



## CHILDREN & LEARNING OVERVIEW & SCRUTINY SUB-COMMITTEE AGENDA

7.00 pm	Thursday 31 August 2017	Town Hall
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Members 9: Quorum 4

### **COUNCILLORS:**

Gillian Ford (Chairman)  
Meg Davis (Vice-Chair)  
John Glanville

Viddy Persaud  
Keith Roberts  
Carol Smith

Jody Ganly  
Ray Morgon  
Philippa Crowder

### **CO-OPTED MEMBERS:**

#### **Statutory Members representing the Churches**

Lynne Bennett, Church of  
England  
Jack How, Roman Catholic  
Church

#### **Statutory Members representing parent governors**

Julie Lamb, Special Schools

Non-voting members representing local teacher unions and professional associations:  
Keith Passingham (NASUWT), Ian Rusha (NUT) and Linda Beck (National Association of  
Headteachers)

**For information about the meeting please contact:  
Taiwo Adeoye  
[taiwo.adeoye@onesource.co.uk](mailto:taiwo.adeoye@onesource.co.uk)**

## **Protocol for members of the public wishing to report on meetings of the London Borough of Havering**

Members of the public are entitled to report on meetings of Council, Committees and Cabinet, except in circumstances where the public have been excluded as permitted by law.

Reporting means:-

- filming, photographing or making an audio recording of the proceedings of the meeting;
- using any other means for enabling persons not present to see or hear proceedings at a meeting as it takes place or later; or
- reporting or providing commentary on proceedings at a meeting, orally or in writing, so that the report or commentary is available as the meeting takes place or later if the person is not present.

Anyone present at a meeting as it takes place is not permitted to carry out an oral commentary or report. This is to prevent the business of the meeting being disrupted.

Anyone attending a meeting is asked to advise Democratic Services staff on 01708 433076 that they wish to report on the meeting and how they wish to do so. This is to enable employees to guide anyone choosing to report on proceedings to an appropriate place from which to be able to report effectively.

Members of the public are asked to remain seated throughout the meeting as standing up and walking around could distract from the business in hand.

### **What is Overview & Scrutiny?**

Each local authority is required by law to establish an overview and scrutiny function to support and scrutinise the Council's executive arrangements. Each overview and scrutiny sub-committee has its own remit as set out in the terms of reference but they each meet to consider issues of local importance.

The sub-committees have a number of key roles:

1. Providing a critical friend challenge to policy and decision makers.
2. Driving improvement in public services.
3. Holding key local partners to account.
4. Enabling the voice and concerns to the public.

The sub-committees consider issues by receiving information from, and questioning, Cabinet Members, officers and external partners to develop an understanding of proposals, policy and practices. They can then develop recommendations that they believe will improve performance, or as a response to public consultations. These are considered by the Overview and Scrutiny Board and if approved, submitted for a response to Council, Cabinet and other relevant bodies.

Sub-Committees will often establish Topic Groups to examine specific areas in much greater detail. These groups consist of a number of Members and the review period can last for anything from a few weeks to a year or more to allow the Members to comprehensively examine an issue through interviewing expert witnesses, conducting research or undertaking site visits. Once the topic group has finished its work it will send a report to the Sub-Committee that created it and will often suggest recommendations for the Overview and Scrutiny Board to pass to the Council's Executive.

## **Terms of Reference**

The areas scrutinised by the Committee are:

- Pupil and Student Services (including the Youth Service)
- Children's Social Services
- Safeguarding
- Adult Education
- Councillor Calls for Action
- Social Inclusion

## **AGENDA ITEMS**

### **1 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS**

(if any) - receive.

### **2 DISCLOSURE OF INTERESTS**

Members are invited to disclose any interests in any of the items on the agenda at this point of the meeting. Members may still declare an interest in an item at any time prior to the consideration of the matter.

### **3 CHAIRMAN'S ANNOUNCEMENTS**

The Chairman will announce details of the arrangements in case of fire or other events that might require the meeting room or building's evacuation.

### **4 MINUTES (Pages 1 - 12)**

To approve as a correct record the minutes of the meeting of the Committee held on 6 July 2017 and authorise the Chairman to sign them.

### **5 CORPORATE PERFORMANCE UPDATE - QUARTER ONE (Pages 13 - 28)**

### **6 ANNUAL REPORT - HEALTHWATCH HAVERING (Pages 29 - 64)**

### **7 POLICE VIEW ON CHILD PROTECTION (Pages 65 - 68)**

### **8 SCHOOL EXPANSION PROGRAMME (Pages 69 - 74)**

### **9 FUTURE EDUCATION SERVICES (Pages 75 - 78)**

### **10 URGENT BUSINESS**

To consider any other item in respect of which the Chairman is of the opinion, by reason of special circumstances which shall be specified in the minutes, that the item should be considered at the meeting as a matter of urgency.

**Andrew Beesley**  
**Head of Democratic Services**

**MINUTES OF A MEETING OF THE  
CHILDREN & LEARNING OVERVIEW & SCRUTINY SUB-COMMITTEE  
Committee Room 3A - Town Hall  
6 July 2017 (7.00 - 9.35 pm)**

**Present:** Councillors Gillian Ford (Chairman), Meg Davis (Vice-Chair), John Glanville, Viddy Persaud, Carol Smith and Jody Ganly

Co-opted Members: Julie Lamb

Church Representatives:

Lynne Bennett

Non-voting Member: Ian Rusha

The Chairman advised those present of action to be taken in the event of an emergency evacuation of the building becoming necessary

Apologies for absence were received from Councillors Keith Roberts, Ray Morgon, Philippa Crowder and co-opted member Jack How.

**29 MINUTES**

The minutes of the meeting held on 26 April 2017 were agreed as correct records and signed by the Chairman subject to noting that Councillor Carol Smith was present at the meeting.

**30 CORPORATE PERFORMANCE UPDATE - QUARTER FOUR**

The Sub-Committee were advised that 15 Corporate Performance Indicators fell under the remit of the Children & Learning Overview and Scrutiny Sub-Committee.

Nine related to the SAFE goal and six to the PROUD goal. Nine of the RAG indicators had a status of green and six a RAG status of Red or Amber.

Members noted that the position was consistent with the end of Quarter 3 update.

Members noted that the following areas that required improvements within the SAFE goal:

- The percentage of care proceedings completed within 26 weeks dropped for the second consecutive quarter during Quarter 4. To improve performance, there were a number of actions taking place including reviewing the legal tracking procedure; working with the Legal department to identify and respond to training needs; reviewing the supervision policy and developing accountability of social workers so that when targets were missed there was a framework in place to act swiftly to rectify this.
- The percentage of children becoming the subject of a Child Protection Plan for a second or subsequent time within 2 years had continued to rise as the year had progressed and was higher than at the same point last year. The Face to Face programme was providing practitioners with training to work with families in a systemic way and provide families with the tools to sustain their own progress.
- The percentage of looked after children (LAC) placements lasting at least two years was below target and both in the last quarter and last year. As part of the Department for Education Innovation Programme, the service was working to recruit specialist foster carers who would care for 11-17 year olds with complex and disrupting behaviour patterns. These foster carers would receive heightened support and training to respond to the increasingly complex needs of our looked after children.

The report detailed the following highlights within the PROUD goal:

- The percentage of young people leaving care who were in education, employment or training at ages 18 to 21 was above target and better than the annual outturn the previous year.
- At 3.3%, the proportion of 16 to 19 year olds who were not in education, employment or training (NEET) and not known fell compared to the outturn for 2015/16 as participation amongst young people in Havering continued to increase.
- The percentage of Early Years providers judged to be Good or Outstanding by Ofsted exceeded target and was better than the previous year.
- Apprenticeship numbers at ages 16 -18; had increased compared with the previous year, as a result of the close working between the local apprenticeship provider forum and the local school and colleges to promote the apprenticeship offer.

Members were informed that Cabinet had approved the new Corporate Plan for 2017/18 which included a list of new Corporate Performance Indicators. As many of these new Corporate PIs do not neatly fall into the remit of one of the Overview and Scrutiny Sub-Committees it had been agreed that, from Quarter 2 of 2017/18, performance against the Corporate Performance Indicators would only be reported to the Cabinet on a quarterly basis, with the reports being made available simultaneously to all Members of the Overview and Scrutiny Board and Sub-Committees.

The Chairs of the Overview and Scrutiny Sub-Committees would be able to request reports on performance against particular indicators as required and would also be able to commission more detailed analysis of areas within the remits of the sub-committee that may warrant further consideration.

