified, among other recommendations, the need to review the membership and terms of reference of the Board, and the Senior Strategic Development Group (SSDG) that supports it.

4. CURRENT POSITION

- 4.1 A review was undertaken of both terms of reference and membership was undertaken and was discussed by SSDG during May, 2016, and finalised for consideration by the Board.

- 4.2 The Health and Wellbeing Board considered the revised terms of reference and membership at their meeting on 4th October, 2016 and recommended that they be submitted to Cabinet for approval. The documents are attached at Appendix 1 and 2.

5. BACKGROUND PAPERS

Reports considered by Full Council and Cabinet on 28th February, 2013 and 28th August, 2013 respectively, and report to Cabinet on 27th August, 2014.

Available for inspection in the Legal and Governance Directorate, Town Hall, Barnsley, telephone (01226) 773421 or email governance@barnsley.gov.uk

6. APPENDICES

Appendix 1:- Draft terms of reference for Barnsley Health and Wellbeing Board (September 2016).

Appendix 2:- Draft terms of reference for the Senior Strategic Development Group (September 2016)

Officer Contact: Ian Turner **Telephone No:** 773421 **Date:** October 2016

BARNSELEY HEALTH AND WELLBEING BOARD

DRAFT TERMS OF REFERENCE

(September 2016)

The Vision for Health and Wellbeing in the Borough

Our Vision for health and wellbeing in Barnsley is:

“That the people of Barnsley are enabled to take control of their health and wellbeing and enjoy happy, healthy and longer lives, in safer, stronger communities, wherever they are and wherever they live.”

(Barnsley Health and Wellbeing Strategy (2016-20))

Purpose

Through the Health and Social Care Act (2012) the purpose of the Barnsley Health and Wellbeing Board, established in April 2013, is to improve the overall health and wellbeing of individuals and communities in the Borough thereby enabling them to lead enriching lives and participate in thriving communities.

Our ‘Vision’ for health and wellbeing, as outlined earlier, is based around the principles of enabling personalisation and the ability of individuals and communities to exercise greater independence, choice and control over provision as part of meeting their needs.

Objectives

In order to implement this ‘Vision’ the Board has the following objectives:

- To oversee the formulation and publication of the Borough’s Joint Strategic Needs Assessment (JSNA) in order to provide a clear statement and rationale for the health and wellbeing needs of the population of Barnsley.
- To approve the Better Care Fund submission for Barnsley.
- To approve the Sustainability and Transformation Plan for Barnsley.
- To develop and implement the Borough’s Health and Wellbeing Strategy (including regular review of the Strategy) based on the needs of the population identified in the JSNA, together with other forms of local intelligence, including the Joint Strategic Intelligence Assessment (JIA) and Family and Child Poverty Needs Assessment, as part of developing a framework for how these needs are to be collectively addressed.
- Ensure the engagement of individuals and communities in helping inform and shape local health and social care policies and in holding services to account.
- Ensure health and social care strategic proposals and commissioning plans are consistent with the vision and priorities of the Health and Wellbeing Strategy.
- To actively promote integrated working across health and social care in the Borough and to embed a culture of mutual accountability and responsibility. This includes adopting a whole systems approach to service re-design, including the alignment of resources

across health and social care, as part of improving health and wellbeing outcomes for the population of Barnsley.

- To receive the Annual Reports of the Barnsley Local Safeguarding Adults Board and Local Safeguarding Children Board.

Membership

The Barnsley Health and Wellbeing Board will consist of the following elected representatives and senior leaders from across the local health and social care sector. This is based on the mandatory membership requirements indicated in the Health and Social Care Act, together with the flexibility to add to this as the local area sees fit.

- Executive Leader of Barnsley MBC
- Council Cabinet Spokesperson (Communities)
- Council Cabinet Spokesperson (People: Safeguarding)
- Council Cabinet Spokesperson (Public Health)
- Executive Director (People) Barnsley MBC
- Executive Director (Communities) Barnsley MBC
- Director of Public Health, Barnsley MBC
- Chair, Barnsley NHS Clinical Commissioning Group
- Chief Operating Officer, Barnsley NHS Clinical Commissioning Group
- Chief Executive, Barnsley Hospital NHS Foundation Trust
- Chief Executive, South and West Yorkshire Partnership NHS Foundation Trust
- Chair, Barnsley Healthwatch
- Chief Superintendent (Barnsley District) South Yorkshire Police
- Medical Director, NHS England (South Yorkshire and Bassetlaw Area Team)
- Chair of the Provider Forum

Each member of the Board will nominate a designated deputy to represent his/her organisation at meetings of the Group when the permanent member is unable to attend. This is to ensure continual and unfettered engagement of all partner organisations in improving the health and wellbeing of individuals and communities in the Borough.

In addition, the Service Director (Governance and Member Support) together with the Head of Commissioning, Governance and Partnerships, Barnsley MBC and the Health and Wellbeing Board Manager will be responsible for the overall co-ordination of the Board's work programme and for providing ongoing support.

Additional officers, particularly from the partner organisations represented on the Board, may attend its meetings to present specific reports, subject to the prior approval of the Chair of the Board.

Probity and Transparency

Each member of the Barnsley Health and Wellbeing Board will ensure that any personal, professional or pecuniary interests, relating to any matter being considered by the Board are properly stated and recorded during its meetings.

Roles and Responsibilities

Each member of the Board will undertake to:

- Promote and encourage discussion and ensure that the outcomes of discussions are satisfactorily recorded and follow up action is both progressed and reported to the next meeting within the context of mutual accountability.
- Promote the priorities and objectives of the Board and, in particular, the Health and Wellbeing Strategy within his/her own organisation, including service users and among networks of associates.
- Report on matters of relevance to improving health and wellbeing outcomes as part of informing the development of both the JSNA and Health and Wellbeing Strategy.
- Adopt a whole systems approach to collaborative working, based upon a Memorandum of Agreement, outlining protocols on matters including data and information sharing.
- To give due consideration to whether his/her organisation's resources can be aligned with another's or others to improve health and wellbeing outcomes for the people of Barnsley.

Governance and Accountability

For the purpose of the Health and Social Care Act and Borough wide governance arrangements, the Barnsley Health and Wellbeing Board will be regarded both as a committee of Barnsley MBC and as a strategic partnership. On this, it will be imperative that the Board maintains an interface with both the Barnsley Economic Partnership and Barnsley Community Safety Partnership so that any inextricable links between jobs and business growth, enhancing community safety and improving health and wellbeing are identified and any impact monitored.

The Health and Wellbeing Board will oversee the work of the following groups, namely:

- The Senior Strategic Development Group (SSDG)
- Joint Strategic Planning and Commissioning Group
- Provider Forum
- Barnsley Strategic Housing Partnership
- Barnsley Strategic Intelligence and Operational Intelligence Groups

In addition, the minutes of the meetings of the Barnsley Children and Young People's Trust, Community Safety Partnership, Stronger Communities Partnership and Provider Forum, will be submitted for consideration by the Board.

The permanent Chair of the Barnsley Health and Wellbeing Board will be the Executive Leader of Barnsley MBC. The Vice Chair of the Board will be the Chair of the Barnsley CCG.

Meetings of the Board should be held approximately every 8 weeks, with a minimum of 6 per calendar year. The quorum or minimum attendance for meetings of the Board will be one quarter of its membership and should include at least one Council Cabinet Spokesperson and one representative from the Clinical Commissioning Group. The Board's meetings are open to the public and both the Council's Standing Orders and the highest ethical standards of public service will apply to its proceedings.

Agendas for meetings of the Board will be agreed and approved by the Chair and the minutes of each meeting will be approved at the next meeting of the Board. Individual members of the Board may request a matter to be considered during a future meeting by contacting the Service Director (Governance and Member Support) no later than 14 working days before the date of the relevant meeting. The agenda and accompanying papers for meetings of the Board will be distributed a minimum of 5 working days beforehand.

Review

The Board is recommended to review these Terms of Reference on a 12 monthly basis.

Richard Lynch (Head of Commissioning, Governance and Partnerships (People Directorate, Barnsley MBC)

Barnsley Health and Wellbeing Board

SENIOR STRATEGIC DEVELOPMENT GROUP

THE EXECUTIVE OF THE BARNSELEY HEALTH AND WELLBEING BOARD

DRAFT TERMS OF REFERENCE

(September 2016)

The Vision for Health and Wellbeing in the Borough

Our Vision for health and wellbeing in Barnsley is:

“That the people of Barnsley are enabled to take control of their health and wellbeing and enjoy happy, healthy and longer lives, in safer, stronger communities, wherever they are and wherever they live..”

(Barnsley Health and Wellbeing Strategy (2016-20))

Purpose

The purpose of the Senior Strategic Development Group or SSDG is to oversee and collectively be responsible for ensuring the delivery of the Barnsley Health and Wellbeing Strategy and its regular review, through its role as the Executive Group of the local Health and Wellbeing Board.

The SSDG brings together senior leaders from across the Health and Social Care system to effectively drive forward the implementation of the priorities and objectives of the Strategy, report on progress and recommend any action to the Board in order to manage or mitigate any emerging risks, on an exception basis.

The SSDG will have a particular focus on transforming the health and social care system in order to help improve the range of outcomes for people in the Borough. This will be achieved through the following principles:

- All members of the SSDG will have an equal say in the deliberations of the Group, its operation and its outputs as part of ensuring the shared leadership of health and social care and its transformation, in the Borough.
- Each member will be individually responsible for the achievement and implementation of any of the SSDG’s outputs accorded to their organisation, within the context of mutual accountability.
- All members of the SSDG will demonstrate a commitment to bring together and help develop all transformational projects which impact on local health and social care, within an integrated, overall programme for the Borough.
- The SSDG, both collectively and individually, will be committed to ensuring that the delivery of the priorities and objectives of the Barnsley Health and Wellbeing Strategy remains at the heart of everything the Group does.
- The SSDG will adopt a whole systems approach to service transformation and service re-design, as part of implementing improved outcomes for the people of Barnsley.

Membership

The SSDG will be composed of the following senior leaders (and/or their nominated representatives)

- Executive Director (People) Barnsley MBC
- Chief Operating Officer, Barnsley CCG
- Chief Executive, Barnsley Hospital NHS FT
- Executive Director (Communities) Barnsley MBC
- Director of Public Health, Barnsley MBC
- Chief Executive, South and West Yorkshire Partnership NHS FT
- Chief Superintendent (Barnsley District), South Yorkshire Police
- Chief Fire Services Officer, South Yorkshire Fire and Rescue Service
- Chief Executive, Berneslai Homes
- Chairperson of Barnsley Healthwatch
- Service Director (Governance and Member Support) Barnsley MBC

In addition, the Head of Commissioning, Governance and Partnerships, together with the Barnsley Health and Wellbeing Board Manager will be responsible for the overall co-ordination of the Board's work programme and for supporting its work.

Each member of the SSDG will, also, nominate a designated deputy to represent his/her organisation at meetings of the Group when the permanent member is unable to attend. This will be to ensure the continual and unfettered engagement of all partner organisations towards the shared objective of improving health and wellbeing outcomes in the Borough and their collective ownership. Additional officers may attend meetings of the SSDG to present specific reports.

Roles and Responsibilities

Individual members of the Group will undertake to:

- Express the view of their organisation on matters of health and social care policy; ensure they are sufficiently briefed in order to contribute to and add value to the deliberations of the Group; help make decisions and ensure any decisions or outputs emerging from the SSDG are disseminated, progressed and implemented within their organisation, within a context of mutual accountability.
- Adopt a whole systems approach of collaborative working, to be based on a Memorandum of Agreement, outlining protocols on matters such as sharing data and information and to include giving due consideration to whether an organisation's resources can be aligned with another or others to improve health and wellbeing outcomes for the people of Barnsley.
- To act as a 'champion' for the Barnsley Health and Wellbeing Strategy within their organisation and within their network of associates.

Probity and Transparency

Each member of the SSDG will ensure that any personal, professional or pecuniary interests, relating to any matter being considered by the Group is properly stated and recorded, during its meetings.

Role of the Chair of the SSDG

The primary role of the Chair of the Group will be to actively bring together and engage partner representatives in the SSDG's work. The Chair will ensure that the priorities and objectives of the Health and Wellbeing Strategy, including any revisions to the Strategy, following review, together with the recommendations of associated policies, plans and strategies, are progressed and implemented, following approval by the Health and Wellbeing Board.

The Chair will ensure that the work of the SSDG accords with the highest principles of public service. The Chair will act to ensure steps are undertaken to expedite any outputs, leading to improvements in the health and wellbeing of people in the Borough.

The Chair will also act as the SSDG's spokesperson on other forums to which it is invited and with the media, in consultation with the Chair of the Health and Wellbeing Board.

The Group may give consideration to rotating the role of Chair of the SSDG among members.

Governance and Accountability

The SSDG will be accountable to the Barnsley Health and Wellbeing Board and its recommendations will be submitted for the Board's consideration, approval and adoption.

Meetings of the SSDG will be held approximately every four weeks with a minimum of 10 meetings per calendar year. The Group's meetings are not open to the public and observers wishing to attend the meeting, including those invited by individual members of the Group, must obtain the approval of the Chair, in advance of a meeting.

The quorum or minimum attendance for a meeting of the Group to begin, will be one quarter of its membership. This should include one senior leader from Barnsley MBC and one senior leader from Barnsley CCG.

Agendas for meetings of the SSDG will be agreed and approved by the Chair and the minutes will be approved at the next meeting of the Group.

Individual members of SSDG can request the inclusion of matters to be considered at future meetings by contacting the Health and Wellbeing Board Manager, no later than 10 working days before the date of the meeting. Urgent matters may be included at the end of an agenda, subject to the agreement of the Chair, at the beginning of the meeting.

Papers will be distributed a minimum of 5 clear days before the meeting.

Review

The SSDG should review its terms of reference every 12 months.

Richard Lynch (Head of Commissioning, Governance and Partnerships (People Directorate, Barnsley MBC))

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**QUARTERLY ANALYSIS OF SELECTIVE VOLUNTARY EARLY
RETIREMENT AND VOLUNTARY SEVERANCE
July 2016 to September 2016**

1. PURPOSE OF THE REPORT

- 1.1 The purpose of this report is to provide Members with information in respect of the Selective Voluntary Early Retirements and Voluntary Severances which have taken place during 1 July 2016 to 30 September 2016

2. RECOMMENDATIONS

- 2.1 It is recommended that the report be received in accordance with the required procedure.**

3. BACKGROUND

- 3.1 In November 1998 as part of the response to the Audit Commission's report on early retirement it was agreed to submit quarterly reports to Members in respect of the costs and numbers of employees taking voluntary early retirement.

4. CURRENT POSITION

- 4.1 This report covers the period 1 July 2016 to 30 September 2016

5. CONSULTATIONS

- 5.1 None required.

6. COMPATIBILITY WITH THE EUROPEAN CONVENTION OF HUMAN RIGHTS

- 6.1 There are no potential conflicts with Convention Rights in this report.

7. REDUCTION OF CRIME AND DISORDER

- 7.1 No implications.

8. FINANCIAL IMPLICATIONS

- 8.1 None arising from this report.

9. EMPLOYEE IMPLICATIONS

- 9.1 None arising from this report.

