

REPORT OF THE CABINET

The Cabinet met on 1 July 2014. Attendance:-

Councillor Glazier (Chair)

Councillors Bennett, Bentley, Elkin, Maynard, Simmons and Tidy

1. Council Monitoring – Quarter 4 2013/14

1.1 The Cabinet considered a report on performance against the Council Plan, Revenue Budget, Capital Programme, Savings Plan and Risks for the last quarter of 2013/14. Broad progress against the Council's four strategic priorities is summarised below and headline data is provided in the Corporate Summary at Appendix 1 of the report to the Cabinet, previously circulated to all Members. Strategic risks were reported at Appendix 2 and a detailed report for each department was provided in Appendices 3 – 7 of the report to the Cabinet.

1.2 We continue to make progress across all our priority areas. We were rated good by Ofsted for our Children's Social Care services, Looked After Children made good progress at school, and we halved the time taken for child care court proceedings. The Bexhill Hastings Link Road is 39% complete, our broadband programme is running ahead of schedule, and The Keep was officially opened. We jointly commissioned a Local Government Association peer challenge focusing on economic growth, and £3.8m grants were allocated to support local businesses, protect and create jobs. We supported 76.9% of Adult Social Care clients and carers through Self Directed Support, 28.2% received Direct Payments, and 2,044 older people were supported through 'STEPS to stay independent'. The condition of our principal roads has improved. Total reported crimes fell from 24,893 in 2012/13 to 23,193. Re-commissioning of public health services tranche 1 is now complete. We made £1m savings from the consolidation of back office support functions.

1.3 More detail of progress against each of our priority areas is set out in paragraphs 1.9 to 1.19 below. 70 performance targets are reported at year end: 53 (76%) were achieved and 17 (24%) were not achieved. 53 can be compared to previous years. Of these, 43 (81.1%) improved, three (5.7%) showed no change, and seven (13.2%) deteriorated.

1.4 At the end of the year the Council has a provisional underspend of £3.3m, an increase of £2.9m compared to quarter 3 after adjustment for the decision to reallocate £10m of forecast underspend to other priorities. The additional £2.9m underspend reflects a movement in service departments of £1.1m, further small underspends in Treasury Management (£0.205m) and central budgets (£0.461m) of £0.7m and additional general grant of £1m which had not been anticipated. The departmental service budgets were delivered broadly to target with some variation between departments as described in the Appendices. The provisional outturn, subject to external audit, is a significant achievement given the scale of savings that have been delivered. Of the £23m savings planned (net of £1m investments), £21m were made as planned and there were mitigating savings of £0.4m; a total of £21.4m of savings were delivered, £1.4m below target. Underspends make up the balance enabling the overall revenue budget target to be achieved. The new reserves policy and corporate approach to finance saw the allocation of £9m of reserves to support projects and transformation initiatives during

the year which pave the way for further savings in future years. The underspend has been transferred to the capital programme reserve to enable us to close the accounts and recognising the significant capital investment needs in the future. This action doesn't preclude alternative uses if other priorities become apparent during the Reconciling Policy, Performance and Resources (RPPR) process.

1.5 The Council's debt has risen to £17.51m as at 31 March 2014, due to a number of invoices worth £14m. The majority relates to invoices raised with Clinical Commissioning Groups (CCGs) during Q4 for re-enablement; these were outstanding at 31 March 2014, but a proportion has been paid during May 2014.

1.6 Significant work has been undertaken during the year, and is ongoing, to address the robustness of the Capital Programme and deliverability of the projects within identified timeframes. At the mid-year review, £50m was re-profiled out of 2013/14 into later years to better align with the timeframes for delivering those projects. In 2013/14, there was an underspend of £22m against the Capital Programme gross budget. £5m of this was due to the deferral of the Local Authority Mortgage Scheme, the rest was due to slippage for operational reasons that have arisen after the mid-year review was undertaken.