Members noted that the new arrangements would be in place from Quarter 2 2017/18 onwards to account for the fact that the new Corporate Plan was not approved by Cabinet until May, and the Council's Service Plans for 2017/18 also do not go live until Quarter 2.

The Sub-Committee had been requested by the Overview and Scrutiny Board to identify three indicators that they would like reported on a quarterly basis relevant to the remit of the sub-committee.

The Sub-Committee concluded that that the sub-committee was a unique group looking at the front line service where all indicators were important and statutory.

The Sub-Committee agreed to have all indicators reported to the Board for them to decide what three indicators they would like reported.

## **31 REPORT ON FOSTERING**

The Sub-Committee received a report that provided an update on fostering arrangements in relation to developments, on-going performance and challenges in Havering pre and post the Ofsted inspection.

The report detailed the developments, on-going performance and challenges within the Fostering Service. Members noted that there had been significant work in maintaining foster carer recruitment, which had now expanded to include recruitment of specialist foster carers.

The report informed the Sub-Committee that the number of Looked After Children was increasing and the in-house foster carers were not able to accommodate the volume of children requiring placements. It had resulted in the use of Independent Fostering Agencies, with some children being placed outside of the Local Authority. The current arrangement was to match children in long term foster care arrangements in order to promote stability and consistency for children who were looked after. This has required commitment from the foster carers.

The Sub-Committee noted that the proposal was to sustain and build upon Foster carer recruitment and retention with the aim to support children with complex needs with specialist foster carers and build a system that can support challenging placements and provide value for money.

The report detailed the profile/inspection outcome of the service, it was noted that as at 27 June 2017, there were 257 children being looked after by the authority. 79 children being placed in-house compared to 85 placed with Independent Fostering Agency (IFA) placements; 33 within semi-independent and 26 within residential placements.

The Sub-committee was informed that between April 2016 and March 2017 the Fostering Service received 181 enquiries from members of the public interested in foster caring. From April 2017 to date 28 enquires were received.

The Service had recruited 15 carers for 2016/2017, three carers below the set target of 18. It was mentioned that this was impacted by delays with the Disclosure and Barring Service (DBS) checks. It took five to six months to fully recruit a foster carer and present to Panel for approval. Since March to 27 June 2017 there have been a further 11 fostering households approved, 7 approved for 0-18 and 4 for 0-12 years; 9 of these are available for sibling groups of at least 2.

The Service also monitored the reasons foster carers leave Havering as this also provided an indication of potential areas for attention/improvement. There have been a number of de-registrations in regard to quality standards. Over the year April 2016-17 seventeen foster carers have resigned with the following reasons:

- 2 shared carers (Short Breaks carer's children with disabilities living at home) for whom Direct Payments were now used.
- 3 Carers who have moved out of the area and transferred to their new local authority.
- 6 Carers who were not prepared to work to the Local Authority's standards and child centred approach.
- 5 retired/family circumstances
- 1 following an unsubstantiated allegation made by children previously placed.

The Sub-Committee noted that the innovation programme was being used to target specialist foster carers in recognition of the range of multiple and complex needs of some the children coming to care. This is explained as follows:



Face to Face Pathways; a programme of innovation lasting two years, to implement a new and different approach to respond to the issues facing young people in care aged 11-17 and those leaving care aged 14-24. The programme would require the Local Authority to develop, test and redesign provision to support care leavers and looked after children. The ambition was to be a regional centre of excellence for successful transitions to adulthood.

To support the enhanced Fostering offer; an additional remuneration category would need to be added for those Carers who were willing to offer placements to children with multiple complex emotional/behavioural difficulties.

The Sub-Committee noted the following action plan for the service:

- The Care Resources Service to continue to ensure fostering responded effectively to current challenges for children and the recruitment drive be further developed. The work would address Ofsted's recommendations and findings from practice week/auditing.
- To continue with the recruitment campaign to expand the number of in-house carers (with a particular focus upon over 11's) and ensure foster carers were committed to working to keep sibling groups together wherever possible. The campaign would be evaluated in autumn 2017.
- To strengthen in-house offer and build a proposal in relation to an enhanced fostering model based upon the existing/projected profile of service demand, by first quarter 2017/18.
- To explore a range of joint commissioning options which included fostering capacity within the East London sub-regional. Further information to be provided in quarter one of 2017/18.

The Sub-Committee noted the update report.

## **32 SERVICE IMPROVEMENT AND TRANSFORMATION**

The Sub-Committee noted a report that detailed the service approach to continuous service improvement. The report updated Members on progress to improve the delivery of social care.

Members noted that the service had several key objectives for the year, across the range of front-line services. These include;

- a. Improving the quality and effectiveness of social work interventions and improve the experience for families.
- b. Provide effective interventions at all levels of need ensuring effective primary and secondary prevention.

- c. Increase the stability and skills of the workforce to improve the quality of relationships with children and their families.
- d. Improve the response to demand to ensure that families are provided a timely and proportionate intervention and increase the reach of early help services.
- e. Consolidate learning to ensure we continue to provide effective and co-ordinated services for children at risk of child sexual exploitation.
- f. Ensure that feedback from children and their families is sought to improve the quality of interventions.
- g. In house and commissioned services demonstrate good value when outcomes and costs are benchmarked against other authorities.
- h. Continue to build on improvements to the quality of placements for children in care, improving timeliness of permanency and enhancing the outcomes for care leavers.
- i. Reduce the budget deficit by installing strict financial controls. Monitor and report on progress, whilst looking for further opportunities.
- j. Implement and track the first year of the Innovation Programme.
- k. Monitor against the thirteen recommendations made by Ofsted and report on progress to them, to the Department for Education and internal stakeholders.
- l. Ensure the workforce development and retention activity is in place to increase the number of permanent social workers.
- m. Develop and implement the Social Care Academy, providing a strong and competitive offer for social workers, with the aim of encouraging highly skilled and experienced practitioners to work for Havering.

The Sub-Committee was advised that the following range of activities were underway to deliver against the outlined objectives;

- A review of all placements had been carried out outlining the forward plan for these and determining the potential costs and savings that could be achieved by March 2019.
- A workforce development working group had been formed with clear terms of reference, to ensure we have a robust approach to recruitment and retention. The group had led to the development of the Social Care Academy.
- A financial recovery plan had been developed, which demonstrated what activity could lead to reducing the budget deficit and making efficiencies which included strict controls on expenditure.

- Social care workforce were undergoing Systemic Practice training in order to enhance practice and allowing for more meaningful and purposeful interventions to be delivered to children and young people.
- A work plan was being developed with the Joint Commissioning Unit, to enable better value for money on placements and other commissioning ventures.
- An approach to demand management was being considered, including greater detail on the projected increase in population and what impact that would have on resources.
- A more effective and regular supervision was now taking place to improve quality and timeliness of interventions.

The report outlined the following next steps by the service:

- To continue monitoring progress of the service plans, ensuring all risks and issues are managed. To evidence improvement and where relevant, report/escalate to the Transformation and Improvement Board.
- The service was looking to develop an approach to ensure that all future reporting needs go through a single point of contact and were managed through a joint panel with the corporate performance service.
- To develop a reporting calendar, so all services were clear when to expect Performance Indicators and other information.
- To review all Service plans in September in order to ensure they were all still current and meet the developing needs of the service.

The Sub-Committee noted the continuous service improvement report.

### **33 OFSTED IMPROVEMENT**

The Sub-Committee received an update report that outlined the service was meeting its statutory responsibilities and continuing to evidence improvement against Ofsted recommendations.

The Sub-Committee noted that the long-term ambition of the service was to achieve at least a 'Good' grading against all of the key areas Ofsted measure against the framework. It should be noted that the framework is expected to change in 18-24 months.

The report informed the Sub-Committee that further to the submission of the formal response to the Ofsted's recommendations the service was

committed to making changes in the short and long term, to raise social work standards.

The report detailed that Social Care Service was successful in receiving Innovation funding from the Department for Education. The investment would be distributed across the social care system but predominately across Fostering and Leaving Care. The investment would enable the service to innovate in these areas and enhance the offer available, which would be tracked and monitored as part of the Ofsted improvement programme.

The Sub-Committee noted that the service was working through the 13 Ofsted recommendations. Each recommendation had a defined set of management actions which were owned by specific senior officers within the Directorate. The management actions each have a timescale, a set of specific measures, key performance indicators and outcomes which benefit children, young people and families.

The report indicated that the Leaving Care strand had developed a dedicated action plan which was directly linked to the overall plan. This was as a result of the grading received in the area, and the need for the service to fully understand the issues, mitigate risk and plan for significant service improvement. It would also help identify and plan for the dependencies with the Innovation programme.