10. **LIST OF APPENDICES**

10.1 Document 1 – Quarterly Analysis July 2016 to Sept 2016

11. **BACKGROUND PAPERS**

11.1 None arising from this report.

Officer Contact: Julia Bell

Ext 3304

Date: October 2016

HUMAN RESOURCES, PERFORMANACE & COMMUNICATIONS
RPQASVER

Barnsley Metropolitan Borough Council

Human Resources

Quarterly Analysis of SVER's/VS's processed during

July 2016 to September 2016

For HR, Perf & Partnerships & Communications Directorate

| | | | | | | Indirect | | | | | |
|---------------|------------------|------------------|------------|--------------|----------------|-----------------|-------------|--------------|-----------------|--------------|------------------|
| Date Rec. | Scheme (SVER/VS) | Name of Employee | Term. Date | Reason | Budget Ref. No | Cost of Redund. | Cost of PIL | Strain Costs | Total Cost | Total Saving | NET COST/ SAV |
| | VS | 1 | 31.08.2016 | De-selection | | £ 21,426 | £ - | £ - | £ 21,426 | £ - | -£ 21,426 |
| TOTALS | | | | | | £ 21,426 | £ - | £ - | £ 21,426 | £ - | -£ 21,426 |

Barnsley Metropolitan Borough Council

Human Resources

Quarterly Analysis of SVER's/VS's processed during

For People Directorate

July 2016 to September 2016

| Date Rec. | Scheme (SVER/VS) | Name of Employee | Term. Date | Reason | Budget Ref. No | Indirect | | | Total Cost | Total Saving | NET COST/ SAV |
|---------------|------------------|------------------|------------|----------|----------------|-----------------|-------------|----------------|-----------------|--------------------|--------------------|
| | | | | | | Cost of Redund. | Cost of PIL | Strain Costs | | | |
| | SVER | 1 | 31.08.2016 | Deletion | | £ 5,493 | £ - | £ - | £ 5,493 | £ 53,028 | £ 47,535 |
| | SVER | 2 | 31.08.2016 | Deletion | | £ 9,171 | £ - | £ 145 | £ 9,316 | £ 53,133 | £ 43,817 |
| | VS | 3 | 31.08.2016 | Deletion | | £ 22,604 | £ - | £ - | £ 22,604 | £ 140,352 | £ 117,748 |
| | VS | 4 | 31.08.2016 | Deletion | | £ 8,207 | £ - | £ - | £ 8,207 | £ 129,047 | £ 120,840 |
| | SVER | 5 | 31.08.2016 | Deletion | | £ 405 | £ - | £ 1,018 | £ 1,423 | £ 7,676 | £ 6,253 |
| | VS | 6 | 31.08.2016 | Deletion | | £ 9,758 | £ - | £ - | £ 9,758 | £ 85,401 | £ 75,643 |
| | SVER | 7 | 31.08.2016 | Deletion | | £ 8,826 | £ - | £ 3,552 | £ 12,378 | £ 51,079 | £ 38,701 |
| | SVER | 8 | 31.08.2016 | Deletion | | £ 10,499 | £ - | £ 28,340 | £ 38,839 | £ 75,015 | £ 36,176 |
| | SVER | 9 | 31.08.2016 | Deletion | | £ 8,532 | £ - | £ 6,839 | £ 15,371 | £ 51,079 | £ 35,708 |
| | SVER | 10 | 31.08.2016 | Deletion | | £ 3,625 | £ - | £ 4,497 | £ 8,122 | £ 21,783 | £ 13,661 |
| | VS | 11 | 31.08.2016 | Deletion | | £ 2,529 | £ - | £ - | £ 2,529 | £ 43,362 | £ 40,833 |
| | SVER | 12 | 31.08.2016 | Deletion | | £ 9,117 | £ - | £ - | £ 9,117 | £ 53,880 | £ 44,763 |
| | SVER | 13 | 31.08.2016 | Deletion | | £ 8,679 | £ - | £ 6,697 | £ 15,376 | £ 51,079 | £ 35,703 |
| | VS | 14 | 31.08.2016 | Deletion | | £ 24,189 | £ - | £ - | £ 24,189 | £ 166,102 | £ 141,913 |
| | VS | 15 | 31.08.2016 | Deletion | | £ 11,219 | £ - | £ - | £ 11,219 | £ 201,021 | £ 189,802 |
| | VS | 16 | 31.08.2016 | Deletion | | £ 14,163 | £ - | £ - | £ 14,163 | £ 141,960 | £ 127,797 |
| TOTALS | | | | | | £157,016 | £0 | £51,088 | £208,104 | £ 1,324,997 | £ 1,116,893 |

| | Data | | | | | |
|---------------------|------------------------|--------------------|---------------------|-------------------|---------------------|----------------------|
| Directorate | Sum of Cost of Redund. | Sum of Cost of PIL | Sum of Strain Costs | Sum of Total Cost | Sum of Total Saving | Sum of NET COST/ SAV |
| HR, Perf&Part&Comms | £21,426 | £0 | £0 | £21,426 | £0 | -£21,426 |
| People | £157,016 | £0 | £51,088 | £208,104 | £1,324,997 | £1,116,893 |
| Grand Total | £178,442 | £0 | £51,088 | £229,530 | £1,324,997 | £1,095,467 |

| Directorate | Scheme (SVER/VS) | Name of Employee | Term. Date | Reason | Budget Ref. No | Cost of Redund. | Cost of PIL | Strain Costs | Total Cost | Total Saving | NET COST/ SAV |
|---------------------|------------------|------------------|------------|--------------|----------------|-----------------|-------------|--------------|------------|--------------|---------------|
| HR, Perf&Part&Comms | VS | 1 | 31.08.2016 | De-selection | | £ 21,426 | £ - | £ - | £ 21,426 | £ - | -£ 21,426 |
| People | SVER | 2 | 31.08.2016 | Deletion | | £ 5,493 | £ - | £ - | £ 5,493 | £ 53,028 | £ 47,535 |
| People | SVER | 3 | 31.08.2016 | Deletion | | £ 9,171 | £ - | £ 145 | £ 9,316 | £ 53,133 | £ 43,817 |
| People | VS | 4 | 31.08.2016 | Deletion | | £ 22,604 | £ - | £ - | £ 22,604 | £ 140,352 | £ 117,748 |
| People | VS | 5 | 31.08.2016 | Deletion | | £ 8,207 | £ - | £ - | £ 8,207 | £ 129,047 | £ 120,840 |
| People | SVER | 6 | 31.08.2016 | Deletion | | £ 405 | £ - | £ 1,018 | £ 1,423 | £ 7,676 | £ 6,253 |
| People | VS | 7 | 31.08.2016 | Deletion | | £ 9,758 | £ - | £ - | £ 9,758 | £ 85,401 | £ 75,643 |
| People | SVER | 8 | 31.08.2016 | Deletion | | £ 8,826 | £ - | £ 3,552 | £ 12,378 | £ 51,079 | £ 38,701 |
| People | SVER | 9 | 31.08.2016 | Deletion | | £ 10,499 | £ - | £ 28,340 | £ 38,839 | £ 75,015 | £ 36,176 |
| People | SVER | 10 | 31.08.2016 | Deletion | | £ 8,532 | £ - | £ 6,839 | £ 15,371 | £ 51,079 | £ 35,708 |
| People | SVER | 11 | 31.08.2016 | Deletion | | £ 3,625 | £ - | £ 4,497 | £ 8,122 | £ 21,783 | £ 13,661 |
| People | VS | 12 | 31.08.2016 | Deletion | | £ 2,529 | £ - | £ - | £ 2,529 | £ 43,362 | £ 40,833 |
| People | SVER | 13 | 31.08.2016 | Deletion | | £ 9,117 | £ - | £ - | £ 9,117 | £ 53,880 | £ 44,763 |
| People | SVER | 14 | 31.08.2016 | Deletion | | £ 8,679 | £ - | £ 6,697 | £ 15,376 | £ 51,079 | £ 35,703 |
| People | VS | 15 | 31.08.2016 | Deletion | | £ 24,189 | £ - | £ - | £ 24,189 | £ 166,102 | £ 141,913 |
| People | VS | 16 | 31.08.2016 | Deletion | | £ 11,219 | £ - | £ - | £ 11,219 | £ 201,021 | £ 189,802 |
| People | VS | 17 | 31.08.2016 | Deletion | | £ 14,163 | £ - | £ - | £ 14,163 | £ 141,960 | £ 127,797 |

BARNSELY METROPOLITAN BOROUGH COUNCIL

This matter is a Key Decision within the Council's definition and has been included in the relevant Forward Plan

**Report of the Executive
Director - Communities**

Safer Barnsley Partnership Plan (2016-2020)

1. Purpose of report

1.1 The purpose of the report is to provide members with an overview of the Safer Barnsley Partnership Plan 2016-2020 (SBPP) and the outcome of a recent consultation exercise held over the summer of 2016.

2. Recommendations

2.1 Cabinet members are asked to:-

2.1.1 Receive and note the SBPP 2016-2020 and outcome of the consultation exercise; and

2.1.2 Agree to receive an annual position statement on the delivery of the SBPP and priorities for the coming year.

3. Introduction

3.1 The Crime and Disorder Act 1998 and subsequent legislation places statutory duties on Community Safety Partnerships (CSP) to:-

- Produce an annual Joint Strategic Intelligence Assessment;
- Prepare and implement a community safety plan;
- Establish information sharing agreements; and,
- Establish Domestic Homicide Reviews.

3.2 Section 17 of the Act places a duty on Responsible Authorities; those being the Police, Fire and Rescue, Probation (both National Probation Service and Community Rehabilitation Company), Health and Local Authorities to work together to prevent crime and disorder.

3.3 Furthermore, the Act places a requirement on CSPs to consult with the community regarding community safety priorities. As part of the consultation process, a Visioning Conference was held in January 2016 where a series of stakeholders including community representatives and partners were given the opportunity to inform the CSP priorities for 2016-2020. This was further supplemented by a public consultation exercise undertaken over an eight week

period which concluded on the 2 September 2016. High level findings of the consultation are outlined at Section 10 to this report.

- 3.4 The Partnership Plan sets out a clear vision, priorities and outcomes based on the triangulation of the findings from the Joint Strategic Intelligence Assessment, the output from the CSP Visioning Conference and the consultation exercise. These are as follows:-

“Barnsley people and communities are safe and feel safe, able to contribute to community life and take responsibility for their actions and how they affect others.”

| Priority | Outcome |
|---|--|
| Protecting vulnerable people | The threat, harm and risk to vulnerable people, families and communities is minimised. |
| Tackling crime and anti-social behaviour | People and communities are protected through the targeting of crime and re-offending. |
| Promoting community tolerance and respect | Communities are safer, cohesive and more resilient. |

- 3.5 The Safer Barnsley Partnership has overall responsibility for the delivery of the plan and the strategic priorities contained therein. A governance review has been undertaken to align the sub-structures of the Partnership with the refreshed plan and strategic priorities. The revised governance structure is outlined at Appendix 1 to this report. To ensure timely and effective delivery of the identified priorities and outcomes, delivery plans and a stratified performance and risk management framework will be developed to align to each of the three high-level priority areas. Progress in terms of key deliverables, performance and the effective management of risk will be actively monitored by sub-groups and the Safer Barnsley Strategy and Performance Group. On a highlight and exception basis, escalations will be made through to the Safer Barnsley Partnership Board.

- 3.6 The partnership plan will be reviewed annually to ensure the Safer Barnsley Partnership remains agile and able to respond to any emerging trends and risks identified as part of the annual Joint Strategic Intelligence Assessment and other forms of intelligence.

4. Proposal and justification

- 4.1 The production of the Partnership Plan is a statutory duty placed on responsible authorities. The Safer Barnsley Partnership has taken a medium to long term approach to strategic planning with the development of a four year plan. This will help to provide stability and a longer-term view of community safety ensuring coordination and connectivity across the system harnessing the collective resources to achieve the best possible outcomes for residents and communities.

5. Consideration of alternative approaches

- 5.1 As described in section 4 of the report, the production of a partnership plan is a statutory duty. The discretion applies in the decision to provide stability and set direction over a four year period. The alternative approach would be to produce an annual plan however, the Safer Barnsley Partnership have taken the view that this is not a viable option as short-term planning approaches may potentially serve to cause fragility and uncertainty thereby reducing the effectiveness of the strategic planning processes.

6. Implications for local people / service users

- 6.1 Taking a four year approach to strategic planning across community safety in the borough will provide greater stability to local people. The partnership plan sets the strategic direction across a series of partners enabling a co-ordinated and cohesive approach to meeting the needs of local people and communities.

7. Financial implications

- 7.1 There are no immediate financial implications to the report, however, Responsible Authorities will need to ensure the Safer Barnsley Partnership priorities are taken account of in their respective service and financial planning processes.

8. Employee implications

- 8.1 There are no immediate employee implications as a result of the report.

9. Communications implications

- 9.1 As a product of the Partnership Plan, a communication and engagement plan will be produced to ensure stakeholders across the borough are fully aware of the strategic direction of community safety and are able to influence and inform delivery.

10. Consultations

- 10.1 Safer Barnsley Partnership board members have been consulted throughout the development of the partnership plan. A visioning conference was held with key stakeholders from across community safety and an eight week public consultation was held over the summer of 2016. Furthermore, specific work has been undertaken with the Youth Council to ensure the views of young people are captured to inform the community safety priorities for the Borough .

- 10.2 There were 183 responses received to the on-line consultation undertaken over an eight week period to 2 September 2016. Responses were received from a range of age groups and demographic profiles however, given the profile and

relatively low number of responses in comparison to population, the results are not statistically significant and therefore it is difficult to draw definitive conclusions. The results do however provide a snapshot of the views of local residents and communities.

- 10.3 The number of responses from children and young people were particularly encouraging with over 42% of the respondents belonging to the 0 to 16 years age group and a further 11% to the 17-20 years age group. The Safer Barnsley Partnership will continue to foster positive engagement with young people to ensure children and young people are able to inform the delivery of current priorities and influence any future priorities as the Partnership Plan develops and evolves.
- 10.4 Some representation in terms of responses was provided from across all other age groups spanning from ages 21 through to over 80 years. In terms of gender, almost two thirds of the respondents were female with just over one third were male.
- 10.5 In terms of minority community representation, approximately 3% of respondents were from black and minority ethnic groups, 9% were disabled people and 3% were from the lesbian, gay and bi-sexual (LGB) community. Further consultation and engagement will be undertaken with minority community groups through a Hate and Harassment event planned for September 2016 to ensure all delivery plans are representative and responsive to the diverse needs of our communities.
- 10.6 In terms of high-level results, a high proportion of respondents agreed with the Safer Barnsley Partnership vision with over 90% agreeing with each of the three priority areas being protecting vulnerable people (96%), tackling crime and anti-social behaviour (93%) and promoting community tolerance and respect (95%).
- 10.7 The survey covered the perception of safety both within localities and the town centre. Almost three quarters of respondents stated that they felt safe in their local areas with anti-social behaviour and substance misuse being cited as the main reasons for feeling unsafe.
- 10.8 In relation to the feelings of safety within the town centre, 46% of respondents feel safe in the town centre with 44% of respondents citing the main reasons for feeling unsafe as being anti-social behaviour and substance misuse. To provide further context, since the introduction of the Public Space Protection Order (PSPO), further engagement has been carried out with businesses and town centre users which suggests significant improvements in relation to the perceptions of town centre behaviour. The ongoing work in relation to the PSPO should help to improve the feelings of safety in the town centre.

10.9 The results of the consultation will be cascaded to Safer Barnsley Partnership Delivery Groups to ensure the views and perceptions of local residents and communities are taken into account and inform the development of local delivery plans which drive forward the strategic priorities set out in the Partnership Plan.