1.7 Reasons for the slippage include: the impact of the adverse weather on some construction projects (e.g. Bexhill Hastings Link Road, Capital Building Improvements); delays in acquiring revised planning permission due to retrospective re-engineering of projects (e.g. Mobile Replacement Programme); changes in the scope and outcomes from projects (e.g. Provision of Community Hub, Core Back Office Services); and delays in finalising projects due to external factors (e.g. Sovereign Harbour, Early Years provision for two year olds, Learning Disability Service Opportunities, Westfield Lane, Warwick House).

1.8 All Strategic Risks (Appendix 2 of the report to the Cabinet previously circulated to all Members) have been reviewed and 3 risks have been amended and 2 new ones added. Amended risks are Roads (Risk 1), Local Economic Growth (Risk 4) and Schools (Risk 5) which all have amended risk control measures, although their risk scores remain unchanged. Two new risks have been added to the Strategic Risk Register; they are Ordinary Residence (Risk 2, non-residents being transferred into East Sussex for Adult Social Care services) and Care Bill (Risk 3). Both new risks have been allocated a post mitigation score of 9, meaning they would be considered red risks under the RAG system.

Progress against Council Priorities

Driving economic growth

1.9 In Academic Year 2012/13 (results August 2013) 25% of LAC achieved five or more A*-C GCSEs including English and maths, an increase of 3.4% on 2011/12. 81% of LAC made two levels of progress between Key Stages (KS) 1 and 2 in reading, 4% above the national average; 69% made this progress in writing, 12% below the national average; and 75% made this progress in maths, 1% above the national average. We are improving writing skills by expanding the book club project to include all KS1 and year 7 pupils, and using the increase in Pupil Premium to expand our 1:1 home tuition programme. 46.7% of LAC made three levels of progress between KS 2 and 4 in English, 14.1% above the national average; and 36.7% made this progress in maths, 7.5% above the national average (Appendix 5 of the report to the Cabinet).

1.10 54% of children who have a Special Educational Need and are designated as School Action achieved three levels of progress between KS 2 and 4 in English, 1% above the national average but 6% below our target; and 44% achieved this progress in maths, 5% below the national average and 4% below our target. The Every Lesson Counts and Outstanding/improving teacher programmes will help improve outcomes for these children (Appendix 5 of the report to the Cabinet).

1.11 Significant progress continues to be made on the construction of the Bexhill Hastings Link Road; 39% of construction work is now complete and the road is still on schedule to open in May 2015. We are unable to progress with the Newhaven Port Access Road until the contractor has completed phase 1 and therefore our construction phase is unlikely to start before mid-2015. Broadband rollout is running eight weeks ahead of schedule and take up has continued to improve with an additional 6,262 registrations of demand for better broadband in 2013/14 alone which is more than triple the target for the year (Appendix 6 of the report to the Cabinet).

1.12 We have invested over £10m in principal (A) roads during 2013/14 which reduced the percentage of A roads requiring maintenance from 8% to 7% (target 8%). We have maintained the standard of non-principal (B/C) roads (9% requiring maintenance against a target of 9%) following investment of £6m in 2013/14. The percentage of unclassified roads requiring maintenance has increased from 20% to 25%, following the damage caused by the wettest winter on record; £10m of additional capital funding over the next two years will help stop this deterioration (Appendix 6 of the report to the Cabinet).

Keeping vulnerable people safe from harm

1.13 In a report published on 21 March 2014, Ofsted judged the Council to be good overall during their inspection of services (14 January – 5 February 2014). Adoption Services and permanence planning received an outstanding rating, and inspectors noted the positive impact of THRIVE. Areas for improvement include the experiences and progress of some young people leaving care (Appendix 5 of the report to the Cabinet).

1.14 There has been a rise in the number of Child Protection (CP) plans, which was identified as an area of concern by Ofsted. There were 58.6 children with a CP plan per 10,000 population in East Sussex in 2013/14, higher than our target of 49.7. We are analysing the data and reviewing the whole process from early help services to CP plan decision to find out why (Appendix 5 of the report to the Cabinet).

1.15 We have improved outcomes for LAC. There were 54.5 LAC per 10,000 population in East Sussex in 2013/14, an improvement on 2012/13 (57.2), but narrowly missing our target (53). We recruited 45 new adopters in 2013/14, 6 more than the previous year, and 51 children were placed for adoption (52 in 2012/13). We reduced the time taken to match prospective adopters with children from 556 days in 2009/12 to 539 days in 2010/13, well below the national average of 647 days (Appendix 5 of the report to the Cabinet).