The Sub-Committee received the following update on the monitoring progress:

1. Children's Services had a Transformation and Improvement Board, which was responsible for overseeing change initiatives and service improvement. It would also be the governance mechanism where all progress, monitoring and decisions take place for all Ofsted improvement actions. The Director of Children's Services (DCS) was the Senior Responsible Officer, supported by the Assistant Director for Social Care and other key senior managers within Children's Services.
2. Progress against the Ofsted Action Plan would be monitored every month, with a report available describing trends, ongoing activity within the service and the impact the activity was having.
3. As of June 2017, a set of Key Performance Indicators (KPIs) had been agreed by the Board. Baselines and targets have been agreed, where applicable. A first draft report had been presented to senior officers and feedback had been gathered to ensure the report meets the ongoing needs of the service.
4. Early measures show considerable improvement in a number of areas, including;
  - A reduction in the number of Child in Need plans.
  - A reduction in the number of Child Protection Plans.

- An increase in the number of social workers taking up permanent positions.
- An ongoing improvement in the timeliness of interventions in Early Help.
- Improved performance in the MASH
- More direct contact with Care Leavers
- Improved rate of Return Home Interviews completed within 72 hours
- Increase in allocation of independent visitors

It was also stated that as the Service reviews its delivery and strengthens the delivery of social care, the expectation was to achieve improvement across a number of measures. The Service had also taken measures to reshape the structures of delivery services in order to ensure there was capacity and the appropriate roles to deliver sustained improvements.

The Sub-Committee noted the following next steps by the Service:

1. The delivery of a new business intelligence solution, Power BI from Microsoft, would enable the service to receive data in differing formats and enhance how the Ofsted indicators would be monitored. It would also allow for easier retrieval of reports, resulting in being able to manage areas of risk more closely. The service was proposed to start from August 2017.
2. The Service would continue to monitor the performance of all Ofsted key indicators, against the Ofsted Acton Plan, managing risk and issue and ensuring all milestones and deliverables were agreed and managed.
3. To continue to work with the Safeguarding Board and responding to their challenge and ensuring alignment in activity that was shared or had an overlap.
5. To prepare for the next Ofsted quarterly meeting, expected in autumn 2017.
6. To begin to plan for the new inspection framework being developed by Ofsted.

In response to an enquiry on the current progress, the Assistant Director of Children's Services stated that the service was in a better place and position but there was still a significant journey ahead.

The Sub-Committee noted the improvement the Ofsted improvement and monitor progress update report.

## **34 HAVERING SCHOOL IMPROVEMENT**

The Sub-Committee received a report that detailed the service vision to ensure a good start for every child to reach their full potential and our ambition to establish a self-improving education system.

The report updated members of the sub-committee on the progress to improve standards of teaching, learning and leadership across Havering's schools.

The report indicated that following the published performance measures, it was agreed that a school-led improvement strategy was required to address the shortcomings highlighted by Ofsted data and the Her Majesty's Chief Inspector of Schools (HMCI) annual report.

Further to the previous update to the Sub-Committee, the following steps have been taken:

- An independently-chaired Improvement Board was established to oversee an agreed improvement strategy and had met regularly. The Board had met termly to monitor the progress and impact of the improvement strategy, holding schools' leaders to account for improvement.
- The key indicator of the success of the improvement strategy would be that all schools be judged to be good or better by Ofsted by July 2018, subject to each school's place in Ofsted's calendar of inspections.
- As a measure of the joint commitment to the rapid school improvement required, in April 2017 a budget of £100,000 was allocated to support the work of the improvement strategy: £50,000 from Havering Local Authority and £50,000 from contributions from secondary schools through the Havering Learning Partnership (HLP - the association of secondary schools).
- The Regional Schools Commissioner had increased the number of monitoring visits to Havering's secondary schools, remarking on the positive approach the local head teachers group, governors and the local authority have taken in rising to the challenge to improve pupil outcomes.
- Additional funding of £1.2m had been sought from the Department for Education (DfE) Strategic School Improvement fund. The fund was to help schools use their resources most effectively in order to deliver more good school places.

The Sub-Committee noted the following next steps by the service:

- That the service continues to monitor the performance of all schools on a regular basis with a refreshed approach to bringing about necessary improvements. This includes forensic evaluation of progress through monthly performance review meetings in those schools identified as being under-performing and a greater use of the powers available to the authority where schools are a cause for concern. To date, there had been no change in the secondary sector to the baseline percentage of schools Good or better. The only two inspections that have taken place since January 2017 resulted in the same Ofsted grading.
- The independently-chaired Improvement Board continues to meet the school-led governance body which monitors the agreed improvement strategy.
- A decision was been awaited on the five bids submitted to DfE, the outcome was expected in August to deploy funds from September.
- It was stated that individual secondary schools would learn of the pupils' outcomes in late-August 2017. How local schools compare, such as against the Progress 8 measure, would not be known until later in 2017. This is because the measure is a relatively new one and Havering's outcomes (and the success of the improvement strategy) will be dependent on outcomes of all pupils across London and England. We anticipate the HMI annual report, with data comparing local areas, to be published in December 2017.

The Sub-Committee noted the improvement update report on the schools-led strategy.

## **35 ANNUAL REPORT OF THE SUB-COMMITTEE**

The Sub-Committee agreed its annual report 2016-17 and further agreed that the report be referred to full Council.

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**Chairman**

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## CHILDREN AND LEARNING OVERVIEW AND SCRUTINY SUB-COMMITTEE, 31 AUGUST 2017

<b>Subject Heading:</b>	Quarter 1 Performance Report
<b>SLT Lead:</b>	Sarah Homer, Interim Chief Operating Officer
<b>Report Author and contact details:</b>	Thomas Goldrick, Policy and Performance Officer, 01708 434770, <a href="mailto:thomas.goldrick@havering.gov.uk">thomas.goldrick@havering.gov.uk</a>
<b>Policy context:</b>	The report sets out Quarter 1 performance information requested by the Children and Learning Overview and Scrutiny Sub-Committee
<b>Financial summary:</b>	There are no immediate financial implications. Adverse performance for some Corporate Performance Indicators may have financial implications for the Council. Whilst it is expected that targets will be delivered within existing resources, officers regularly review the level and prioritisation of resources required to achieve the targets agreed by Cabinet at the start of the year.

### The subject matter of this report deals with the following Council Objectives

Communities making Havering	[X]
Places making Havering	[]
Opportunities making Havering	[X]
Connections making Havering	[]

## SUMMARY

This report supplements the presentation attached as **Appendix 1**, which sets out the Council's performance within the remit of the Children and Learning Overview and Scrutiny Sub-Committee for Quarter 1 (April 2017- June 2017).

## RECOMMENDATIONS

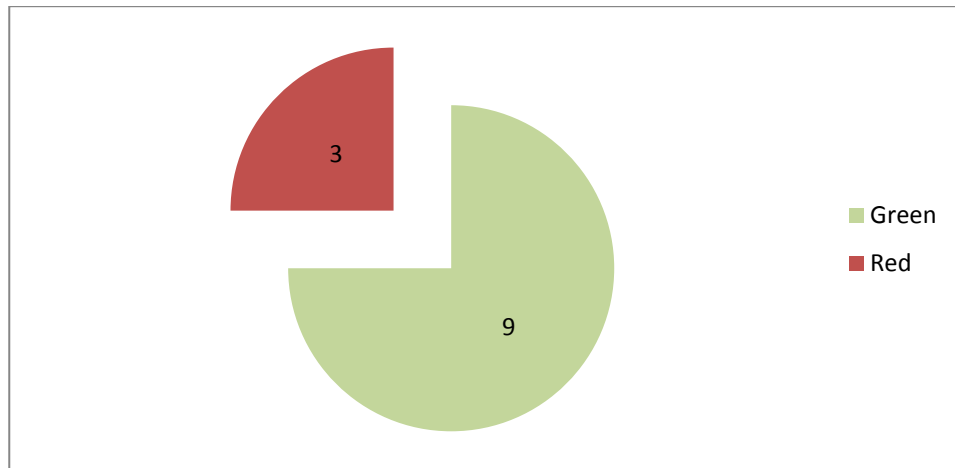
That the Children and Learning Overview and Scrutiny Sub-Committee notes the contents of the report and presentation and makes any recommendations as appropriate.