11. The Corporate Plan and the Council's Performance Management Framework

11.1 The partnership plan will support the delivery of the 2020 strategic priorities and outcomes:

Thriving and Vibrant Economy

- Develop a Vibrant Town Centre

People achieving their potential

- Reducing demand through improving access to early help
- Children and adults are safe from harm
- People are healthier, happier, independent and active

Strong and resilient communities

- Protecting the Borough for future generations
- People volunteering and contributing towards stronger communities

11.2 Performance will be actively monitored to ensure continuous improvement through a stratified risk and performance framework with detailed delivery plans and number of supporting performance indicators.

12. Promoting equality, diversity, and social inclusion

12.1 The principles of equality, diversity and social inclusion are at the heart of the partnership plan. A summary Equality Impact Assessment has been undertaken to ensure some of the most vulnerable sections of the community are not adversely affected and are effectively supported throughout community safety strategic planning and delivery.

13. Tackling the Impact of Poverty

13.1 The partnership priorities have been informed by the Joint Strategic Intelligence Assessment which takes into account emerging community safety trends and risks. The plan identifies the needs to support some of the most vulnerable individuals and sections of the community. This should have a positive impact on those living in poverty and at threat of poverty in the future.

14. Tackling health inequalities

14.1 As previously described in Section 13, the partnership plan will positively affect some of our most vulnerable individuals and communities and this includes those living with health inequalities.

15. Reduction of crime and disorder

15.1 A fundamental premise of the partnership plan is to reduce crime and disorder in line with Section 17 of the Crime and Disorder Act 1998. The plan sets the strategic direction for community safety in the borough.

16. Risk management issues

16.1 A robust and proportionate risk management plan will be put in place and overseen by the Safer Barnsley Partnership Board who will actively manage current and emerging risks ensuring effective mitigating actions are implemented to support delivery of the partnership plan and associated priorities.

17. Health, safety, and emergency resilience issues

17.1 There are no immediate health, safety or emergency resilience issues associated with this report.

18. Compatibility with the European Convention on Human Rights

18.1 The partnership plan is compliant with the European Convention on Human Rights.

19. Conservation of biodiversity

19.1 There are no apparent implications resulting from this report.

20. Glossary

[Only to be included if there are any terms or acronyms to explain]


21. List of appendices

Appendix 1 - Safer Barnsley Partnership Plan
Appendix 2 – Safer Barnsley Partnership Governance Structure

22. Background papers

N/A

Officer Contact: Paul Hussey
Telephone No 01226 775834
Date: 19 September 2016



Financial Implications /
Consultation
*(To be signed by senior Financial Services officer where no
financial implications)*



**SAFER BARNSELY
PARTNERSHIP
PLAN (2016–2020)**



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FOREWORD

Community safety is a key priority for Barnsley. We have made a significant amount of progress in a number of key areas around crime and community safety over recent years, working closely for and in partnership with our local residents and communities.

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The Safer Barnsley Partnership Plan (2016–2020) identifies a series of priorities where we feel collectively, that we can make the most difference to achieve the best outcomes for individuals, families and communities. It is important that in such times where resources are reducing we are able to share and pool all our resources to address the key community safety priorities facing the borough.

Working collaboratively with our communities to build on our previous successes, will be an essential ingredient to help us to continue to evolve and make further improvements to ensure people are safe and feel safe in their homes, neighbourhoods and communities.

We will review the plan on an annual basis to ensure it is consistent with local needs and circumstances and able to influence how community safety resources are used within the Borough.

The Partnership Plan will remain a live document and will be used as a means to track and where required challenge our performance and delivery.

We look forward to working with you to continue to make Barnsley a safe place to live, work and socialise for all members of our communities.



Wendy Lowder, Barnsley Council,
Acting Executive Director, Communities
Co-Chair of Safer Barnsley Partnership



Tim Innes, South Yorkshire Police
District Commander, Co-Chair
of Safer Barnsley Partnership

BACKGROUND AND CONTEXT

The Safer Barnsley Partnership is the statutory partnership responsible for tackling crime and disorder, combating substance misuse and reducing reoffending.

The Crime and Disorder Act 1998 and subsequent legislation places statutory duties on community safety partnerships to:

- Produce an annual Joint Strategic Intelligence Assessment;
- Prepare and implement a community safety plan;
- Establish information sharing agreements;
- Establish domestic homicide reviews.

Our partnership is known as the Safer Barnsley Partnership and comprises of representatives from the following agencies:

- Barnsley Council;
- South Yorkshire Police;
- South Yorkshire Fire and Rescue;
- National Probation Trust;
- Community Rehabilitation Company;
- Barnsley Clinical Commissioning Group;
- Neighbourhood Watch;
- Berneslai Homes;
- South Yorkshire Criminal Justice Board; and
- Office of the Police and Crime Commissioner.

The Safer Barnsley Partnership reports to the Health and Wellbeing Board, representing the links between crime, community safety and overall health and wellbeing.

We work closely with other strategic groups such as the Children's Trust, the Youth Offending Board and both Adult and Children Safeguarding Boards. This ensures that where joint priorities are identified, work is undertaken collaboratively to ensure the best possible outcomes for and with local people and communities.

This plan aligns with the priorities outlined in the South Yorkshire Police and Crime Plan (2013–2017) which ensures a collective approach to achieving the best possible outcomes for and in partnership with our communities.



1 THE PARTNERSHIP AND OUR COMMITMENT

Partnership approaches to tackling crime and disorder are largely built on the principle that no single agency can deal with, or be responsible for dealing with, complex community safety and crime problems.

We have developed the following principles to guide us all, as partners, to achieve our collective vision.

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A new relationship with residents

We will provide better connected services, putting residents at the heart of what we do. In return, we expect that residents will do what they can, for themselves, their families and their communities, helping us all to be safer.



One public sector – one borough

Residents want efficient and effective services no matter who provides them. We will work with partners to create joined up approaches that make sense to us all.



A relentless drive for efficiencies and outcomes

We will make sure every pound is spent effectively, delivering the outcome we all want to see – a safer Barnsley.

Our vision for community safety in Barnsley is...

“Barnsley people and communities are safe and feel safe, able to contribute to community life and take responsibility for their actions and how they affect others.”

2 PROGRESS SINCE THE LAST PLAN

PRIORITY 1 – PROTECTING VULNERABLE PEOPLE

OUTCOME – VULNERABLE PEOPLE ARE PROTECTED AND HAVE ACCESS TO QUALITY, SPECIALIST SUPPORT SERVICES WHICH MEET THEIR INDIVIDUAL NEEDS, IMPROVE THEIR SAFETY, REDUCE RISK OF REPEAT VICTIMISATION AND ENABLE THEM TO IMPROVE THEIR HEALTH AND WELLBEING.

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CASE STUDY 1

During a routine visit to her GP, L was identified as a victim of domestic abuse from her husband and a referral was made to the right agencies for support. L was immediately appointed an Independent Domestic Violence Advisor (IDVA) and due to her husband's coercive and controlling behaviour, she was quickly identified as high risk of further abuse.

L decided she wanted to escape from the abuse and flee her marriage. Therefore, she was supported throughout the process allowing her to leave the family home and relocate elsewhere with her children, without the knowledge of her husband. She continued to receive support and counselling at her new location. Here is what L said 11 weeks after the initial referral; "I would never have left my abusive marriage without the support from my GP and Pathways, I didn't think there were any options available to me."

A PICTURE OF OUR ACHIEVEMENTS...



Domestic abuse

- The number of Independent Domestic Violence Advisors (IDVA) has doubled to make sure we provide effective support for high-risk victims.
- 366 frontline professionals have received training in how to identify and support victims of domestic violence.



Hate and harassment

- We now have a new hate and harassment strategic plan, which has helped to improve community and stakeholder involvement.
- 550 people across the public, private, voluntary and community sector have received hate and harassment awareness training. This has led to an increase in reports of incidents of hate and harassment in the central areas of Barnsley.



Safeguarding

- The Safeguarding Children's Board have established a multi-agency safeguarding hub to tackle safeguarding issues within the borough.
- Additional funding of £100,000 has been secured to support the delivery of therapeutic support for victims.



Fire prevention

- South Yorkshire Fire and Rescue (SYFR) carried out 3,863 home fire safety checks in Barnsley in 2015.
- SYFR have launched the Safe and Well scheme, which focuses on working together to improve identification and access to those most at risk in our communities.

PRIORITY 2 – REDUCING DRUG AND ALCOHOL RELATED HARM

OUTCOME: THE HARM CAUSED BY DRUGS AND ALCOHOL MISUSE IS REDUCED FOR INDIVIDUALS, FAMILIES AND COMMUNITIES THROUGH THE DELIVERY OF INTEGRATED CARE PATHWAYS.

A PICTURE OF OUR ACHIEVEMENTS...

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61.9%

Of people in Barnsley who are dependent on opiates and/or crack cocaine are accessing treatment services which is well above the national average of 52 per cent.

Increased opportunities

The rate of successful completions from the treatment system means that those in treatment are accessing increased opportunities for education, employment and training skills.

Within the top 25%

of the best performing areas in the country.

Successful completion rates for those in treatment remain above national averages for all substance categories. Barnsley is currently ranked in the top two within Yorkshire and the Humber for all categories of treatment and remains within the top 25 per cent of the best performing areas in the country.



CASE STUDY 2

NB was arrested in the summer of 2015 and he tested positive for cocaine at the police station. Although NB reported only using cocaine occasionally, he identified that he required further support to ensure that this did not escalate and he continued to engage with the treatment offered to him. For several months, NB engaged in regular sessions with his recovery navigator and these focused heavily on identifying high risk situations, justifying substance use and relapse prevention techniques.

During the sessions, NB was also identified as a victim of domestic violence and therefore, his recovery navigator referred him to pathways for support. The interventions resulted in a sustained abstinence from illicit substances and no further arrests. NB was later discharged successfully from treatment.

PRIORITY 3 – PREVENTING AND REDUCING RE-OFFENDING

OUTCOME: THE PUBLIC IS PROTECTED AND OUR COMMUNITIES ARE SAFER THROUGH THE REDUCTION OF RE-OFFENDING IN BARNSELY.

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A PICTURE OF OUR ACHIEVEMENTS...



A significant reduction in Youth Justice Re-offending, which is, along with the overall offences committed by repeat offenders better than the national, regional and comparative areas.



A higher percentage of adult offenders leaving prison with suitable accommodation.



Ex-offenders are supporting others to achieve their goals through a newly established mentoring scheme.



A women offender strategy has been developed and championed by local staff, providing women only services for women offenders.

CASE STUDY 3

JD is currently on licence and voluntarily attends the Women's Programme weekly. She feels the group has given her purpose and increased her confidence greatly. She has attended a meeting and spoke about her experiences of being a female in the Criminal Justice and Prison System.

In company with GROW and her offender manager, JD has recently attended Northern College for an insight on what they offer. She now plans to sign up for a Volunteer Mentoring Course with a view to working as a volunteer with Women in the Criminal Justice System.

PRIORITY 4 – REDUCING ANTISOCIAL BEHAVIOUR

OUTCOME: BARNSELY IS A SAFE AND PLEASANT PLACE FOR PEOPLE TO LIVE, WORK AND VISIT. VICTIMS AND WITNESSES ARE EFFECTIVELY SUPPORTED TO MINIMISE THE DETRIMENTAL IMPACT ON ANTISOCIAL BEHAVIOUR.

A PICTURE OF OUR ACHIEVEMENTS...

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40%

reduction in intensive intervention



The community intervention team conducts intensive intervention with Barnsley's highest risk antisocial behaviour families, resulting in an overall reduction of over 40 per cent in demand from these families.

The integration of South Yorkshire Police and the Barnsley Council antisocial behaviour teams now provide resilience, shared accountability and reduced duplication.

80 DIRECT INTERVENTIONS

The introduction of a Public Spaces Protection Order to address antisocial behaviour in the town centre has resulted in more than 80 direct interventions since March 2016.

60% reduction in repeat demand cases

The neighbourhood resolutions team received a national citation for good practice, increased the number of volunteers, and is now an accredited trainer for the Restorative Justice Council. There is an ongoing reduction of repeat demand of around 60 per cent for cases that have been through neighbourhood resolutions.



CASE STUDY 4

Levels of antisocial behaviour and hate related incidents on a particular street in the borough were escalating with one house being the focus of attention. The antisocial behaviour team conducted a three-day long operation in partnership with a number of agencies where both police and civil powers were used. The operation was a success with acceptable behaviour contracts, community protection notices and a harassment warning being issued. In addition, 30 tonnes of waste was removed from the communal areas and residents' gardens.

Following the operation, the number of reported incidents on the street dropped by 65 per cent which helped achieve a better life for the residents.

3 SETTING OUR PRIORITIES FOR 2016 – 2020

UNDERSTANDING HOW SAFE BARNSELY IS – RESULTS OF THE JSIA.

SHARED PRIORITIES FOR 2016 – 2020

THE SAFER BARNSELY PARTNERSHIP HAS AGREED A NUMBER OF PRIORITIES TO DELIVER THE VISION FOR 2020.

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These priorities are based on information from the JSIA coupled with consultation with representatives from agencies across the partnership and the public in order to focus activity on what safety issues matter most to communities in the borough. Therefore, the shared priorities for the coming period will be:

To achieve our priorities we need to be ambitious, innovative and continue to work together so that we produce better outcomes for our community. The issues within these priorities are interlinked and therefore it is expected that work to tackle the priorities will not occur in isolation, but will support a holistic strategy to improve community safety within Barnsley.



Protecting vulnerable people;



Tackling crime and anti-social behaviour; and,



Promoting community tolerance and respect.

EMERGING ISSUES

The Joint Strategic Intelligence Assessment (JSIA) is a statutory requirement which is carried out annually with a view to providing an evidence base on which to inform the CSP's strategic plan and priorities.

The emerging issues from the JSIA 2015 are:

ANTI-SOCIAL BEHAVIOUR

Increase in anti-social behaviour specifically in the town centre. Begging vagrancy and street drinking incidents have also seen an increase.



The number of domestic abuse repeat victims has increased, along with the number of domestic crimes reported.



Recorded sexual offences have increased, including child sexual exploitation offences.



Levels of Arson and Deliberate Fires are low, however could be linked to other areas of ASB such as fly-tipping.



There are known links between Accidental Fires and vulnerability. This is a priority area for the Fire Service.



Barnsley has seen the highest increase in hate crime when compared to other areas in South Yorkshire but still has the lowest levels in the county.



Cyber crime is recognised as a national and emerging threat.



Both adult and youth re-offending rates have remained fairly stable within the borough.



Drug and alcohol treatment has seen an increase in successful completions.



International migration has increased locally, leading to the potential for underreporting of issues or tensions amongst new arrivals and vulnerable communities.



The use of Novel Psychoactive Substances (NPS), known as legal highs is a growing threat.



Increases in line with the national trend have been seen in violence offences.



Serious acquisitive crime has continued to reduce since 2012, however, this crime type still represents 25% of all crimes reported.



There is a clear link between mental health and strands of vulnerability. There has been an increase in child admissions for mental health issues.



Hospital admissions for alcohol related conditions has increased, however, alcohol mortality rates have decreased to lower than the national average.



Modern Slavery is naturally 'hidden' due to its nature, resulting in limited data. The Modern Slavery Act 2015 which recently came into force allows for better identification of modern slavery crimes.

SHARED PRIORITY – PROTECTING VULNERABLE PEOPLE

OUTCOME – THE THREAT, HARM AND RISK TO VULNERABLE PEOPLE, FAMILIES AND COMMUNITIES IS MINIMISED.