Building resilience for individuals and families to live independently

1.16 We continue to target early help services towards the most vulnerable families, helping them to manage more independently. In 2013/14, we supported 6,232 children with our targeted early help services, compared to 5,169 in 2012/13. As part of the Troubled Families programme, family keyworkers supported 514 families, above our target of 436, providing support with, for example, parenting skills, domestic abuse, and mental health issues (Appendix 5 of the report to the Cabinet).

1.17 Good use continues to be made of the Memory Assessment Service for people with dementia, with 1,468 referrals received since April 2013 against a target of 1,000. An 8 week delay to the launch of the Memory Support Service resulted in the target of delivering 200 sessions being missed. 199 referrals were made but only 93 have been converted into course attendees. Progress will be monitored closely and the service is expected to meet its annual requirement of 300 sessions by November 2014 (Appendix 3 of the report to the Cabinet).

Making best use of our resources

1.18 We continue to work in partnership to make the best use of our resources: we entered into the South East Shared Services (SESS) partnership with Surrey County Council in April 2013 to bring together our transactional services; a vision and targets for SPACES were agreed; the potential benefit of our partnership working was recognised through the Government's Transformation Challenge Award – we received £750k for SESS and £420k for SPACES/The Link; we delivered over £1m of savings through our involvement with SE7; and the Bluewave communications partnership with Medway Council was officially launched in April 2014, leading to procurement savings for both authorities (Appendices 4 and 7 of the report to the Cabinet).

1.19 The Agile programme is progressing well. Two teams (Procurement and Trading Standards) have been identified as early adopters of Agile working to test the tools and implementation plans, and we have resolved the problems with Citrix that caused a pause in the rollout in Q3 (Appendix 4 of the report to the Cabinet).

2. Ashdown Forest Trust

2.1 The Cabinet considered a report by the Director of Communities Economy and Transport regarding the Ashdown Forest Trust's Income and Expenditure Account for 2013/14 and Balance sheets as at 31 March 2014. The Income and Expenditure Account shows an annual surplus in 2013/14 of £1593 compared with a projected surplus of £1768 reported to Cabinet on 28 January 2014.

2.2 The main source of income was the rent from the Royal Ashdown Forest Golf Club which is £70,000 per annum. A rent review is scheduled for 1 January 2015 and work on the review will commence in the second half of this year. Most of the expenditure relates to the £65,100 annual grant paid to the Conservators. In 2012/13 the Trust made an operating deficit of £30,996. This was due to one-off grants of £25,000 and £8,800 approved during 2012/13 to contribute to the purchase of a new tractor and consultancy advice regarding the development of the visitor centre. No one-off payments have been approved in 2013/14. The accumulated General Reserve totalled £175,581 at 31 March 2014.

2.3 A formal annual report and statement of accounts will be compiled in accordance with the Charity Commission's Statement of Recommended Practice. These accounts will be independently examined before being submitted to the Charity Commission by 31 January 2015.

3. Health and Wellbeing Strategy annual progress report

3.1 The first Health and Wellbeing Strategy (HWS) for East Sussex 2013-2016 was agreed by the East Sussex Health and Wellbeing Board in December 2012. The Strategy Action Plan was agreed in April 2013. The Strategy focuses on seven priorities where the Health and Wellbeing Board believe a more integrated and joined up approach will help to improve outcomes, reduce inequalities and deliver efficiency savings that could be re-invested in service improvements.

3.2 This is the first annual report for the Health and Wellbeing Board on progress made over the period October 2013 to March 2014 and towards delivering the Health and Wellbeing Strategy and Action Plan targets. Appendix 1 of the report to the Cabinet previously circulated to all Members set out a summary of performance and year end outturns against the Action Plan targets for 2013/14. Appendix 2 summarised key achievements, challenges and risks and provides detailed commentary on activity against the Strategy's actions, outputs and objectives in each of the seven priority areas. Data is included where available, along with a comment on the direction of travel toward achieving the end of year targets set out in the Strategy Action Plan.