## REPORT DETAIL

1. The report and attached presentation provide an overview of the Council's performance against the performance indicators selected for scrutiny by the Children and Learning Overview and Scrutiny Sub-Committee. The presentation highlights areas of strong performance and potential areas for improvement.
2. The report and presentation identify where the Council is performing well (**Green**) and not so well (**Red**). The ratings for the 2017/18 reports are as follows:
  - **Red** = off the quarterly target
  - **Green** = on or better than quarterly target
3. Where performance is off the quarterly target and the rating is '**Red**', 'improvements required' are noted in the presentation. This highlights what action the Council will take to address poor performance.
4. Also included in the presentation are Direction of Travel (DoT) columns, which compare:
  - Short-term performance – with the previous quarter (Quarter 4 2017/18)
  - Long-term performance – with the same time the previous year (Quarter 1 2016/17)
5. A green arrow (↑) means performance is better and a red arrow (↓) means performance is worse. An amber arrow (→) means that performance has remained the same.

6. In total, 16 Performance Indicators have been included in the Quarter 1 2017/18 report and presentation. Performance data for Quarter 1 is available for 12 of the 16 indicators.

### **Quarter 1 Ratings Summary**



### **IMPLICATIONS AND RISKS**

#### **Financial implications and risks:**

There are no financial implications arising directly from this report which is for information only.

Adverse performance for some Performance Indicators may have financial implications for the Council. Whilst it is expected that targets will be delivered within existing resources, officers regularly review the level and prioritisation of resources required to achieve the targets agreed by Cabinet at the start of the year.

Robust ongoing monitoring is undertaken as part of the established financial and service management processes. Should it not be possible to deliver targets within approved budgets this will be raised through the appropriate channels as required.

Sam Gable, Strategic Finance Business Partner.

#### **Legal implications and risks:**

Whilst reporting on performance is not a statutory requirement, it is considered best practice to review the Council's progress regularly.

#### **Human Resources implications and risks:**

There are no HR implications or risks arising directly from this report.

**Equalities implications and risks:**

There are no equalities or social inclusion implications or risks identified at present.

**BACKGROUND PAPERS**

Appendix 1: Quarter 1 Children and Learning Performance Presentation 2017/18



# Havering

LONDON BOROUGH



# **Quarter 1 Performance Report 2017/18**

## **Children and Learning O&S Committee**

**31<sup>st</sup> August 2017**

## About the Children and Learning O&S Committee Performance Report

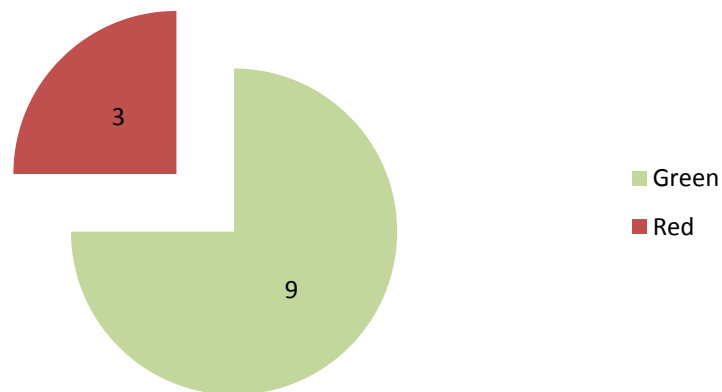
- Overview of the key performance indicators as selected by Children and Learning Overview and Scrutiny sub-committee
- The report identifies where the Council is performing well (**Green**) and not so well (**Red**).
- Where the RAG rating is '**Red**', '**Corrective Action**' is included. This highlights what action the Council will take to address poor performance.



## OVERVIEW OF CHILDREN AND LEARNING INDICATORS

- 16 Performance Indicators are reported to the Children and Learning Overview and Scrutiny Sub-Committee.
- Performance data is available in Quarter 1 for 12 of the 16 indicators.

Quarter 1 Summary



In summary of the 12 indicators:

**3 (25%)** have a status of **Green**

**9 (75%)** have a status of **Red**



## Quarter 1 Performance

Indicator and Description	Value	2017/18 Annual Target	2017/18 Q1 Target	2017/18 Q1 Performance	Short Term DOT against Annual 2016/17 (Q4)		Long Term DOT against Q1 2016/17	
No. of early years education offers extended to disadvantaged 2 year olds	Bigger is better	841	841	N/A	-	N/A	-	N/A
% of young people leaving care who are in education, employment or training at ages 18 -21	Bigger is better	80%	80%	60.9% RED	↓	67.2%	↓	62.3%
% of children who wait less than 14 months between entering care and moving in with their adopting family	Bigger is better	75%	75%	60% RED	↑	47%	↑	44%
Total no. of in-house foster carers	Bigger is better	90	90	78 RED	↑	77	↓	81
% of looked after children who ceased to be LAC as a result of permanency (adoption and special guardianship)	Bigger is better	16%	16%	14.8% RED	↑	14.7%	↑	16.6%

## Quarter 1 Performance

Indicator and Description	Value	2017/18 Annual Target	2017/18 Q1 Target	2017/18 Q1 Performance		Short Term DOT against Annual 2016/17 (Q4)		Long Term DOT against Q1 2016/17
% of looked after children who leave care at 18 and remain living with their foster carers ("Staying Put")	Bigger is better	70%	70%	0% RED	↓	66.7%	→	0%
% of looked after children placed in LBH foster care	Bigger is better	50%	50%	39.6% RED	↑	38.7%	↓	41.6%
% of looked after children placements lasting at least 2 years	Bigger is better	70%	70%	56.1% RED	↓	59.4%	↓	63.0%
% of children becoming the subject of a Child Protection Plan for a second or subsequent time within 2 years	Smaller is better	10%	10%	15.9% RED	↓	14.5%	→	15.9%
% of Early Years providers judged Good or Outstanding by Ofsted	Bigger is better	80%	80%	93% GREEN	→	93%	↑	89%

## Quarter 1 Performance

Indicator and Description	Value	2017/18 Annual Target	2017/18 Q1 Target	2017/18 Q1 Performance		Short Term DOT against Annual 2016/17 (Q4)	Long Term DOT against Q1 2016/17	
% of schools judged to be Good or Outstanding	Bigger is better	80%	80%	84% GREEN	→	84%	↑	76%
No. of apprentices (aged 16-18) recruited in the borough	Bigger is better	770	308	N/A	-	770 (AY 15-16)	-	N/A
No. of new in-house foster carers	Bigger is better	20	5	6 GREEN	↓	12	↑	0
% of 16 to 19 year olds (school years 12 – 14) who are not in education, employment or training (NEET) and not known	Smaller is better	4.3% Biannually (Q2 and Q4)	4.3% Biannually (Q2 and Q4)	N/A	-	3.3%	-	N/A
No. of apprentices (aged 19+) recruited in the borough	Bigger is better	1330	N/A	N/A	-	NEW	-	NEW

## Quarter 1 Performance

Indicator and Description	Value	2017/18 Annual Target	2017/18 Q1 Target	2017/18 Q1 Performance	Short Term DOT against Annual 2016/17 (Q4)		Long Term DOT against Q1 2016/17	
% of care proceedings completed in under 26 weeks	Bigger is better	80%	80%	33.3% RED	↓	48.9%	-	N/A

## Highlights

- ‘% of Early Years providers judged Good or Outstanding by Ofsted’ remains above target. Havering had 9 inspections in the last quarter. 6 were of new Private, Voluntary and Independent (PVI) sector providers, 5 of which were judged Good or Better.
- ‘Number of new in-house foster carers’ is better than target. So far this period, there have been 6 new in-house foster carers recruited which bodes well for reaching the full year target of 20 and should increase the total number of in-house foster carers going forward. The innovation programme will officially launch in Q2 so performance should improve still further in Q3 and Q4.

## Improvements Required

- ‘% of young people leaving care who are in education, employment or training at ages 18 – 21’ is below target and worse than the previous quarter and the same time last year. Additional staff are being recruited specifically to help young people and care leavers plan their transitions to adulthood, including their education / employment route. A number of care leavers are due to take up FE and university places in September.
- ‘% of looked after children who ceased to be LAC as a result of permanency (adoption and special guardianship)’ is below target. The Families Together Team is expanding its remit to provide support to families and young people where an SGO is the permanency plan. As well as this, greater expectation is being given to the use of Family Group Conferencing to explore family options as early as possible.
- ‘% of looked after children placed in LBH foster care’ is below target. This KPI is based on the total of in house and family & friend placements. By reforming the in-house offer it is expected to see an increase in performance throughout the year.

- ‘% of children becoming the subject of a Child Protection Plan for a second or subsequent time within 2 years’ is above target (where smaller is better) and higher than last quarter. The DCS has commissioned a review of child protection activity and processes within the service, along with the development of an action plan for improvement, to be completed over the summer.
- ‘% of care proceedings completed in under 26 weeks’ is significantly below target. During June, two children’s cases completed, neither of which were concluded within the target timescale. This has reduced year to date performance to 33.3% against a target of 80%.