OUR FOCUS

We will:

- Work collaboratively to ensure that domestic abuse becomes socially unacceptable and that the harm caused to victims and their families is reduced.
- Take effective preventative and enforcement action to protect children from sexual exploitation.
- Acknowledge that vulnerable people are at an increased risk of the occurrence of accidental dwelling fires and ensure they are prioritised for home safety and health and wellbeing checks via the Safe and Well scheme.
- Re-commission holistic drug and alcohol services to encourage, support and empower individuals to take control of their lives and minimise the harm caused by drug and alcohol misuse.
- Provide a multi-agency approach to support and reduce the vulnerability of people with multiple and complex needs by coordinating and tailoring interventions across agencies to ensure individual, family and community needs are effectively addressed.

SHARED PRIORITY – PROMOTING COMMUNITY TOLERANCE AND RESPECT

OUTCOME – COMMUNITIES ARE SAFER, COHESIVE AND MORE RESILIENT.

OUR FOCUS

We will:

- Help to reduce ignorance and prejudice by helping people to get to know each other and challenging myths and racism.
- Defuse community tensions when they arise by recognising the signs early and having the right tools and skills available to reduce them.
- Work proactively to prevent people from being drawn into terrorism and reduce the likelihood of extremism.
- Ensure engagement processes are effective with our local communities.
- Utilise Area Councils and Ward Alliances to work in partnership with local communities to understand problems and create shared solutions.

SHARED PRIORITY – TACKLING CRIME AND ANTISOCIAL BEHAVIOUR

OUTCOME – PEOPLE AND COMMUNITIES ARE PROTECTED THROUGH THE TARGETING OF CRIME AND RE-OFFENDING.

OUR FOCUS

We will:

- Prevent antisocial behaviour and reduce the impact that it has on people's lives and the community through using our collective resources to support victims, target offenders and address issues in high demand areas based on threat, harm and risk.
- Prevent people becoming engaged in criminal activity and break cycles of re-offending through the continued focus on pathways out of crime including support, education, diversion, housing and employment.
- Work with the Town Centre Board and the business community to address issues of conduct in the town centre.
- Continue to develop and enhance our partnership working practices to reduce the level of violent crime including alcohol-related violence, domestic abuse and sexual offences ensuring root causes are effectively tackled – not just the symptoms.
- Protect and reduce the risk to individuals, communities and businesses from becoming victims of cybercrime through increased awareness and making the best use of all multi-agency resources to bring offenders to justice.



4 MONITORING THE DELIVERY OF OUR PLAN

Delivering our priorities

The Safer Barnsley Partnership has overall responsibility for the delivery of the plan. To ensure delivery of the partnership priorities, a series of task and finish sub-groups will be established. These will translate the strategic intentions of the partnership into operational delivery and will report on an exception basis into the strategy and performance group and Safer Barnsley Partnership Board.

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All actions will have lead officers and be time bound to ensure impact can be monitored and measured. This will be accompanied by a performance and delivery dashboard, where performance against outcomes and key metrics will be assessed; in line with key actions from the delivery plans, to provide a holistic assessment of impact and drive continuous improvement. The focus of performance assessments will be against the delivery of high-level outcomes to demonstrate the impact on local people and communities and their quality of life.

Resources

Public services are going through an unprecedented time of austerity measures coupled with rising expectations of local residents and communities which means that now more so than ever, the partnership will hold individual agencies to account for the collective delivery of the shared vision, outcomes and priorities. At a time when resources are and will continue to shrink, it is essential that all resources are applied in the most efficient and effective manner to achieve the best outcomes for and with local people and

communities. This challenge cannot be underestimated due to the organisational pressures the public sector faces over the coming period and the need to continue to further embed a culture of stronger and more resilient communities.

Communications and engagement

Communication and engagement are essential components of a successful partnership. A visioning conference was held with representatives from across the partnership, including the voluntary and community sector, to inform the development of the partnership plan.

As a product of this work, a communication and engagement plan will be produced to describe how stakeholders from across the partnership and wider general public will be engaged in the delivery of the community safety vision and priorities over the period to 2020. The intention is that a series of stakeholders from the visioning conference held in January 2016 will become part of a reference group and will be consulted regarding specific elements of work as the plan progresses over 2016-2020.

Review

The partnership plan covers the 2016-2020 period and it will be reviewed annually to ensure any emerging trends from the JSIA are factored into future years' delivery.



CONTACT US

If you need help understanding this document:

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Date of publication: June 2016

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Safer Barnsley Partnership Governance Structure

INDEPENDENT BODIES

- HEALTHWATCH BARNSLEY
- SAFEGUARDING ADULTS' BOARD
- SAFEGUARDING CHILDREN'S BOARD

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HEALTH & WELLBEING BOARD
 Statutory body via Health & Social Care Act 2012

BARNSELY CHILDREN AND YOUNG PEOPLE'S TRUST
 (Executive Commissioning Group)

COMMUNITY SAFETY PARTNERSHIP
 Statutory body via Crime & Disorder Act 1998

STRONGER COMMUNITIES PARTNERSHIP

Strategic

Strategy and Performance Group

PRIORITY ONE
 Protecting Vulnerable People

PRIORITY TWO
 Tackling Crime & Anti-Social Behaviour

PRIORITY THREE
 Promoting Community Tolerance & Respect

Protecting Vulnerable People Sub Group

Extended Youth Offending Team Board

Promoting Community Tolerance & Respect Sub Group

Tactical

OPERATIONAL TASK & FINISH GROUPS – to be established as and when required to support the delivery of the Partnership priorities and outcomes.

Operational

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BARNSELY METROPOLITAN BOROUGH COUNCIL

This matter is not a Key Decision within the Council's definition and has not been included in the relevant Forward Plan

Report of the Executive Director - Communities

Housing Options and Welfare Review

1. Purpose of report

- 1.1 To provide detail of proposals for the future delivery of housing options and welfare advice.

2. Recommendations

- 2.1 That the Housing Options function is integrated into the Safer Communities Team
- 2.2 That the Welfare Advice Specialist Service is provided by the Council as an integral service offer in Community Safety.
- 2.3 That the grant to Citizen Advice Bureau (CAB) is reduced to £50k
- 2.4 That the grant of £9.324 to DIAL Barnsley is maintained.
- 2.5 To commence staff consultation with a view to implementation from April 2017.

3. Introduction

- 3.1 Members will recall that on 18 November 2015 a report was presented to Cabinet in respect of the Welfare Review which commenced during 2015 in response to the decision to deliver a saving of £200,000 from the recurrent net welfare budget of £407,010. The recommendation which was approved was that Members agree the proposed model to reduce funding across Citizens Advice Barnsley and the Council's in house welfare rights service and transform the service in 2016/17.
- 3.2 The current welfare advice service sits in the broader housing options service. During this transitional year a number of new developments have taken place that relate to the service. This includes discussions around developing further integration of key functions with the police and considering the outcome of the Community Safety Review. This provides the Council with greater opportunities to deliver services that are easier for customers to access and are more cost effective and efficient.
- 3.3 It is important to note that there is a statutory duty for councils to provide homeless prevention and no statutory duty for councils to provide welfare advice however the significance of changes to the welfare state means the need for advice and support is increasing therefore to remove / cease funding in full of all of the advice services would drive people into more debt which would be counter-intuitive to the Future Council Strategy.

3.4 Current Position:

In addition to the in house service the Council commissions externally funded core services and services commissioned through the localities. These are:

- **Citizens Advice Barnsley (CAB)** – the Council currently funds CAB £112k per annum. This provides partial funding for their core advice service. The core service is available to all of the residents of Barnsley to access (no eligibility) The core funding allows CAB to recruit, train, supervise and manage volunteers. These volunteers provide the advice, reception and administration for the general service which underpins/feeds into the project services. It also contributes to the Chief Executive Salary and provides capacity to bid for other funding.
- **DIAL Barnsley** – the Council currently funds DIAL £9,324 a year toward advice for people with disabilities.
- **Locality Commissioning** – Appendix C provides a summary table of services commissioned through the area governance arrangements.

3.4 MacMillan nationally is understood to be reviewing its service offer and we understand from this perspective that they will no longer support the role within Councils. From the end of March 2017 the funding from MacMillan for the 3FTE advisors will cease. Currently these posts provide the majority of the community based welfare rights provision.

3.5 The outcome of the Community Safety review recommended some fundamental changes to the way the service is delivered. We already know that many of the customers that are supported through the community safety team are the same ones that access the housing options and welfare advice service in the Council. Joint working throughout the last 12 months between staff in both teams has proven the case. There is a further opportunity to align the two functions up much more closely. Therefore the proposals in this report should be read in conjunction with the proposals set out in the Community Safety Review report (CR417)

4. Proposal and justification

4.1 The design around integrated working and the outcome of the Community Safety Review has provided the Council with an opportunity to look at activity and take a view on where the welfare advice function is delivered.

4.2 Our recommended option is to :

Retain a welfare advice specialist service in house as an integral service offer in community safety, reduce funding to CAB from £120k to £50k and maintain funding to DIAL.

The rationale for this option is as follows;

The availability of good quality welfare support is essential to ensure that customers are accessing the right benefits, can manage their money effectively, can prioritise debts, borrow responsibly and ensure that they can maintain their accommodation. Without these foundations it is difficult for people to access further services, build

resilience and live independently. To be successful it is essential that information is available at the right time, accessible and takes a preventative approach, i.e. not waiting until the customer is in crisis.

The rationale for integrating this function with Community Safety is that working in a multi-skilled way will ensure that the potential for a crisis is identified early and that the range of issues customers may be facing, i.e. housing, welfare benefits, ASB, community issues etc, can be dealt with simultaneously and in partnership. It also ensures that clients support is captured early and that clients are not faced with having to be redirected to other services therefore having to repeat their story.

The complete removal of funding from CAB would create significant challenges and completely remove their ability to provide a universal advice service, supervise volunteers and bid for other funding sources. Reducing the grant would enable them to continue to deliver universal advice in part and have the capacity to bid for other funding.

The complete removal of funding from DIAL comes at a time when the service has bigger challenges around funding. In practice the funding supports the core information service which is the telephone advice team and volunteer support. They currently receive a lottery grant which pays the bulk of their services but this funding ends in January 2017. They are looking to resubmit a bid but this needs match funding. DIAL are also actively perusing other funding opportunities and the grant from the council towards the core team supports them to do this.

5. Consideration of alternative approaches

The following two options were also considered and discounted :

a) Procure a third party to deliver a welfare advice specialist service.

The rationale for this option is based on previous decisions to partner with the Voluntary, Community and Social Enterprise sector. It would allow local market rates to be applied and through strong contract management we could also ensure value for money.

Once savings have been garnered the actual budget available for procurement purposes would be in the region of £60k and therefore it is unlikely that there would be an interest in the market place. There would also be potential TUPE liabilities involved for the current Welfare Rights staff (2 core and 3 Macmillan) and the loss of 5 FTE staff from the council. DIAL and CAB as well as a range of other agencies make referrals into the core welfare rights team, particularly for the more complex cases. . This expertise and capacity would not be available if the in house service ceased to exist. The current joint working between CAB and Welfare Rights for the south area council evidences that having a clear focus in each organisation ultimately benefits the customer i.e. Welfare Rights focus on benefit issues and CAB on debt issues.

b) Decommission the service saving the Council £181,088 (Welfare Rights Advice Element Only).

This option would place considerable pressure on other Council and Partner services. It would essentially mean that there would be no Welfare Rights service in the Borough. Our plans for new approach to Community Safety as an integrated model could therefore not be realised in full.

6. Implications for local people / service users

6.1 The main implication is the reduction in grant to CAB which is likely to mean a reduction in the universal (no eligibility criteria) service they provide.

Whilst it is unreasonable to believe that every reduction can be mitigated we do believe that there are a range of services that remain for people whether they are provided through the Faith Sector, voluntary and community groups or indeed support such as that provided by Community Shop.

During the last period of the Welfare Review we introduced a triage approach to contact from customers for welfare rights advice and access to the Local Welfare Assistance Scheme. We identified that in 50% of contacts there was an ability to self serve / get some of their advice needs met online. Enabling independence not dependency is crucial for all sectors. Strengthening the relationship between the digital champions and CAB could support them in managing demand.

7. Financial implications

Housing Options & Homelessness Team

The current gross expenditure on Housing Options & Homelessness in 2016/17 is £602,756. Gross Expenditure in 2017/18 will be £581,756, this is a reduction in spend of £21,000 as a result of:

- One off earmarked funding in 2016/17 of £21,000 for a Tenancy Support Worker.

The 2017/18 Housing Options budget of £581,756 is made up as follows:

- £327,116 In House Staff – Providing Housing Options & Advice, Tenancy Support, Homelessness Support and Management of both Housing Options & Welfare Rights.
- £167,994 – Rents & Service Tenancies (Offset by income from Housing Benefit).
- £82,035 – Bed & Breakfast & Temporary Accommodation
- £4,611 – General running costs.

The 2017/18 budget and staff for Housing options will be transferred from Healthier Communities to work with the Safer Communities Teams in line with the finding of the Community Safety Review.

Welfare Rights Service

The current gross expenditure on Welfare Rights (including the contracts for Citizens Advice and Dial Barnsley) in 2016/17 is £937,605. Gross Expenditure available in 2017/18 will be £280,605, this is a reduction in spend of £657,000 as a result of:

- One off earmarked funding in 2016/17 of £523,000 (*NB any underspend on this earmarking will be carried forward to 2017/18 to continue funding Local Welfare Provisions*)
- Fallout of contribution from MacMillan of £99,000
- Fallout of contribution from Area Council of £35,000

The 2017/18 Welfare Rights budget of £280,605 will be made up as follows:

- £208,927 In House Staff – Providing Welfare Rights Advice, Local Welfare Assistance, Triage Service and Navigation Support.
- £1,678 General running costs.
- £59,324 of contributions to Citizens Advice Bureau (CAB) and Dial Barnsley.
- £10,676 contribution to the 2020 Efficiency proposals against Welfare Rights.
- As with Housing Options the 2017/18 budget and staff for Welfare Rights will be transferred from Healthier Communities to work with the Safer Communities Teams in line with the findings of the Community Safety Review.

Following recent dialogue with partners, the original extent of grant reductions to CAB and DIAL has been scaled back in order to balance the achievement of efficiencies against the level of provision required to mitigate the risks associated with welfare changes. This has led to a shortfall of £59,000 against the £70,000 KLOE (Appendix A refers).

It should be noted that whilst it has been possible to bring forward £10,000 in savings from 2018/19 to 2017/18 further effort will be required to identify the full KLOE saving of £70,000 (BU8 E7) from 2018/19.

Financial Implications of this report are detailed at Appendix A

8. Employee implications

Loss of 4 FTE Welfare Rights posts all externally funded

9. Communications implications

None directly arising from this report

10. Consultations

CAB and DIAL have been fully consulted.

11. The Corporate Plan and the Council's Performance Management Framework

None directly arising from this report

12. Promoting equality, diversity, and social inclusion

An Equality Impact Statement has been undertaken and is attached at Appendix E to this report. In summary the main equality risks are having an awareness and understanding of the customer base and associated levels of need and providing access to the service. These risks will be mitigated through robust monitoring, ongoing consultation and active participation in the design of the service.

13. Tackling the Impact of Poverty

The integration of teams across healthier and safer communities will enable stronger case management of individuals and families with support to manage issues that cause poverty such as debt management.