Health and Wellbeing Strategy progress overview

3.3 There are 16 HWS targets. Six are on track or have been achieved, three are marked as carry over because year end data is not yet available and will be reported in the next biannual report, two outturns are to be confirmed, and five targets have been missed or are off track. Notable progress includes:

2.2 Reduce the number of young people entering the criminal justice system – target over achieved

3.2 Increase offer and uptake of NHS health checks – both parts of target exceeded

7.1.1 More people identified as approaching end of life are cared for and die in their usual place of residence – all CCG areas met or exceeded the target

3.4 The five targets missed/off track are:

2.1 Fewer children needing a Child Protection Plan

4.2 Reduce the number of older people admitted to hospital due to falls

5.2 Report improved outcomes for people with mental health conditions arising from NHS mental healthcare

6.1 Improve measurable outcomes for children and young people with SEND (Special Educational Needs and Disability)

7.2 Improve the experience of care for people at the end of their lives

3.5 The HWS is delivered by partners in the public and third sector and integrated working across health and social care services continues to develop with increased prevention and early intervention initiatives, and joint working across health, care and with wider partners. Healthwatch East Sussex (HWES) has been operational for over 12 months. This initial period has been spent establishing offices, building relationships with the public, stakeholders, general awareness raising and networking. It is anticipated that work in 2014/15 will focus more on activity, influence and delivery of Healthwatch functions. Details of Healthwatch activity can be found in the progress reports for the relevant priorities in Appendix 2 of the report to the Cabinet previously circulated to all Members.

Changes to action plan measures and targets

3.6 The governing body for the Health and Wellbeing Strategy, the Health and Wellbeing Board, will be asked to agree the following changes to strategy measures and targets, set out in paragraphs 3.7 to 3.10 below, when it meets on 29 July 2014.

3.7 Priority 2 Parenting, Outcome 2.1 Fewer children who need a Child Protection Plan: Subsequent to an update to the baseline and targets in December 2013, a further change is proposed to measure the number of child protection plans rather than the rate per 10,000 population (0-17 year olds) in line with Council Plan targets. The outturn for 2013/14 was 613 and the proposed targets are 2014/15 = 502; 2015/16 = 500.

3.8 Priority 2 Parenting, Outcome 2.2 Reduce the number of young people entering the criminal justice system. Confirmed data for the 2011/12 outturn is 399 first time entrants (FTE) per 100,000 population 0-17 years old. This means that the 10% reduction target is properly represented as 360 FTE and the provisional outturn of 238-293 exceeds the target. The reduction in FTE has been so great over the past few years and a realistic target is now to maintain the current historic low. It is proposed that targets are amended to remaining below 300 FTE for 2014/15 and 2015/16.

3.9 Priority 3 Healthy lifestyles, Outcome 3.1 Reduce rates of mortality from causes considered preventable. The methodology for this measure has changed nationally, in particular how age standardisation is calculated, but our targets are unaffected.

3.10 Priority 7 End of life care, Outcome 7.2 Improve the experience of care for people at the end of their lives. A decision has been taken by the East Sussex End of Life Care Programme Board to utilise findings from the National Council for Palliative Care National Bereavement Survey (Voices) rather than commission a localised survey. The implications of the Voices findings will be considered during 2014/15.

3.11 Good progress has been made towards delivering the Strategy and Action Plan against many priorities although there are challenges in meeting some targets. The next biannual progress report covering the period April to September 2014 is scheduled for the Health and Wellbeing Board in January 2015.

3.12 Health and social care partners are well aware of the wider challenge of delivering a clinically and financially sustainable health and social care system. The challenge includes a significant reduction in local government funding, budget deficits and constraints in the health economy, and the need to shift health investment from acute to community and primary care. The Council and Clinical Commissioning Groups are undertaking a fundamental review focused on the needs of the whole population, evidence of best practice and the totality of resources available across health and social care. This work is managed through a formal programme called East Sussex Better Together.

3.13 The Health and Wellbeing Strategy is due to be refreshed during 2015/16. It will be informed by the work of Better Together and draw on the latest data and reports from the Joint Strategic Needs Assessment (JSNA).