# Any questions?





## CHILDREN & LEARNING OVERVIEW AND SCRUTINY SUB-COMMITTEE 31 AUGUST 2017

<b>Subject Heading:</b>	Healthwatch Havering – Annual Report
<b>CMT Lead:</b>	Barbara Nicholls
<b>Report Author and contact details:</b>	Ian Buckmaster, Director, Healthwatch Havering 01708 303300 ian.buckmaster@healthwatchhavering.co.uk
<b>Policy context:</b>	The information presented summarises the work undertaken by Healthwatch Havering in 2016/17.
<b>Financial summary:</b>	No financial implications of the report itself for either the Council or Healthwatch Havering.

### The subject matter of this report deals with the following Council Objectives

Communities making Havering	<input checked="" type="checkbox"/>
Places making Havering	<input type="checkbox"/>
Opportunities making Havering	<input type="checkbox"/>
Connections making Havering	<input type="checkbox"/>

### SUMMARY

The attached annual report of Healthwatch Havering details the work carried out by the organisation in the 2016/17 reporting year.

## RECOMMENDATIONS

1. That the Sub-Committee considers the attached Healthwatch Havering annual report and takes any action it considers appropriate.

## REPORT DETAIL

Officers will present and summarise the main features of the attached Healthwatch Havering annual report.

## IMPLICATIONS AND RISKS

**Financial implications and risks:** None of this covering report.

**Legal implications and risks:** None of this covering report.

**Human Resources implications and risks:** None of this covering report.

**Equalities implications and risks:** None of this covering report.

## BACKGROUND PAPERS

None.

# ANNUAL REPORT, 2016/17

Still making a difference...

*Presented in accordance with  
“The Matters to be Addressed in Local Healthwatch  
Annual Reports Directions, 2013”*

## **What is Healthwatch Havering?**

Healthwatch Havering is the local consumer champion for both health and social care. Our aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally.

We are an independent organization, established by the Health and Social Care Act 2012, and can employ our own staff and involve lay people/volunteers so that we can become the influential and effective voice of the public.

Healthwatch Havering is a Company Limited by Guarantee, managed by three part-time directors, including the Chairman and the Company Secretary, supported by two part-time staff and several volunteers, both health and social care professionals and people who have an interest in health or social care issues.

## **Why is this important to you and your family and friends?**

Following the public inquiry into the failings at Mid-Staffordshire Hospital, the Francis report reinforces the importance of the voices of patients and their relatives within the health and social care system.

Healthwatch England is the national organization which enables the collective views of the people who use NHS and social services to influence national policy, advice and guidance.

Healthwatch Havering is your local organization, enabling you on behalf of yourself, your family and your friends to ensure views and concerns about the local health and social services are understood.

Your contribution will be vital in helping to build a picture of where services are doing well and where they need to be improved. This will help and support the Clinical Commissioning Groups and the Local Authority to make sure their services really are designed to meet citizens' needs.

**'You make a living by what you get,  
but you make a life by what you give.'**

**Winston Churchill**

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We will be sending copies of this Annual Report to the statutory recipients (including the British Library) and circulating it to local health and social care organisations. In the interests of the environment and economy, we are not producing printed copies this year but the report is available for downloading from our website [www.healthwatchhaverling.co.uk](http://www.healthwatchhaverling.co.uk) and a hardcopy can be supplied on request.

The electronic version of this report contains hyperlinks to the relevant sections and to external URLs. Healthwatch Havering is not responsible for the content of external websites.



## Foreword

*Anne-Marie Dean, Chairman of Healthwatch Havering*

Welcome to our fourth report. This has been a busy and interesting year. There are national initiatives that are beginning to develop into local plans, with the London Borough of Havering (LBH) and the Clinical Commissioning Group (CCG) designing more integrated and accessible care, patient groups becoming more involved in shaping their local GP and other services and timely progress on the work across the borough to improve services for people with learning disabilities. Some of our highlights are:

- ✓ The excellent work undertaken by our volunteer members has continued unabated with more Enter and View visits to Residential and Care homes, Barking, Havering and Redbridge University Hospitals Trust, North East London Foundation Trust and, this year, with a focus on developing our knowledge and expertise about GP premises.

- ✓ The joint review between Healthwatch Havering and Havering Council's Health Overview and Scrutiny Committee regarding the very significant delays in the referrals to treatment. The report is expected to be published at the end of June.
- ✓ Partnership working across the borough with CCG sub-groups, Accident & Emergency Board, Locality Design Planning group, Care Point, Patient Reference Groups, Havering Over Fifty Forum (HOFF), Havering Volunteer Centre, Positive Parents, and other organisations and individuals committed to improving services for people living with Dementia, Learning Disabilities, Sight Problems or nearing the End of Life.
- ✓ Our purpose is to help to ensure that these groups develop and embrace the need to involve the people of Havering, carers and patients in the design, delivery and assessment of care as a natural part of the way we all work together.

We would like to thank you for finding the time to read this report, and our volunteers, residents and colleagues for their hard work



## THIS YEAR AT A GLANCE

### ENTER AND VIEW

**Question:** So why do we think Enter and View visits are so important?

Answer: These visits provide a unique perspective on the provision of care and services in the borough and shared openly with our residents. Havering has one of the largest numbers of care homes in London, an acute hospital trust that is just emerging from “special measures” and nearly 50% of the GP practices have been rated as Inadequate or Requiring Improvement (with several now in “special measures”). By carrying out Enter and View visits, we can assess what these facilities are like and by chatting with staff, service users and their friends and relatives, we can find out – and report – what they think of them.

#### ✓ Nursing and Care Homes

The residents of our Nursing and Care homes are an important part of our society in Havering. Many residents have the benefit of regular family and friends to visit them, but some may not, for many reasons. So we take pro-active measures to visit homes and assess the environment and care these people receive. We carried out:

Enter and View visits to Nursing and Care Homes

14



Follow up visits to Care Homes to see how they have fared since our most recent visit

4

### ✓ Hospital Services

We undertook 2 visits to Queen's Hospital. This included a series of semi-announced visits undertaken to the wards at meal times.

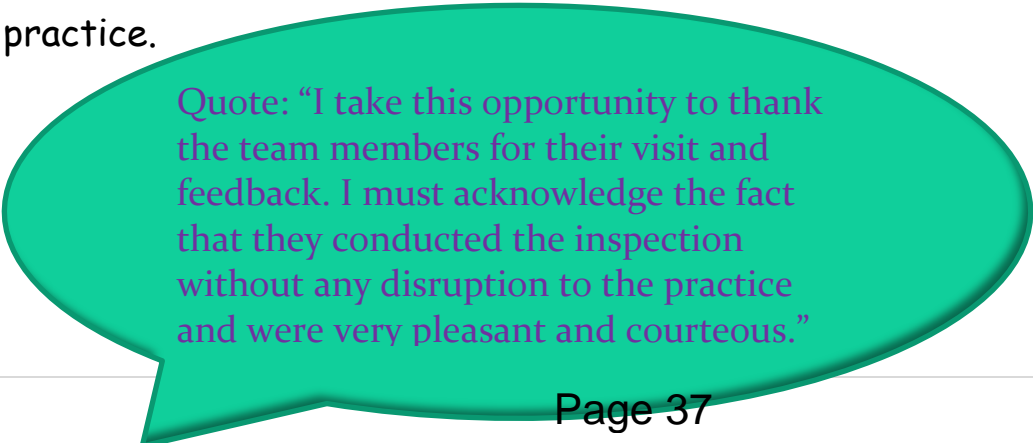
### ✓ Mental Health and Community Services

We undertook 3 visits: to the Community Rehabilitation wards at King George Hospital, Goodmayes; to the Mental Health Street Triage Scheme at Goodmayes Hospital; and to the Long-Term Conditions Centre at Harold Wood.

### ✓ GP Practices

We undertook 17 visits across the borough. This year the CQC completed its inspection of almost all GP practices in the borough. While some practices have been rated 'Good', too many practices have been rated Inadequate or Requires Improvement and a few have been placed in "special measures". We visited a range of practices to learn about the state of general practice in the borough.

Among the issues we raise during these visits is the relationship between the practice and its Patient Participation Group and how best use is made of the strength of input these volunteers have to the work of every practice.



Quote: "I take this opportunity to thank the team members for their visit and feedback. I must acknowledge the fact that they conducted the inspection without any disruption to the practice and were very pleasant and courteous."