14. Tackling health inequalities

The integration of teams across healthier and safer communities will enable stronger case management of individuals and families with early identification of support around health issues.

15. Reduction of crime and disorder

The integration of teams across healthier and safer communities will enable stronger case management of individuals and families who may have been involved in criminal activity. This will provide an opportunity to identify support solutions at the earliest stage and prevent further escalation.

16. Risk management issues

The balance of risks emanating from the recommended option allows the Council to maintain services for the most vulnerable members of the Communities within a holistic service model whilst maintaining strong links and relationships with the Voluntary, Community and Social Enterprise sector.

17. Health, safety, and emergency resilience issues

None directly arising from this report

18. Compatibility with the European Convention on Human Rights

None directly arising from this report

19. Conservation of biodiversity

None directly arising from this report

20. Glossary

N/A

21. List of appendices

Appendix A – Finance

Appendix B – Loss of FTE

Appendix C – Area Council commissioned services

Appendix D – Staff structure

Appendix E – EIA

Appendix F – Service Delivery Principles

22. Background papers

None

| | |
|-----------------|-----------------|
| Officer Contact | Jayne Hellowell |
| Telephone No | 01226 776630 |
| Date | 21 October 2016 |

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Prepared on Behalf of the Director of Finance


FINANCIAL IMPLICATIONS

Housing Options and Welfare Review

| i) <u>Capital Expenditure</u> | <u>2016/17</u> | <u>2017/18</u> | <u>2018/19</u> | <u>Total</u> |
|--|----------------|----------------|----------------|--------------------|
| | £ | £ | £ | £ |
| To be financed from: | | | | |
| <hr/> | | | | |
| <hr/> | | | | |
| ii) <u>Revenue Effects</u> | <u>2016/17</u> | <u>2017/18</u> | <u>2018/19</u> | <u>Later Years</u> |
| | £ | £ | £ | £ |
| Current Gross Expenditure: | | | | |
| Housing Options & Homelessness Team | 602,756 | 581,756 | 581,756 | 581,756 |
| Welfare Rights Service | 816,281 | 210,605 | 210,605 | 210,605 |
| Payment to Citizens Advice Bureau & Dial Barnsley | 121,324 | 59,324 | 59,324 | 59,324 |
| | <hr/> | <hr/> | <hr/> | <hr/> |
| | 1,540,361 | 851,685 | 851,685 | 851,685 |
| Funded via: | | | | |
| Contributions to Welfare Rights (MacMillan, Area Council & Physical Disabilities Team) | -174,000 | -40,000 | -40,000 | -40,000 |
| Earmarked Budgets (LWA Balance, Universal Credit Work & Community Shop) | -544,000 | 0 | 0 | 0 |
| Service Tenancy Income (via Housing Benefit) | -217,994 | -217,994 | -217,994 | -217,994 |
| Public Health Grant | -388,235 | -388,235 | -388,235 | -388,235 |
| Base Budget for Housing Options & Welfare Rights | -216,132 | -216,132 | -216,132 | -216,132 |
| | <hr/> | <hr/> | <hr/> | <hr/> |
| | -1,540,361 | -862,361 | -862,361 | -862,361 |
| Variance | <hr/> | <hr/> | <hr/> | <hr/> |
| | 0 | -10,676 | -10,676 | -10,676 |
| To Contribute to: | | | | |
| Future Council 2020 Efficiency Proposals - BU8 E4 & E4ii | 0 | 0 | 70,000 | 70,000 |
| | <hr/> | <hr/> | <hr/> | <hr/> |
| | 0 | -10,676 | 59,324 | 59,324 |

Impact on Medium Term Financial Strategy:

Work is ongoing to achieve the savings required to meet in full the current (£59,234 p.a.) shortfall of those savings targets identified above.

Agreed by:  On behalf of the Director of Finance

20th October 2016

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Appendix B

| <i>Post Number (if new position write 'new position')</i> | Current Directorate and Service Area | Proposed Directorate and Service Area (if applicable) | Current Post Title | Current Grade | Current Hours | Current Reporting Line Manager | Deletion y/n | Proposed Post Title | Proposed Grade | Proposed Hours | Job Profile Number | Proposed Reporting Line Manager |
|---|---|---|--|--------------------------|--------------------------|---|-------------------------|--------------------------------|---------------------------|---------------------------|-------------------------------|--|
| 50101442 | Communities | NA | Welfare Rights Officer Macmillan | Grade 6 | 30 | Team Leader | Y | | | | | |
| 50101441 | Communities | NA | Welfare Rights Officer Macmillan | Grade 6 | 37 | Team Leader | Y | | | | | |
| 50101440 | Communities | NA | Welfare Rights Officer Macmillan | Grade 6 | 37 | Team Leader | Y | | | | | |
| 50085538 | Communities | NA | Community Based Welfare Rights Advisor | Grade 6 | 37 | Team Leader | Y | | | | | |

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Authorisation

| | |
|---|--|
| Certification by Executive Director: Date: | |
| Certification of Consultation with Director of Human Resources, Performance and Communications: Date: | Comments- Pay and Reward Date: |

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Summary of Advice services funded through Area Governance arrangements:

| Area Council | North | North East | Dearne | South | Penistone |
|---|---|---|--|---|--|
| Commissioned by | North Area Council | Royston, Cudworth & North East Ward Alliances (Ward Alliance Fund) | Dearne Area Council – via Dearne Development Fund | South Area Council | Penistone East/West Ward Alliance (Ward Alliance Fund) |
| Provider/s | Citizen's Advice Bureau & DIAL | Citizen's Advice Bureau & DIAL | DIAL (Citizen's Advice Bureau starting Sept 16) | Citizen's Advice Bureau & BMBC Welfare Rights | DIAL |
| Contract value | £72,500 p/a | Various small grants totalling £6,540 p/a | £6,060 p/a. DIAL £9974 p/a. CAB from Sept 2016 | £72,500 p/a | £5,570 p/a |
| Contract length/running since | 2 years Started Sept 15 | 2 years 6 months – started Jan 15 in Royston Others started February 2016 | DIAL – 2 years Started March 16 | 2 years 10 months Started June 14 | 1 year Started January 2016 |
| Activities provided – all sessions run in local venues | 1 x 4 hour drop in per week in 4 wards | Varied – 3 hour sessions weekly or fortnightly | DIAL – 2 full day drop ins CAB – 1 full day drop ins | 8 x 3.5 hour drop ins in 4 wards | 1 x 3 hour weekly drop in |
| Clients seen to date | 769 | 68 – Royston Others pending figures | 135 | 1720 | 44 |
| Benefit gains to date * | £1,061,259 | £85,562 | £105,748 | £1,315,718 | £48,464 |
| Debt managed to date | £200,354 | £22,934 | Not applicable until CAB contract starts | £1,364,123 | Not applicable |
| Use volunteers? | Admin support | Assistant Advisers | Admin support | Admin support | No |
| SROI completed? | Yes – approx. £20 for every £1 invested | No | No | Yes - £28.81 for every £1 invested | No |

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Healthier Communities

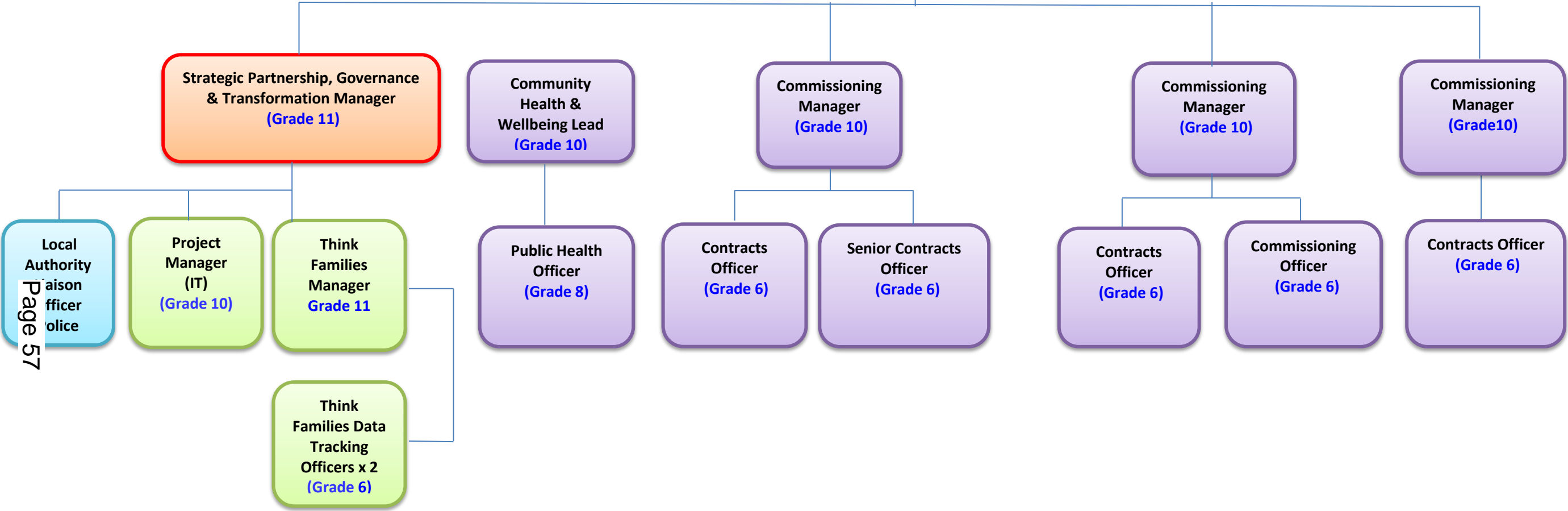
KEY: Healthier Communities Core Budget

KEY: Troubled Families Budget

KEY: Transfer from Safer Communities

KEY: Police Budget

**Head of Healthier Communities
(Grade 14)**



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Equality Impact Assessment

Changes to Services – Community Impact

To identify whether a service change will impact on all sections of the local community equally and agree what action can be taken to better understand the impact and to reduce any inequalities.

About the Service

| | |
|---|--|
| Name of Service | Welfare review – 2 nd stage |
| Name of Officer responsible for EIA | Jayne Hellowell |
| What outcomes does this service deliver for customers or the public? | <p>The Welfare Rights Service offers a free confidential advice service to residents of the borough on a range of benefit and tax credit entitlements. This is delivered both centrally and through a range of outreach sessions. There is also a small team of dedicated Macmillan advisors who support cancer patients with a range of welfare issues.</p> <p>There are a range of other advice agencies across the borough where people can access advice around welfare benefits, debt, housing, employment and consumer matters. The main ones being CAB (Citizens Advice Barnsley), DIAL and Age Concern</p> |

About the Service Change

| | |
|--|--|
| Why is the service changing? | In 2016/17 there was a budget reduction of £250k against a service budget of £544k. Services were remodelled during this time to account for the reduction in funding. In 2017/18 the service faces further funding loss due to withdrawal of the MacMillan Grant that pays for 3 x FTEs. |
| How is the service changing / likely to change? | The welfare Rights will need to further restructure to contain the budget reductions and remodel the service for customers. The proposals transform the service even further and merge the operational arm of the service that includes housing options and welfare into the safer communities structure. 'This The ultimate aim is to deliver a more holistic service |

model, with a focus on supporting people to help themselves and working in a more collaborative way with partners, key stakeholders and the community but doing so in a wider structure. This will result in a further reduction in budget of £70,000 and the decommissioning of externally funded advice currently delivered by CAB and DIAL Barnsley.

| | |
|--|---|
| What will this change mean for the service's outcomes for customers / the public? | The changes will mean that there will be a co-location of multi-disciplined staff. The ultimate outcome will be a more joined up service with a range of ways to access the service and with protection for the most vulnerable. This does mean a reduction in service offer by the externally funded services. |
| When will this be taking place (start and finish)? | The budget reduction will commence from April 17. |

What We Already Know About the Equality Impact of the Service

| | |
|--|---|
| <p>Service feedback:</p> <p>What do you already know about the equality impact of the service? This could be from consultation, complaints / compliments, stakeholder feedback, staff anecdotal evidence etc.</p> | <p>For the largest percentage of the local population and customers needing advice or guidance; it is expected that they will be able to self-serve. For the most vulnerable customers there will be the retention of the face to face service offer.</p> <p>The capacity for home visits will be significantly reduced. The service will be centralised which may have a negative impact on some members of the community who cannot travel to the available locations – due to mobility issues for example.</p> <p>There will be a retention of area based services through the services commissioned by Area Councils if they choose to do so in the future.</p> |
| <p>Data:</p> <p>What evidence is available about equality impact of the service area and what does it tell you? This could be service performance monitoring data, it could demographic data (as shown in <u>ward profiles</u>), etc.</p> | <p>Performance data is collected quarterly from the service but this is mainly around the type of advice and support that has been offered and the benefit gains as a result of the intervention.</p> <p>A high percentage of the support provided by the</p> |

| | |
|---|--|
| | <p>welfare rights service is around sickness related benefits, tax credits and appeals/tribunals. There is also significant support provided to cancer patients and their carer's by the Macmillian advisors.</p> <p>Equalities data is currently being collected, and where there are gaps to enable more robust equalities motioning in the future.</p> |
| <p>Previous EIA's:</p> <p>Has there already been an EIA on all or part of this service before, or a related service? If so, what were the main issues and actions it identified?</p> | <p>An initial EIA was completed as part of the review and this one builds upon that one.</p> <p>A CIA identified the following issues;</p> <p>There will be a reduction in the support available in the borough and the capacity to see customers in a timely manner will also be reduced. This could lead to increased waiting times and customers being unable to resolve issues within required timescales which could impact on entitlement. Residents may have reduced incomes which could lead to health issues both physical and mental, debt issues, increase in poverty, and pressure on other services.</p> <p>The main actions included;</p> <p>Avoiding duplication of provision, monitoring equality information, the need for community consultation and continuing the development of the service with key partners, community members and service providers. Providing support for those who need it and enabling those who can do it for themselves to do so by providing an online facility.</p> |

Assessment of Equality Impact

Protection from unlawful discrimination is provided by the Equality Act in relation to the following characteristics:

- disability
- age
- gender reassignment
- pregnancy, maternity, breastfeeding
- race
- religion and belief
- sex
- sexual orientation

An "equal" service is one where those who **need** to use the service the most **do** use the service the most.

What do you know about the extent to which the above groups need to use your service? What do you know about the extent to which they do use your service? And is there a gap between the two? How will the service change affect this?

The welfare rights service does support a range of individuals from across the borough. Data is not collected on all of the categories above. This will be changed following the review from April 16. From the numbers of call, appointments, appeals and tribunals that the service supports there is a large number of disabled people who receive support and advice.

Strengthening the collection of equality information will ensure that the equality profile of customers is better understood. It will also allow us to ensure that the service is accessible to everyone (taking into account people's access needs). We can use this information to further understand any impact that the change is having, or has had, on various sections of the community and will enable us to subsequently plan any required mitigations.

An “equal” service is one where people are equally likely to receive a **good quality of service**, and one where the service leads to **good outcomes for the customer**.

What do you know about the quality of the service people receive (eg fair decision-making, waiting times, etc)? What do you know about the outcomes your service achieves for customers or the public? How will the service change affect this?

It is envisaged that by working closer together and ensuring effective referrals and signposting that the quality of the service will remain high and waiting times will not be impacted. There is a risk around the provision of home visits as this may not be routinely available in the future, but will still be made available in certain circumstances. There will also be more ways to access the service for those that can through web based provision, web chat facilities, email advice etc. This will potentially enable the service to reach more customers as the online information will be available outside office hours.