✓ Other health and social care facilities

We also visited:

- ◆ Two pharmacies (associated with GP practices)
- ◆ A private Day Care facility for people with learning disabilities
- ◆ A drug and alcohol advisory service
- ◆ A dental practice



The reports of all of our visits are available on our website

[www.healthwatchhaverling.co.uk/enter-and-view-visits](http://www.healthwatchhaverling.co.uk/enter-and-view-visits)



## WORKING IN PARTNERSHIP



### CCG and BHRUT - working on urgent and emergency care

This year has seen us working with the Clinical Commissioning Sub-Groups and the Accident and Emergency Board, addressing issues such as the high attendances at the Queen's Hospital A & E (Emergency) Department, exploring a wider role for NHS 111 and working with the London Ambulance Service to design new pathways.

We also regularly attended the BHRUT Assurance and Surveillance Group, overseeing the transition of BHRUT and its hospitals from special measures.



## Havering Health and Wellbeing Board

We take our statutory membership of Havering's Health and Wellbeing Board very seriously and our Chairman, Anne-Marie Dean, has been assiduous in attending its meetings.

Highlights from the board include Local Children's Safeguarding and Adult Safeguarding, the Dementia Strategy, the development of Integrated Care Pathway boundaries matching those of the Primary Care Networks to support better locality planning, the development of the East London Health Care Partnership which is being launched on 3<sup>rd</sup> July with the Partnership Community Groups launching on 4<sup>th</sup> July. The importance of attracting staff and providing an environment which is stimulating and supportive to staff, this included discussion about an Academy for staff and the importance of providing more key worker housing such as the opportunity which the St. Georges hospital site could offer.



## Havering Locality Development Planning Group - a partnership with LBH and CCG

This newly formed group is part of the wider work being undertaken by the Accountable Care System/Integrated Care Partnership board as a

contribution to the development of the East London Health and Care Partnership <sup>1</sup>. This group is working to achieve a better integration of services in the primary, community and social care teams and a service that is most response and accessible. The group is at an embryonic stage of development as they begin to tackle how to innovate and design sustainable solutions for integrated health and social care services across North East London.

We have continued working with the CCG and other stakeholders on the future development of the former St George's Hospital site in Hornchurch.



### Voluntary Organisations and Patient Forums

Our team has also been working with a range of local organisations such as Care Point, Patient Experience Reference Forums, the Havering Over Fifties Forum (HOFF) and Havering Volunteer Centre aimed at improving the standard and range of health and social care services across the borough from a patient and carer perspective.

All of these organisations, together with ourselves, have the key aim of ensuring that we all use our best assets, experience and wisdom and involve our communities to ensure that we have a health and social care service which is safe, dependable and sustainable for the long-term future.

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<sup>1</sup> The East London Health and Care Partnership is taking forward the Sustainability and Transformation Plan (STP) for the North East London "footprint"



## Learning Disabilities

We continue to work with some outstanding families, friends and organisations as we work together to improve the facilities and services from people with learning disabilities across the borough. Through listening to the experiences of individuals and families, we have shared these experiences with the CCG.

The CCG are supporting an initiative that will ensure that all GP practices in Havering are provided with access to a Toolkit for GPs - A Step by Step Guide for GP Practices for people with Learning disabilities [www.rcgp.org.uk/learningdisabilities](http://www.rcgp.org.uk/learningdisabilities)

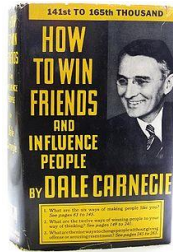


## Working with our Healthwatch colleagues

With our Healthwatch colleagues from Barking & Dagenham and Redbridge, we meet regularly with our CCG and BHRUT colleagues, enabling us to be fully informed of key issues in primary care.

This year we have worked together on a bid won by Healthwatch Barking & Dagenham to deliver training sessions to key 'front of house' health service teams who work directly with patients and carers

Across North East London the Healthwatches are working together to design information and consultation sessions that support the work of the STP and the East London Health and Care Partnership.



### Influencing others

Our relationship with the range of partners that we work with gives us the opportunity to influence their thinking and their operational activity.

For example, after our attention was drawn to an unpleasant odour permeating parts of Queen's Hospital, we were able to ensure that the hospital's management team looked into the matter and took action to get rid of the odour.

Quote: "What an excellent result, which is down to your persistence in pursuing this matter. I doubt I would have had such a successful outcome without your input. So I'm sure I speak on behalf of all the staff and patients who have and still do attend these clinics, a very big thank you from us all, especially me."



## REPORTS AND CONSULTATIONS



### The Delayed Referrals to Treatment report

We formed a Joint Topic Group with Havering Council's Health Overview and Scrutiny committee. Its purpose was to give Healthwatch volunteer members and Councillors the opportunity to explore the issues regarding the very significant delays in the care of the patients at Queens Hospital and King George Hospital.

Using the values of the NHS - Accountability, Probity and Openness - a total of 9 Volunteer Members and 7 Councillors met with, in all, 10 representatives from BHRUT, the BHR CCGs, NELFT and the NHS Improvement Authority.

The problem had begun in December 2013 when the Trust migrated data from one computer database to another, which exposed a discrepancy: up to 93,000 referrals from GPs for treatment had somehow been missed. The size of tackling this discrepancy had been daunting. A total of 9,000 extra appointments would be needed, a further 20,000 to cope with the additional demand on the Trust's services, 760 operations would reduce the backlog, with a further 800 needed to cope with the additional demand. The trust had the most long-waiting patients in the country, with around 850 patients waiting more than 52 weeks for treatment. By the end of March 2017, local GPs had redirected a total of 26,000



patients into alternative services, helping ease pressure on the BHRUT waiting list.

The review was not intended to apportion blame for the delays but to examine why they occurred, and to be satisfied that, so far as possible and practicable, appropriate steps had been taken to avoid their recurrence.

The report is to be published in June 2017 and we would like to express our appreciation for the assistance given by all the individuals and organisations involved, which enabled an open and transparent review to take place.



## Enter and View reports and their findings

From the beginning of Healthwatch, we have taken the view that a robust programme of Enter and View visits was the best way that we could ensure that we examined on the ground how patients' and residents' needs were being met.

To that end, we have established a robust method for identifying premises that should be visited, with a monthly meeting of staff and volunteers at which the programme is managed, visits arranged and the findings of recent visits reviewed. In 2016/17, we carried out 42 visits (with a small number of premises visited more than once), including, for the first time, several GP practices, several pharmacies and a dental practice. The full list appears in Appendix 1.

Our visiting teams were generally made welcome and managers and proprietors were very co-operative in facilitating the visits. The team members were made to feel welcome by staff, residents and residents' relatives and friends alike.

Few major problems were identified and mentioned in our teams' reports of their visits. Where we did make recommendations, we have been, or will be, following up to see what effect they have had.

All reports of our visits have been published on our website [www.healthwatchhavering.co.uk/enter-and-view-visits](http://www.healthwatchhavering.co.uk/enter-and-view-visits) and shared with the home, GPs or hospital, the Care Quality Commission, the Clinical Commissioning Group, Havering Council and other relevant agencies. Owing to the thorough nature of pre-publication checks, not all reports of the visits during the past year had been published at the date this report was prepared.



## Spending Money Wisely Consultation

The CCG together with the GP Clinical Directors for Havering, Barking and Dagenham and Redbridge have sought to consult local people's opinion on a range of treatments and prescribing. These are treatments or prescribing where there is no evidence of clinical value and to limit other

treatments and prescribing to much closer scrutiny always allowing for clinical decision making where appropriate.

The planning for this exercise began in March 2016 and we have worked closely with the CCG in designing the process ensuring that the information was clear and easy to read and that there were sufficient opportunities for local people to attend events. The consultation process completes in mid-May.



### Means of consultation

We did not carry out any formal consultation exercises this year. We have continued to receive, and act on, contacts from the public about health and social care matters through a variety of sources, including personal contacts, telephone calls, email, letters and our Tell Us What You Think Cards<sup>2</sup>.

We also consulted a range of local commissioners and providers of health and social care services about a range of services. None refused to co-operate with us or to provide information.

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<sup>2</sup> These are pre-paid postage postcards available from various locations that enable the public to let us have information – good or bad – about health and social care facilities.



## GOVERNANCE

### Our decision making

How we focus our time and energy is influenced by our volunteer members, the people who live and work in Havering and local organisations.

The board, which consists of directors, staff and volunteer members, establishes our priorities which are set out below in 'Our Plans for 2017/2018' and our programme of 'Enter and View' visits is set by our volunteer members at the monthly Panel Meeting.

Our policies and procedures are discussed and agreed in public board meetings and our board minutes are accessible on our website. The governance documents ensure that we operate efficiently and fairly in accordance with our statutory and legal requirements.

As part of our governance this year we reviewed the document 'A guide to the legislation affecting Healthwatch Havering'.

Because we have considerably widened the range and the complexity of the issues we now address as part of the 'Enter and View' programme, we have reviewed and widened the pro-forma of questions that volunteer members ask when undertaking visits.

We have bi-annual Away Days with all our members, to which we invite outside speakers to talk to us about their services and challenges. Our speakers help us to align our plan with critical issues happening in our borough. This year our speakers addressed the following subjects

- Irvine Muronzi and Wellington Makala of NELFT, about how to approach patients receiving hospital care for mental health issues
- Dr Sanomi - Local GP Clinical Director - 'Spending Money Wisely' consultation and the challenges facing Primary Care
- Ben Campbell and Sandy Foskett, of the Commissioning Team from the London Borough of Havering - talking about the commissioning of Domiciliary Care Services for the Boroughs older and vulnerable community.
- Patrick Farrell, Consultant Paramedic, Darzi Fellow in clinical decision making, attached to Queens and King George Hospital Accident and Emergency Department.

Healthwatch Havering is, in legal terms, a company limited by guarantee called Havering Healthwatch Limited. As a company limited by guarantee, it has no shareholders and is prohibited by law from distributing any financial surplus (or profit). Registration particulars and other contact details appear at the end of this report.

## Our volunteers

Although Healthwatch has statutory powers and is established by law, it relies for the exercise of its functions mainly on the efforts of its volunteer members. The majority of the volunteers who work in Healthwatch Havering have a professional background within the health and social care sector or have many years' familiarity with health and social care needs. This gives them valuable insight into the work that they do and enables them to report authoritatively on the Enter & View visits that they carry out.

Our volunteers give unstintingly of their time - something that is appreciated not only by Healthwatch but also by the wider community. We are delighted to report that, in June 2017, a number of Healthwatch volunteers received awards from the Havering Volunteer Centre in recognition of their efforts.



**Healthwatch Havering Volunteers receive their awards, 9 June 2017**

Left to right:  
 Shelley Hart of Havering Volunteer Centre; Dianne Old; Ron Wright;  
 Deputy Mayor of Havering, Cllr Dilip Patel; Diane Meid; Dawn Ladbroke; Jenny Gregory; Carol Dennis;  
 and Emma Lexton  
 (photo: Harvey Lexton)





## Financial Report

### Funding

Havering Council provided grant in 2016/17 to fund our activities at the same level as pertained for the financial years 2013/14 to 2015/16, £117,359.

Allowing for use of reserves, Corporation Tax adjustments, interest received and other miscellaneous income, the amount carried forward at the end of 2016/17 was £3,533.

A summary of the detailed accounts is set out in [Appendix 2](#). The full audited accounts are available on our website at <http://www.healthwatchhavering.co.uk/our-activities>

### Staff

Staff remained unchanged during 2016/17 from those in post at the end of March 2016. There are three directors - two who are engaged in executive roles as Chairman and Company Secretary respectively for 21 hours per week, while the third undertakes a non-executive role - and two part-time employees.



## Our Plans for 2017/18

In April, we had an Away Day to choose our priorities for 2017/18. These are

- 1) To develop our relationship with the Strategic Transformation Board, the Accountable Care System/Integrated Care Partnership for BHR and the Locality Development to ensure that we can understand, influence and support the engagement and consultation process for our residents.
- 2) Patient Empowerment will continue to be developed continuing to support people and families with Learning Disabilities and services with the Primary Care setting.
- 3) To work with the Commissioning team in the Borough on the recently procured Domiciliary Care Services to learn more about the services and the opportunities for resident's feedback. These services are provided to residents many of whom are among the most vulnerable in our community
- 4) To work with Queens Hospital and the Public Health team to design a process to engage patients and visitors to be more aware of the importance of 'No Smoking' in the hospital environment.
- 5) Continue with the Enter and View programme and to begin to explore the opportunity of creating a learning opportunity between the organisations using the knowledge gained by our E & V visits.



In all of this, we will be following the national guidance in the Healthwatch England Business Plan for 2017/18 - to bring the public's views to the heart of local decisions

## The "Healthwatch" logo and trademark

Havering Healthwatch Limited has a licence agreement with Healthwatch England governing use of the Healthwatch logo and trademark.

The Healthwatch logo is used widely for Healthwatch Havering activity. It is used on:

- The Healthwatch Havering website
- This Annual Report
- Publications such as reports of public consultation events and Enter & View visits
- Reports to official bodies, such as the Health & Wellbeing Board and Overview & Scrutiny Committees
- Official stationery, including letterheads and business cards
- Members' identity cards
- Newspaper advertisements and flyers for events

## Appendix 1 Enter and View visits.



In addition to having one of the largest residential and care home sectors in Greater London, Havering has the largest number of GP practices in London rated by the CQC as Inadequate or Requiring Improvement, a major hospital Trust (BHRUT) that is only now emerging from Special Measures following a 2013 inspection that found it Inadequate, a community health services Trust (NELFT) rated as Requiring Improvement, and a CCG that is under immense financial pressure and subject to Directions by NHS England. Moreover, the local health economy generally is under considerable strain because of the demands of urgent care needs, residential and domiciliary care needs and the imminence of the retirement of a number of GPs working single-handedly or in small partnerships.

From the beginning of Healthwatch, we have taken the view that a robust programme of Enter and View visits was the best way that we could ensure that we examined on the ground how patients' and residents' needs were being met.

To that end, we have established a robust method for identifying premises that should be visited, with a monthly meeting of staff and

volunteers at which the programme is managed, visits arranged and the findings of recent visits reviewed. In 2016/17, we carried out 42 visits (with a small number of premises visited more than once), including for the first time a number of GP practices, several pharmacies and a dental practice. The full list appears below.

Our visiting teams were generally made welcome and managers and proprietors were very co-operative in facilitating the visits. The team members were made to feel welcome by staff, residents and residents' relatives and friends alike.

Few major problems were identified and mentioned in our teams' reports of their visits. Where we did make recommendations, we have been, or will be, following up to see what effect they have had.

All reports of our visits have been published on our website [www.healthwatchhavering.co.uk/enter-and-view-visits](http://www.healthwatchhavering.co.uk/enter-and-view-visits) and shared with the home, GPs or hospital, the Care Quality Commission, the Clinical Commissioning Group, Havering Council and other relevant agencies. Owing to the thorough nature of pre-publication checks, not all of the reports had been published at the date this report was prepared.

We did not exercise Enter and View powers at an ophthalmology practice during this year.

The powers of Healthwatch to carry out Enter and View visits are set out in legislation<sup>3</sup> and most visits were carried out in exercise of them. On 8 occasions however, noted in the table that follows, visits were carried out at the invitation of the establishment's owners/managers and there was no need for the exercise of our statutory powers; but that has not affected how we have reported on such visits.

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<sup>3</sup> The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013

## We did not find it necessary to make recommendations to Healthwatch England on special reviews etc.

Date of visit	Establishment visited		Reasons for visit
	Name	Type	
	2016		
12 April	Cranham Court	Nursing Home	To observe the home in normal operation following CQC rating of Good
12 April	Little Gaynes	Residential Care Home	To observe the home in normal operation following CQC rating of Requires Improvement
26 April	Alton House	Residential Care Home	To observe the home in normal operation following CQC rating of Requires Improvement
1 May	Foxglove Ward and Japonica Ward, King George Hospital	Community Rehabilitation Wards	By invitation of NELFT; joint visit with Health Overview & Scrutiny Committee members
16 May	Rosewood Surgery as Hub practice	GP practice	As part of review of operation of GP Hub service
17 May	King's Park Well Pharmacy pre-6.30pm	Pharmacy	As part of review of operation of GP Hub service
17 May	King's Park GP pre-6.30pm	GP practice	As part of review of operation of GP Hub service
17 May	Rosewood Surgery	GP practice	As part of review of operation of GP Hub service
19 May	King's Park GP after 6.30pm	GP practice	As part of review of operation of GP Hub service

Date of visit	Establishment visited		Reasons for visit
	Name	Type	
	2016		
19 May	King's Park Well Pharmacy after 6.30pm	Pharmacy	As part of review of operation of GP Hub service
24 May	Petersfield GP Practice	GP practice	As part of review of operation of GP Hub service
25 May	North Street GP Practice	GP practice	As part of review of operation of GP Hub service
23 July	North Street GP Practice as Hub practice	GP practice	As part of review of operation of GP Hub service
28 July	Moreland House	Residential Care Home	To observe the home in normal operation following CQC rating of Requires Improvement
13 September	Havering Court	Residential Care Home	To observe the home in normal operation
27 September	Arran Manor	Residential Care Home	To observe the home in normal operation following CQC rating of Good
6 October	Queens Hospital: In-patient meals	Acute Hospital	Following expressions of concern about the standard and serving of meals in certain wards
11 October	WDP Havering	Drug and alcohol advisory service	By invitation in advance of CQC inspection