An “equal” service is one where people can find out about it, apply for it and use it **accessibly and independently**.

What do you know about the accessibility of the service? How will the service change affect this?

The potential impact on accessibility may be around access to community based provision. Some of this is currently available in some wards through area council commissioned work and through CAB pots of money which support community based support.

There will still be the availability of face to face appointments in an accessible central location.

Which of the following have you identified a potential inequality for? Is this currently the case, or after the service change, or both?

Please indicate the degree of potential inequality. (H – high, M – medium, L- low, N – none)

| Group | Now | After | Details |
|-------|-----|-------|---------|
| Men | Low | Low | |

| | | | |
|--|-----|--------|--|
| Women | Low | Low | |
| Disabled people | Low | High | If there is a reduction in home visits, outreach and appointments there is the potential to impact on disabled people. However this would be mitigated by working alongside other organisations to ensure services were still available and accessible. |
| Deaf people | Low | Low* | *The potential inequality for Deaf People has been rated at low because of the planned mitigations, however if these had not been identified then this would increase to high. |
| BME people | Low | Medium | This has the potential to increase to medium as evidence shows that more people are approaching the service where English is not their first language, so they may encounter more issues with a web based system and fewer appointments. |
| LGB people | Low | Low | |
| Trans people | Low | Low | |
| Young People | Low | Low | |
| Older people | Low | High | As above for disabled people |
| Faith groups | Low | Low | |
| Pregnancy / maternity | Low | Low | |
| Other: Eg carers, homeless, military, low incomes | Low | Medium | Some of these people can be vulnerable and a reduction in service may impact, however the focus of the remaining resources will be on supporting the most vulnerable and we would work with a range of agencies to identify these individuals |
| Low incomes | Low | Medium | There is a risk that some people, who are already on a low income, may not be able to access the service when they need it (i.e. if they don't have access to a computer for the use of internet, if they don't have the funds to travel or have access to a telephone facility – or having the funds to make a call). |

Next Steps

To improve you knowledge about the equality impact . . .

Actions could include: community engagement with affected groups, analysis of performance data, improve equality monitoring, stakeholder focus group etc.

| Action taken so far: | Lead Officer | Completion date |
|--|-----------------------------------|--|
| Joint workshops with key advice agencies across the borough to try and mitigate the impact of the cuts and co- produce a new service model | Jayne Hellowell /Michelle Kaye | Completed |
| Working with area councils to recognise the impact of poverty and what might be needed locally to tackle this. | Michelle Kaye | Ongoing. North and South area council have commissioned welfare and advice services. The south area council is welfare project participating in the social return on investment pilot. |
| Undertook a business review of the welfare rights and CAB service to consider capacity and risks and propose options for future service delivery | Jayne Hellowell /Michelle Kaye | Completed August 15 |
| Working with Macmillan to consider future options around welfare support for cancer patients and their carer's . | Jayne Hellowell /Michelle Kaye | Ongoing |
| Undertook community consultation – a survey which was publicised through U-engage on the councils website | Michelle Kaye | Jan 16 |
| Action we will take: | Lead Officer | Completion date |
| Work closely with the CAB and other partners over the next 12 months to undertake further design work to ensure resources are targeted, duplication is minimised while sustaining a quality customer focussed service. | Jayne Hellowell /Michelle Kaye | By April 2017 |
| To undertake more community and targeted consultation the new service model evolves on the budget reductions to inform the future model. | Jayne Hellowell /Michelle Kaye | Aril 16-April 17 |

| | | |
|--|--|--|
| | | |
|--|--|--|

To improve or mitigate the equality impact . . .

Actions could include: altering the policy to protect affected group, limiting scope of service change, reviewing actual impact in future, phasing-in changes over period of time etc.

| Action we will take: | Lead Officer | Completion date |
|---|---------------|-----------------|
| To develop more robust equalities monitoring system for the service going forward so that impact and risks can be measured, evidenced and managed. | Michelle Kaye | April 17 |
| Continue to consult with the key equity forums to ensure that the new service is accessible to different sections of the community | Michelle Kaye | Ongoing |
| Consultation/discussion on the development of the new integrated service to ensure that it adheres to equalities and understands impacts and risks. | Michelle Kaye | April 17 |

The Public Sector Equality Duty

As a result of this EIA how have you demonstrated due regard to the need to:

| | |
|---|--|
| Eliminate unlawful discrimination, harassment or victimisation? | By ensuring that all services work collectively and in partnership and that services and people know where to report any discrimination and have the confidence that it will be acted on. |
| Advance equality of opportunity between people who share a protected characteristic and those who do not? | By identifying through more robust equality monitoring who is approaching the service and then by default who is not and trying to reach out and engage with those communities to ensure they are both aware of the service and that it is accessible to them. |
| Foster good relations between people who share a protected characteristic and those who do not? | By 'myth busting' around some common misconceptions about which groups get services and assistance. Better information and clear messages to the public about what is offered and how to access it. |

Reporting and Publishing

Please summarise the main findings and next steps identified in this EIA.

The outcomes of this EIA must be summarised in the cabinet report or delegated decision report which approves the proposed service changes. You could also include the EIA as an appendix to the report or reference it as a background paper.

You must also record how you will inform all stakeholders of the outcome of this EIA. In practice this is usually best achieved when reporting the service change itself.

Summary of equality impact

There is a need to ensure that as a result of the budget cuts to welfare that any revised service offer is targeted at those most in need whilst remaining accessible to all.

It is also important to ensure that the changes to the service do not disproportionately impact upon those with protected characteristics. The EIA has identified that Older People and Disable People are particularly at risk of significant adverse impact as a result of the proposed changes. Further to this the risk of inequality is also likely to increase for Carers, BME people and those on low incomes from low to Medium. Deaf People would also be high risk if mitigating actions had not been taken in order to minimise the potential impact – the current risk therefore remains low.

It will be important to monitor the impact that the service change is having on the community in order to resolve any issues that may become evident and to work to reduce the likelihood of any disproportionate impacts on the above sections of the community in particular.

Summary of next steps

There will need to be a restructure of staff within safer and healthier communities and alongside this the development of a new integrated service model with all partner involved which will include seeking feedback from customers, the public and key equality groups.

Equality monitoring also needs to be implemented in order to ensure that any disproportionate impact can be mitigated – this will also need to be regularly reviewed in order to be effective.

The welfare review and the EIA therefore recommend the following mitigating actions be taken:

- Monitoring of equality information – and mapping this against current performance data (i.e benefit gains, type of advice required etc), to better understand the customer profile and customer needs;
- Monitoring the impact that the service change is having on the community to reduce the likelihood of any disproportionately negative impacts on those with protected characteristics;
- Continued consultation community to better understand the issues/barriers/concerns;
- Key partners, stakeholders, community members, customers and current service providers to be involved in the development of the new

| | |
|---|---|
| | <p>service;</p> <ul style="list-style-type: none"> • Consultation/discussion with the Equality Forums to be undertaken to consider any impacts of the changes to welfare services, as they evolve over the next year, and to plan to mitigate against any adverse impacts whenever possible. |
| <p>How stakeholders will be informed</p> | <ul style="list-style-type: none"> • Through targeted focus groups and attendance at meetings and forums to get the input of others in the designing of the future service model. • Through any consultation • Through key mutli agency group's around welfare should as Barnsley Advice Network (BAN), Anti-Poverty Delivery Group. • Through area councils and elected members. |
| <p>How Cabinet will be informed</p> | <p>Through the cabinet process and key members are also linked into a number of the groups above.</p> |

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Service Design Principles

- To take a holistic approach to welfare support taking into consideration income or potential income, expenditure, debts, affordability and ability to manage and prioritise money and spending.
- In taking a holistic approach ensure that welfare advice is targeted at vulnerable adults presenting through the new community safety service.
- To work in a partnership environment supporting the most vulnerable, promoting self-serve and self-reliance, whilst ensuring that income is maximised and money managed.
- To provide free, confidential, impartial and independent advice to enable customers to deal with a range of issues, including money management, budgeting advice, welfare benefits and housing.
- To undertake case work for clients who require ongoing support to resolve their issues and to contribute to case conference/professionals meetings as required.
- To provide welfare and money advice to other professionals to ensure they can support customers effectively.
- The nature of the assistance provided will depend on a client's needs and will range from the provision of information to formal representation.
- Any advice and support will promote individuals independence and well being, including promoting opportunities for individuals to return into employment and/or training where appropriate.
- The aim of the service will be to diagnose the customer's problems, give information and explain options, identifying further actions the customer can take. Support them to self service if appropriate, signpost and refer to other services if required.
- To work in partnership with other advice and support agencies to deal with the presenting problems and achieving positive outcomes.

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BARNSELY METROPOLITAN BOROUGH COUNCIL

This matter is a Key Decision within the Council's definition and has been included in the relevant Forward Plan

**Report of the Executive Director of
PLACE**

Residential Investment Fund (RIF)

1. Purpose of report

- 1.1 This report sets out the case for Council investment in promoting housing growth, identifies the sources of funding that might be accessed through a Residential investment Fund (RIF) and identifies in broad terms the type of projects that might be supported.

2 Recommendations

It is recommended that:

- 2.1 **Cabinet agrees the principle of promoting housing growth through a Residential Investment Fund (RIF).**
- 2.2 **Cabinet approve that individual investment proposals are approved on a case by case basis, initially by the Capital Oversight Board, and, if necessary, dependent upon the nature of the investment, by Cabinet in accordance with the Council's established governance procedures.**

3 Introduction

- 3.1 It is proposed that the Council establish a Residential Investment Fund (RIF) to drive the delivery of new housing in the District. It is anticipated that this housing will be predominantly market sale but will also include affordable rent. By investing funding secured from a number of sources the Fund will facilitate increased and accelerated housing growth. Delivery will be primarily through partnership with both the private and the rented sectors. This fund will be available from 2016 – 2017 onwards.
- 3.2 The RIF does not have a defined level of resource as it will draw funding from a number of sources as and when necessary dependent on the requirements of specific projects; these funding sources are explored in more detail in the body of this report

4 Strategic Context

- 4.1 Barnsley's Housing Strategy identifies a requirement for 20,000 to 25,000 new homes by 2033. The Strategy makes support for increasing new housing development a key objective for the Council.
- 4.2 The Housing Strategy Delivery Plan identifies the following measures
- Boost supply of new homes to meet increasing housing demand
 - Work with developers to make housing development more economically viable
 - Enable more people to buy their own homes on the open market
 - Explore new funding delivery models to increase housing supply

- Work with partners to deliver more affordable housing
- Increase the supply of new build rented homes to meet growing demand

4.3 Barnsley’s plans for growth should be considered in the context of growth ambitions for the wider City Region. The SCR Business Plan 2015-2016 sets out an ambition to double the annual number of houses built from 3,500 to 7,000. Housing growth in Barnsley will play a key role in addressing the housing shortage in the wider City Region. Barnsley is working closely with the SCR to ensure that funding from the Gainshare Pot (Single Pot) and other funding sources is secured to enable the accelerated rate of housing delivery that is required.

4.4 The draft Local Plan, scheduled for adoption in summer 2017 identifies a need to increase the supply of housing in the District from a current rate of 730 properties in 2015/16 to 1070 per year up to 2020 and beyond. This increased level of delivery is essential to support the economic growth the Borough requires if it is to prosper. In Barnsley the housebuilding industry is not currently producing the housing that is needed and it is therefore the responsibility of the Council to intervene where it can to increase delivery.

Economic Benefits of Housing Growth

4.5 Increasing the rate of housing delivery will generate significant economic benefits for the District. Every new house built generates income for the Council in relation to Council Tax on an annual basis and New Homes Bonus for the first seven years following completion. The following table shows that increasing the supply of housing from current rates to the projected rate of 1070 per year would generate up to of £1m additional annual income per annum for the Council. The increased level of Council Tax would be collected year on year for the life of the property however New Homes Bonus receipts are only received for the first seven years.

Table shows ‘one year’ benefit of increased housing growth

| | Current Annual Delivery | Projected Annual Delivery |
|------------------------|--------------------------------|----------------------------------|
| Homes per Annum | 730 | 1,070 |
| New Homes Bonus | £803,000 | £1,177,000 |
| Council Tax | £730,000 | £1,070,000 |
| | £1,555,000 | £2,247,000 |

It should be noted that additional income from housing growth has already been built into the Council’s MTFS.

4.6 In addition to the direct economic benefit to the Council, increasing the level of housing delivery has further benefits. During the construction period jobs are generated in construction trades and following occupation income through household spending is generated for the wider economy.

4.7 This paper will set out the approach the Council will take in allocating funding from the RIF, examine some potential interventions designed to resolve issues of land supply viability and capacity and identify a number of early potential investments.

5 Potential Sources of Finance

5.1 Prudential Borrowing

The Council is able to borrow to support initiatives that deliver both affordable and open market housing growth. Whilst the Council is able to borrow in this way there would be revenue cost implication to be considered in the interim until repayment of the funding provided is forthcoming. It would therefore be necessary to make a clear business case for any investment.

5.2 Sheffield City Region Funding

The Council as member of the Sheffield City Region (SCR) is able to access funding made available by Government as part of the Devolution Deal. Whilst the Council does not have a ring-fenced allocation it is able to bid in to a number of funding streams to support new housing development. Funding to support housing growth will be made available in 2017-2018 to provide infrastructure through the SCR Integrated Infrastructure Plan (SCRIIP) and through the SCR 'Gainshare' funding Pot. The Council is, in addition, supporting two SCR bids to Government; the first for funding for Starter Homes and the second for funding for Shared Ownership.

5.3 HRA Reserves

As part of the 2016-2017 Housing Revenue Account Budget an HRA reserve fund of £14.3m was approved by Cabinet in December 2015. This money is available for housing growth however it must be spent on acquiring properties that are brought in to the HRA or on improving and maintaining property that sits within the HRA. The Housing Revenue Account is the statutory Landlord account and before any specific investments or interventions are made it will be necessary to ensure the intended use complies with relevant legislation.

5.4 Commuted Sum monies

The Council receives commuted sums through S106 planning agreements in lieu of affordable housing that might otherwise be provided on site. This money is available to support the provision of affordable housing in the District.

5.5 Homes and Communities Agency (HCA) Programmes

The HCA administer a number of programmes designed to promote housing growth. These programmes include Starter Homes, Shared Ownership, Rent to Buy, Builders' Finance Fund, and Help to Buy

5.6 Enforced Sale Enabling Works Levy

The Housing and Planning Act 2016 includes a provision that would allow the Council to enter in to an agreement with government to retain some or all of the Housing Levy generated through the enforced sale of 'higher value' council properties. Retention would be conditional on monies being used to achieve additional housing growth. The final determinations has not yet been published and as a result it is not clear precisely how monies generated in this way could be spent

6 Potential Investments

6.1 De risking Development Sites

It may be necessary for the Council to de risk larger development sites by creating fully serviced plots that can be disposed of on a phased basis. This investment can then be recovered on the sale of land to housing developers.

6.2 Land Acquisitions

Following a review of sites with extant planning approvals the Council believes that there will be occasions when it will be appropriate to acquire a site from a private owner in order to

achieve delivery using funding from the RIF. There is the potential to recover acquisition costs on subsequent sale or development of the site.

6.3 **Direct Delivery**

By assuming the role of developer the Council can add to the capacity of the house building industry in the District and add to the total quantum of completions achieved.

The development finance required to deliver a project should be fully recovered on completion of sales. It should also be possible to achieve more than 100% recovery. There is also the potential to generate a number of revenue streams for the Council.

6.4 **Sale Guarantees**

Many house builders are cautious about pressing ahead with development on sites where values are low and demand is not strong. In order to provide house builders with the confidence they require it may be appropriate for the Council to underwrite sales on some more marginal sites. It is likely that properties acquired in this way would be brought in to the HRA and let as affordable housing. Any acquisitions would be at a pre agreed price ratified as representing value for money.

6.5 **Stock Acquisition - Berneslai Homes**

There is the potential for reserves held in the HRA to fund a capital acquisitions programme to mitigate the loss of council housing stock through RTB and Enforced Sales. The RIF could support three broad areas of activity; new build, S106 acquisitions, and miscellaneous acquisitions.

6.6 **Loan Finance**

Development period loan finance can support house builders in bringing forward new development sites where conventional bank funding is not available. Loans would be secured through a first charge on the land and would be fully recoverable however there would be a risk of default if loans were provided to builders who under other circumstances had been unable to secure development funding.

7 Process and Governance

7.1 Following an initial report presented to SMT on 20th February 2016 the RIF was trailed at the Council's Property Forum on the 7th July with a request for expressions of interest from developers by the end of August.

7.2 The Council has received a number of proposals from developers that are currently being assessed against the following criteria; ability to increase and accelerate housing growth and recoverability of the investment. In addition the Council has discussed a number of proposals with Berneslai Homes that involve committing HRA reserves to deliver additional housing.

7.3 Following assessment of proposals will be brought forward for approval in the first instance by the Capital Oversight Board and if necessary, dependent upon the nature of the investment, by Cabinet in accordance with the Council's established governance procedures.

7.4 In the event that the RIF is oversubscribed the Council will undertake a competitive assessment of the submitted proposals in order to determine which is best able to deliver accelerated housing growth and recoverability. It should be noted however that there is no finite funding 'pot' as monies will be drawn from a number of different sources dependent on the nature of the bid. These will mean that different bids will not always be in direct competition.

7.5 Currently there are a number of investment proposals under consideration. These include a mixture of property and land acquisitions, and housing developments. These are summarised in Appendix 1. This appendix identifies a range of projects with potential housing numbers and project costs. These projects will be financed by a range of public and private sector funders and do not indicate the financial contribution to be made by the Council.

8 Consideration of alternative approaches

8.1 The Council does not have a statutory duty to invest in housing growth and could therefore choose to promote growth through its wider enabling activities. This has been the Council's approach up until this point and whilst a great deal has been achieved in terms of increasing the number of houses delivered in the District it is unlikely on its own to result in the delivery of the 1,070 properties per year as required in the emerging Local Plan.

The report proposes a number of potential investments in new housing projects designed to increase and accelerate housing growth. Alternative approaches will be considered if and when identified.

9 Implications for local people / service users

9.1 The report identifies a number of proposals to increase housing growth. The emerging Local Plan identifies a need for 1,070 new homes a year during the Plan period in order to meet the housing needs of households in Barnsley

10 Financial implications

10.1 The report identifies a number of different interventions to stimulate housing growth within the area. The intention is that any investment made by the Council will be recoverable.

10.2 Approval is sought in principle to establish a Housing Residential Investment Fund using funding from a variety of sources including HRA Reserves, S106 Commuted sums, SCR funding and potentially prudential borrowing. Each proposal will be considered on a case by case basis with the most appropriate funding option being proposed at that time

10.3 It should be noted however that where monies are set aside from the Council's own resources, these resources will not be available to support other competing priorities where appropriate.

11 Employee implications

11.1 There are no immediate employee implications as a result of this report however it will be necessary to keep this under review in the light of developing workload demands associated with project management of the RIF

12 Climate Change & Sustainable Energy Act 2006

12.1 There are no direct implications arising from this report this item will be addressed as individual proposals are brought forward

13 Risk Management Issues

13.1 Risk management issues will be addressed as proposals are brought forward on a case by case basis

14. Promoting Equality & Diversity and Social Inclusion

There are no direct implications arising from this report

List of Appendices

Appendix 1 Project Pipeline

Background Papers

Barnsley Housing Strategy (2014 – 2033)

| |
|--|
| Office Contact: Richard Burnham Telephone No: 01226 776517 Date: 11 October 2016 |
|--|

**BMBC Housing Development – Longcar Lane
Appendix 1**

| Project Name | Project Sponsor | Contacts | Description | Units | Funding Required | Funding Source |
|---|-------------------------|-----------------------|---|--------------------------|------------------|-------------------------------|
| DEVELOPER LED: | | | | | | |
| Seasons, Thurnscoe | Developer | BMBC/Private | Stalled partially-developed housing scheme (phase 1 160 units). Exploring opportunities to take an equity investment approach to accelerate housing growth via the delivery of upfront infrastructure works. | 500 | £920,000 | Prudential Borrowing/Reserves |
| Cypress Heights | Developer | BMBC/Private | Development Finance to be repaid on completion and sale of individual plots. Scheme to be progressed via Capital Oversight Board. | 14 | £875,000 | Prudential Borrowing/Reserves |
| Wombwell High | Developer | BMBC/Private | Phased disposal approach of a council owned asset to facilitate mixed use development. Opportunity for Joint Venture between the developer and council to accelerate housing growth via the delivery of an increased range of products. | 250 | TBD | Prudential Borrowing/Reserves |
| Bondfield Crescent Wombwell | Developer | BMBC/Private | proposed guaranteed sales arrangement to assist accelerated delivery. | 50 | TBD | Prudential Borrowing/Reserves |
| BMBC LED: | | | | | | |
| Land Acquisitions | BMBC Housing and Energy | Paul A/ Sarah C | Three sites have been identified in the ownership of a private developer that are currently not progressing. The Council has opened negotiations with the vendor to discuss acquisition. | 114 houses 30 apartments | TBD | SCR Capital Funding pot |
| Strategic Acquisition of Rockingham Site C HCA land | BMBC Housing and Energy | Sarah C/Econ Regen | The strategic acquisition of this site to facilitate the delivery of a link road which unlocks a large housing development site (H16 Hoyland) | 800 | £1,309,000 | SCR Capital Funding pot |
| Longcar Lane Housing Development | BMBC Housing and Energy | S.Cartwright | Housing development to provide 32 new homes (28 for sale 4 for rent). A pilot direct development initiative by the Council which provides the opportunity to deliver housing growth, generate a capital receipt and produce a development profit for re-investment. | 28 | £3,400,000 | Prudential Borrowing/Reserves |
| Longcar Lane Housing Development | BMBC Housing and Energy | S.Cartwright/S.Davies | Acquisition of 4 AH homes to be delivered as part of the Longcar Development | 4 | £240,000 | HRA & 30% 1 -4-1 Receipts |
| Strategic Acquisition North Gawber Colliery Phase 2 | BMBC/BH | S.Cartwright/S.Davies | The acquisition of 14 section 106 units into the HRA to be let as social housing. | 14 | £28,000 | Section 106 Commuted Sum |
| Strategic Acquisition Cross Street, Monk Bretton | BMBC/BH | S.Cartwright/S.Davies | The acquisition of 14 section 106 units into the HRA to be let as social housing. | 14 | £28,000 | Section 106 Commuted Sum |
| BMBC HRA Reserves Funding (£14.3m) | | | | | | |
| Baden Street, Worsbrough | BMBC/BH | S.Cartwright/S.Davies | Re-development of 6x new build homes. | 6 | £750,000 | HRA reserves |
| Empty Homes Programme | BMBC/BH | R.Kershaw/S.Davies | A refocus of the 'second hand' acquisition programme to focus on maximising available HCA grant for 2015/18 | 30 | TBD | HRA reserves |
| New Build Acquisitions Programme | BMBC/BH | S.Cartwright/S.Davies | Programme to include section 106 and Strategic Acquisitions and/or guaranteed sales offers from private development on strategic growth sites - J36 & J37 | | £8,000,000 | HRA reserves |

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BARNSELY METROPOLITAN BOROUGH COUNCIL

This matter is not a Key Decision within the Council's definition and has not been included in the relevant Forward Plan

Report of the Executive Director
(People)
to Cabinet

(19th October 2016)

FAMILY CENTRES: A MODEL OF EARLY HELP FOR FAMILIES – REVIEW OF PROGRESS (APRIL – SEPTEMBER 2016)

1.0. Purpose of the Report

- 1.1 To provide Cabinet with a overview of the first 6 months of operation of the Family Centre service (1st April 2016 to 30th September 2016)

2.0. Recommendations

- 2.1 It is recommended that Cabinet note the report, in particular the implementation of the recommendations agreed at Cabinet on the 9th September 2015, as follows:
- A new service delivery model has been implemented based on Family Centre main, linked and outreach sites (see Appendix 1)
 - Services are now offered and continue to be developed across the extended age range of pre-birth to 19 years old (25 years old if the young person has a disability)
 - Family Centre main sites are designated as 'Children's Centres' in order to meet the statutory duty to ensure sufficient Children's Centres and therefore will be regulated and inspected by Ofsted under the current inspection framework for Children's Centres. This relates to services for children pre-birth to 5 years old
 - Services for families continue to be offered on a borough wide basis including on site and outreach in communities and within the home
 - The Council ceased to directly deliver childcare in the areas agreed where demand can be met by the private, voluntary and maintained sector, in line with statutory guidance that the council should be the provider of last resort
 - The Council is delivering early education and care for two, three and four years olds on a sessional, term time only basis in the areas agreed, where there is a need to do so due to sufficiency
 - The Council de-commissioned the external providers of Children's Centres

3.0. Background to the Report

- 3.1 On the 9th September 2015 Cabinet agreed to implement a new model of early help for families through a network of Family Centres, supporting children pre-birth to 19 years (or up to 25 years if the young person has a disability) and their families. This ensured that the Council achieved the Future Council savings of £2.5 million during the period April 2015/17. Of this, £500,000 of savings were achieved in the first year with the remaining £2 million achieved through a full service transformation, re-design and restructure. Cabinet requested that an update be provided following 6 month of operation of the new service which was launched on the 1st April 2016.

4.0. Consideration of Alternative Approaches

- 4.1 The purpose of this report is to enable Cabinet to review the progress and impact made by the new Family Centres model upon giving children a good start in life, including through effective early help to families in need of support.

5.0. Proposal and Justification

5.1 General Overview

5.2 The Family Centre service has built on the strengths, expertise and infrastructure within the Children's Centre programme to ensure that:

- Family Centres provide a range of early help services for families with children pre birth to 19 years (25 years old if the young person has a disability) through a streamlined pathway
- Services include support with physical and emotional health, practical advice on keeping children safe, developing social networks through groups, support with education and learning, parenting behaviours, positive family routines, home and money, work, training and volunteering
- Family Centres are based in areas where there is a high level of need with the continuation of some services for all families delivered in partnership with health and education
- Family Centres are aligned to Area Councils

5.3 Under the re-shaped model services continue to be available across Barnsley and are accessible through Family Centre main, linked and outreach sites including community venues and in the home. Services continue to work in a whole family way and are targeted according to need with a focus on early intervention and prevention. The philosophy underpinning service delivery is a strengths based approach building family resilience and aspirations.

5.4 Family Centres are a non-stigmatised gateway to services for all families in their local community recognising that targeted interventions and outreach services are vital in supporting families who need it most in order to narrow the gap in outcomes between those experiencing the most disadvantage and the rest.

5.5 Early help services delivered through Family Centres are developed with families, partners and stakeholders to ensure they are firmly rooted within the community, building resilience and self efficacy. The model provides continuity of support for families across age phases ensuring accessible, non stigmatised, personalised and seamless services from pre-birth to 19 years old (25 years if the young person has a disability) recognising the vital nature of early help services in relation to children's future development and life chances.

5.6 The council is required as a statutory duty to ensure that there are sufficient Children's Centres. In order to meet this duty Family Centre main sites are designated as Children's Centres and as a result they will be inspected under the Children's Centres Ofsted inspection framework, in particular, relating to services for children and families pre-birth to five years old.

5.7 The new model of early help for families through Family Centres builds upon the arrangement of integrated services with health, education, social care and Job Centre Plus. There are opportunities for further co-location and joint delivery of integrated service across the age range in order to provide local holistic family services. Since April 2016 midwives are co-located on a full time basis in 4 of the Family Centre sites with plans to expand this to 5 over the coming months. This has further strengthened the delivery of key integrated services within communities, working with families and prospective parents at the earliest opportunity.

5.8 Family Centres continue to grow the network of professionals to better support families by building knowledge, confidence and trust between a wider group of professionals to facilitate integrated working and where appropriate referrals in line with thresholds of need. The service will continue to work closely with the 0-19 years health service when it is transferred into the Council on the 1st October 2016 in order to maximise opportunities this may bring.

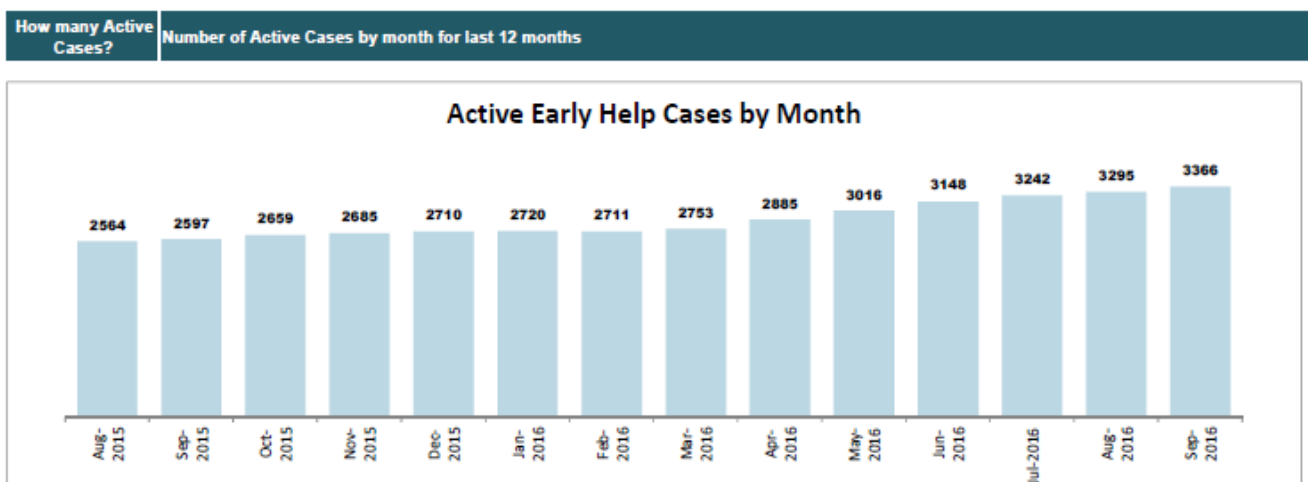
5.9 This builds on the premise that the safeguarding of children and young people and outcomes for families will be improved, when providers work effectively together with families, guided by shared principles, quality performance indicators and information sharing protocols. The information

sharing protocols currently in place are to be extended to accommodate the expanded age range.

5.10 Any further alignment of services will be based upon meeting gaps in service and avoiding duplication in order to maximise resources, target investment and ensure ongoing value for money.

5.11 Access to Services

5.12 Since the implementation of the new model it is evident that families continue to access provision through Family Centres. By the 30th September 2016, 5,292 families with children aged 0 to 19 years old (25 years old if the young person has a disability) had accessed a Family Centre service compared with 4,380 in quarter 4 (January – March 2016). The figure does not include the number of young people aged over 11 years old accessing targeted group or detached work led by the Targeted Youth Support service. In addition, there has been a continued increase in multi-agency early help activity in the borough when considering the number of Early Help Assessments being instigated by Family Centres and multi-agency partners. This provides targeted one to one support to families who need additional support as part of a team around the family.



* from Childrens Weekly CIN Report - Oct 2016

5.13 As the new model has only been in operation for 6 months it is too early to evidence the impact on longer term outcomes for children and families however it is encouraging that families, young people and children are continuing to engage in the service. Moreover, the service offer is developed using evidence based practice and is evaluated and performance managed rigorously at a local and borough wide level.

6.0 Early Education and Care within Family Centres

6.1 The Council continues to directly deliver early education and care on a sessional and term time only basis on six Family Centre sites and this is targeted at children accessing their two, three and four year old early education entitlement. In accordance with the recommendations agreed at Cabinet in September 2015 this is in the areas of Barnsley where the private and voluntary sector either do not or will not step in to meet need, in line with the council's duty to ensure access to sufficient early education and childcare. The following Family Centres offer early education and childcare:

- Darfield Family Centre
- Thurnscoe Family Centre
- Grimethorpe Family Centre
- Athersley Family Centre
- Kendray and Worsbrough Family Centre
- Dearne Family Centre

6.2 Worsborough Common Primary School governing body took the decision to continue to provide early years and childcare provision which was previously operated under the auspices of Rising Star's Children's Centre. This provided children and families with a continuity of care following the

transformation to the Family Centre model on the 1st April 2016.

6.3 For those areas where the Council ceased to be a direct deliverer of childcare all children and families were supported on a one to one basis to secure alternative provision prior to the 31st March 2016. An initial analysis of children and families accessing the provision suggests that the Council is acting in accordance with its statutory duty in that the large majority of families are very local to the provision and that sessional care meets their needs. This provides the Family Centre as a means of building a relationship with families and then to encourage their engagement in other services provided by the centre.

6.4 At the time of the Children's Centre statutory consultation in 2015, the vacancy rate in full day care (as recorded in the 2015 Childcare Sufficiency Assessment) was 38%. The annual audit of childcare settings undertaken during June 2016 shows a vacancy rate of 36% in full day care. In addition there remains a vacancy rate within sessional term time care (32%) and under 5's childminding places (58.1%). Further analysis shows that the Dearne South and Darton West wards show pressure on 3 and 4 year old places* , however, those areas have vacancies in other age ranges, which Ofsted now allows in-house flexibility to redefine the age categories to meet changing demand and local pressures.

**This is not due to any change in the service offer from Family Centres as early years and childcare provision operated by the Council remained unchanged in the Dearne South and Darton West area.*

6.5 The quality of the sector remains high and the current rate of good and outstanding provision in Barnsley is above national average at 88%.

7.0 Meeting the 30 Hour Entitlement for 3 and 4 Year Olds from September 2017

7.1 The government has identified 1,710 eligible 3 and 4 year olds in Barnsley who can access 30 hours of early education entitlement from September 2017. Nationally, it is estimated that 80% of parents will take up the free offer. Barnsley identified a potential pressure in the Monk Bretton and North East wards however this is mitigated by a new 46 place full daycare nursery due to open in the North East Ward and vacancies in existing provision in the Monk Bretton ward. The situation will be monitored closely by the service.

8.0 Universal and Targeted Group Provision

8.1 Due to the remit of Family Centres being expanded to include pre-birth to 19 year olds (25 years if the young person has a disability) a full remodelling of the evidence based, outcome focused service offer/programme is underway alongside a comprehensive scheme of workforce development. services continue to be integrated and delivered in partnership with a range of private, voluntary, maintained and statutory agencies. Consultation has been undertaken with stakeholders and as a result there is an increasing focus upon emotional health and wellbeing as a golden thread through provision and opportunities are being explored in relation to the Future In Mind transformation programme.

8.2 Through the previous delivery of services through Children's Centres and the Targeted Youth Support Service there is an already embedded programme of delivery for children and families pre-birth to 5 years old and 11 years old and older respectively. This is reviewed and refreshed as part of a continuous improvement programme. The current focus of this expansion of group provision is aimed at families with children in the 5-11 year old age group. The approach in Family Centres is to offer families a holistic session(s) delineated by age range called the 'Now I am ...' programme. A 'Now I am 5-7 years old' has been developed and will launch in September 2016 closely followed by a 'Now I am 7-11 years old'. The sessions aimed at children starting their secondary phase of education (11-12 years old) and teenagers are also being reviewed by the Targeted Youth Support service. The sessions are aimed at both children and families using a variety of means of engagement including outreach. In addition to the Now I am programme there are bespoke sessions being undertaken including Kids Cook and Eat and parenting programmes for families with teenagers.

8.3 The summer programme in 2016 included services for children and families across the age range and proved effective in raising awareness of the Family Centre wider offer and as an engagement initiative. There continues to be the delivery of the Solihull Parenting Programme for families with children from across the age range and this has been differentiated to provide sessions for families with similar age children as opposed to all age. This has proved effective in engaging families in discussion around how they address particular issues in relation to sharing of issues/experiences, developing and implementing strategies and general peer support.

8.4 Links with schools and in particular Primary Schools are being strengthened as this was previously focused on the transition from Children's Centre to school at age 5 years. It is imperative that the links and information sharing with Parent Support Advisors in schools is strong in particular where there is an Early Help Assessment in place and Team around the Family.

8.5 Group provision is delivered across the range of main, linked and outreach sites. There has been some building work/refurbishment in some areas during July to September 2016 however where possible this has been mitigated by delivering in other suitable sites. Moreover, where appropriate other community venues are utilised on a longer term basis.

9.0 Co-ordination of Early Help Assessments

9.1 On the 16th March 2016 the Early Start and Families Service became responsible for the borough wide coordination of early help assessments on behalf of agencies. This provided the service with the opportunity to streamline pathways to early help. There is now a single pathway to access early help through Family Centres and the provision of co-ordination of Early Help Assessments which are initiated by a range of agencies (see Appendix 1). Crucially this is set within a multi-agency context through the Early Help Steering Group for Children and Families and therefore both challenges and solutions are being developed collaboratively and agencies are constructively holding each other to account.

9.2 As part of the transfer of responsibility from Children's Social Care the Early Start and Families service has reviewed and updated the framework for co-ordination including:

- Tracking of early help assessments
- Performance management
- Workforce development
- Information, advice and guidance – web based including early help toolkit
- Communications and raising the profile
- Development of early help champions
- Strengthened arrangements with children's social care as part of continuous improvement
- Quality assurance through multiagency audit
- Increase in Early Help Assessment activity

10.0 Governance and Performance Management Arrangements - Borough Wide

10.1 The Stronger Communities Partnership has a number of steering groups reporting to it including the Early Help (Children and Families) Steering Group. This is a multi-agency group which reports to the Stronger Communities Partnership, Barnsley Children's Safeguarding Board and Trust Executive Group. Following an independent peer review in October 2015 the steering group has been tasked with developing and implementing an action plan to address the areas for improvement identified in the review report. The main areas of the action plan are identified above. A performance management framework is in place in order to drive improvements and ensure a positive impact on outcomes. This enables agencies to better align resources and fulfil their commitment to constructively hold each other to account.

11.0 Governance and Performance Management Arrangements – Locality

11.1 Locality governance continues to be provided by the statutory Family Centre Advisory Boards and

the service is reaching out to stakeholders that engage with families across the wider age range to become members of the boards. The Advisory Boards are aligned with Area Councils to ensure greater co-ordination across a range of priorities. Appropriate officers supporting Area Councils have been invited to attend their local Advisory Board. There is a requirement for Family Centres to ensure that the voice of children and families is heard and that they influence, support and provide challenge to their local Family Centre. A range of strategies are employed in order to secure this including attendance at Advisory Boards and sub groups including parent forums and one off provision based consultation. Family Centres are focusing efforts on expanding the membership of boards to include families with children across the age range. A local performance framework underpins borough wide priorities in order to ensure that Family Centres are firmly rooted in their communities. Knowing communities and their particular needs is vital in ensuring that services reflect and impact upon priority needs. Advisory Boards monitor performance at a local level and provide valuable support and challenge.

12.0 Family Support

12.1 Family Centres including the Targeted Youth Support service provides where appropriate one to one support to children, young people and families as part of a wider team around the family using the Early Help Assessment as part of the process. Through the early help pathway agencies can refer for extra support for children and young people across the expanded age range (see Appendix 1). Being able to engage families with children across age phases has provided the Opportunity for more holistic packages of support with no service imposed age boundary. Further developing the partnership with schools is a priority for the service and raising awareness of the Service offer and pathways has commenced. Progression will continue to be made in relation to the co-production and delivery of services. The core training matrix for Family Support Workers has been revised to ensure that staff are required to access appropriate training to enable them to better support families with older children.

13.0 Buildings

13.1 Group provision is delivered across the range of Family Centre main, linked and outreach sites, as well as in other community venues. There has been some building work/refurbishment in the following areas during July to September 2016 however where possible this has been mitigated by delivering in other suitable sites:

- Monk Bretton outreach site
- Stairfoot outreach site related to building work at Hunningly Primary School

13.2 On sites where there continues to be service delivery but these are no longer managed by a commissioned provider there were some initial issues relating to use during the summer school holidays however this has now been largely resolved. This included the following sites:

- Wilthorpe outreach site
- Royston outreach site
- Worsbrough Common linked site – issues relating to access to IT

13.3 In the Dodworth area it has been important to maintain access to services following the building closure at Gilroyd. Community venues have been utilised to deliver group provision including Dodworth Library, Keresforth Primary School and St John's Primary School. In addition families have access to one to one family support on site and in the home.

14.0 Implications for Local People and Service Users

14.1 Families are able to access services based on assessed need in the community in a Family Centre main, linked or outreach site or in a community venue and in the home where appropriate under the proposed model.

14.2 Families, children and young people continue to be able to have a voice and influence on service

priorities and the delivery model. Centres are statutorily required to establish governance arrangements through the provision of local Advisory Boards. In order to recognise the wider age range of Family Centres these have been extended to include relevant stakeholders whilst ensuring that families continue to be empowered to take an active part in the decision making process and shape local family services in their area.

14.3 Centre staff worked closely with the Families Information Services to provide a personalised service to ensure that any transition was smooth for children and the families where the council ceased to deliver childcare. The Council is committed to ensuring that all children have the best start in life and have access to high quality early education and care and currently the rate of good and outstanding provision in Barnsley is above the national average at 88%.

15.0 Financial Implications

15.1 The Early Start and Families service achieved the target savings of £2.5 million over a 2 year phased basis (2015/17) with the re-modelled service effective from 1 April 2016.

15.2 There are no direct financial implications arising from this report on the overview of the first 6 months of the new family centre service model.

16.0 Employee Implications

16.1 A reconfiguration of the size undertaken inevitably had a far reaching and deep impact on staff employed within the affected services. 262 members of staff were involved in the restructuring process. There were 22 compulsory redundancies as a result of the restructure which was a reduction on the forecast of 30 as at January 2015. In addition 23 members of staff took voluntary severance and 31 staff members resigned from their position during the consultation process.

16.2 The process of appointment to the new structure was developed with agreement from the Trade Unions. The approach agreed to for appointment was to ensure opportunities were open to staff irrespective of their current work-base and the proposed future delivery model. Whilst this provided equality of access it did lead to staff being appointed largely in new locations, forming new teams and often in new or re-shaped roles from the 1st April 2016. This led to staff working with and supporting new communities that they were unfamiliar with. Transitions were managed during this period however due to the large scale nature of the change this proved unsettling for staff and continuity of service delivery at the scale and pace prior to the change proved challenging. Wholesale relationship building continues to be the highest priority at all levels including with children and families, communities, stakeholders and within staff teams.

16.3 The service experienced some turnover in staffing, predominantly early years and childcare staff, during the first quarter of 2016 as staff began to experience their role in a new location and it is anticipated that there may be a further unsettled time within the service when the payment protection period ceases for eligible staff (31.03.2018).

16.4 As stated in Paragraphs 5.8 – 5.10 of the report the core training matrix for staff has been revised to take account of the wider age range of children supported along with multi-agency early help workforce development.

17.0 Communications Implications

17.1 Prior to and following the launch of the service on the 1st April 2016 a booklet was produced (see Appendix 1) and circulated widely to all stakeholders including access on the Council's website and Family Services Directory. This raised awareness of the service and the new streamlined pathway to early help through Family Centres. Posters were distributed in appropriate venues and a presentation was delivered to key stakeholders and across a range of agencies. Information was shared with the press and via social media. There were some misconceptions in a small number of communities relating to closure or a ceasing of services however the service worked hard to address this.

17.2 In relation to the wider work of the multi-agency Early Help (Children and Families) Steering Group a Communications Plan has been developed and is being implemented in order to promote early help including the development of a promotional short video.

18.0 Consultations

18.1 The Council completed a full statutory public consultation in relation to the proposed changes to the Children's Centre programme under Section 5D of the Childcare Act 2006.

19.0 Key Policy Considerations

19.1 There are no direct considerations as a result of this report.

20.0 Tackling Health Inequalities

20.1 The proposals actively address health inequalities through integrated early help services delivered in partnership with health.

21.0 Climate Change and Sustainable Energy Act (2006)

21.1 There are no direct implications as result of this report.

22.0 Consideration of Risks

22.1 There are no direct implications as a result of this report.

23.0 Health and Safety Implications

23.1 There are no direct implications as result of this report.

24.0 Compatibility with the European Convention on Human Rights

24.1 There are no direct implications as a result of this report.

25.0 Promoting Equality, Diversity and Inclusion

25.1 The mitigation identified in the equality impact assessment contained in the original KLOE report was implemented as outlined in the body of the report. Families were supported on a one to one basis where the Council ceased to deliver childcare and appropriate alternatives were secured by families. The Council must ensure that there is sufficient high quality childcare across the borough and it provides support to the private, voluntary and maintained sector to start up childcare businesses or expand in areas where there is not enough provision to meet demand. This supports the local economy whilst meeting statutory guidance that Council's should only provide childcare where the private and voluntary sector fails to do so.

25.2 The service monitored the impact of the proposal on a centre level basis and collectively across the borough. The service responded to individual impacts when required together with preventative mitigation. The service actively supports and promotes equality, diversity and inclusion.

26.0 Reduction of Crime and Disorder

26.1 The model supports families and communities through the provision of early help strengthening community cohesion.

27.0 Conservation of Biodiversity

27.1 There are no implications as a result of this report.

28.0 Glossary of Terms and Abbreviations

28.1 **Main and linked sites:** open during core hours (this may vary depending on the needs of the community) and service users will be able to access on a drop-in, adhoc basis during opening hours

Outreach sites and community venues: will operate groups and services on a planned and timetable basis. Families seeking information, advice and guidance and support outside these times will be able to access alternative main or linked Family Centre sites, telephone consultation or if appropriate their allocated Family Support Worker. The Families Information Service is also available to support and assist.

Future In Mind Transformation Plan: a transformation plan that will significantly improve the Emotional Well Being and Mental Health outcomes for the children and young people of Barnsley over the next 5 years and beyond.

29.0 List of Appendices

29.1 Appendix 1: Barnsley Family Centres – Early Help for Families Booklet

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Date: 28th September 2016

Financial Implications/
Consultation
*(to be signed by senior Financial Services officer
where no financial implications)*

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