Date of visit	Establishment visited		Reasons for visit
	Name	Type	
2016			
27 October	Maylands Health Centre (GP Practice)	GP practice	By invitation, following catastrophic flooding of premises in June
27 October	Maylands Health Centre (Pharmacy)	Pharmacy	By invitation, following catastrophic flooding of premises in June
27 October	Maylands Health Centre (Parkview Dental Practice)	Dental practice	By invitation, following catastrophic flooding of premises in June
1 November	Straight Road GP Practice	GP practice	To observe the practice in normal operation, following CQC rating of Requires Improvement
7 November	Greenwood GP Practice	GP practice	To observe the practice in normal operation, following CQC rating of Requires Improvement
14 November	High Street (Hornchurch) GP Practice	GP practice	To observe the practice in normal operation, following CQC rating of Requires Improvement
15 November	Ravenscourt	Residential Care Home	To observe the home in normal operation following CQC rating of Good (qualified by "Well Led" Requires Improvement)
18 November	Berwick Surgery GP Practice	GP practice	To observe the practice in normal operation, following CQC rating of Inadequate

Date of visit	Establishment visited		Reasons for visit
	Name	Type	
2016			
21 November	Mawney Road GP Practice	GP practice	To observe the practice in normal operation, following CQC rating of Inadequate
23 November	Mental Health Street Triage Service	Community Health Service	By invitation of NELFT to learn about the service
5 December	Long Term Conditions Centre, Harold Wood	Community Health Service	By invitation of NELFT to learn about the service
8 December	Suttons Avenue GP Practice	GP practice	To observe the practice in normal operation, following CQC rating of Inadequate
2017			
17 January	Beech Court	Residential Care Home	To observe the home in normal operation following CQC rating of Requires Improvement
23 January	Mungo Park GP Practice	GP practice	To observe the practice in normal operation, following CQC rating of Requires Improvement
2 February	Lilliputs Centre (Second visit)	Complex of Residential Care Units for people with learning disabilities	To observe the home in normal operation following CQC ratings of Requires Improvement of certain units within the complex

Date of visit	Establishment visited		Reasons for visit
	Name	Type	
2017			
6 March	The Oaks	Residential Care Home	To observe the home in normal operation following CQC rating of Good
16 March	Modern Medical Centre GP Practice	GP practice	To observe the practice in normal operation, following CQC rating of Requires Improvement
21 March	Sarnett House	Residential Care Home for people with learning disabilities	To observe the home in normal operation following CQC rating of Requires Improvement
29 March	Barleycroft	Residential Care Home	To observe the home in normal operation following CQC ratings of Requires Improvement (current and previous)

### Future programme

Our future Enter and View visit programme will continue to be informed by CQC reports on establishments, by information gathered through meetings with local regulatory agencies and by complaints (and compliments, should we receive any) from service users.

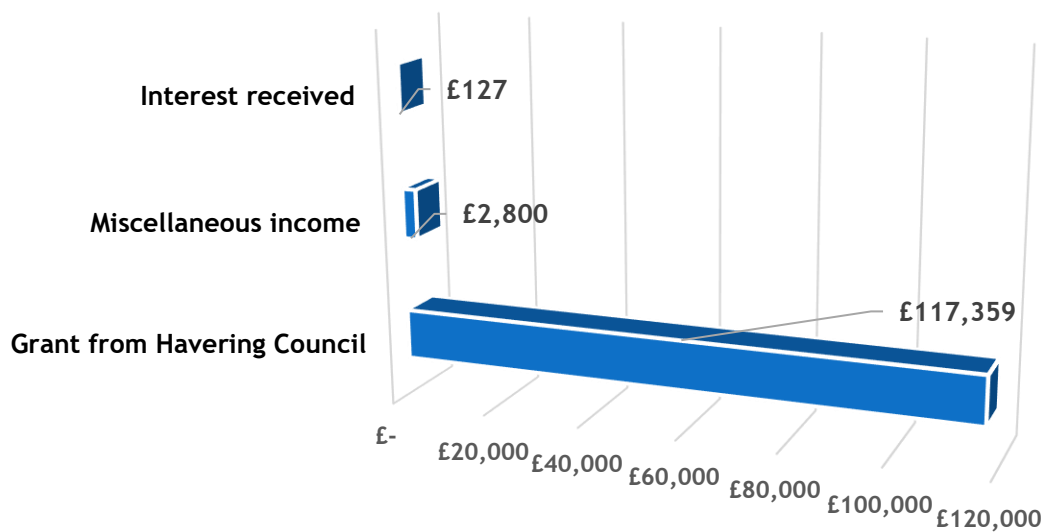
We have already identified a number of establishments that we plan to visit during the course of 2017/18.



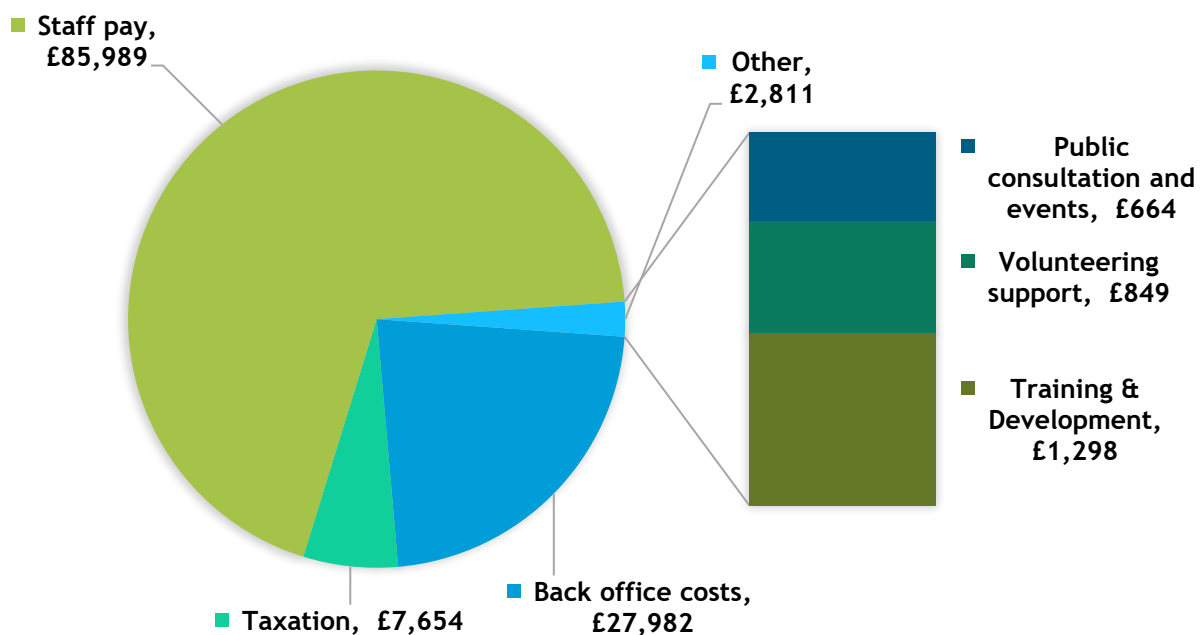
## Appendix 2 Summary statement of Income and Expenditure

For more detail, please refer to the annual accounts available on our website at <http://www.healthwatchhavering.co.uk/our-activities>

### INCOME SUMMARY



### EXPENDITURE SUMMARY



## **Participation in Healthwatch Havering**

Local people who have time to spare are welcome to join us as volunteers. We need both people who work in health or social care services, and those who are simply interested in getting the best possible health and social care services for the people of Havering.

Our aim is to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, to allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

**We are looking for:**

### **Members**

This is the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help prepare for college, university or a change in the working life. There is no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also is part of ensuring the most isolated people within our community have a voice.

Some Members may wish to become **Specialists**, developing and using expertise in a particular area of social care or health services.

### **Supporters**

Participation as a Supporter is open to every citizen and organisation that lives or operates within the London Borough of Havering. Supporters ensure that Healthwatch is rooted in the community and acts with a view to ensure that Healthwatch Havering represents and promotes community involvement in the commissioning, provision and scrutiny of health and social services.

## **Interested? Want to know more?**

Call us on **01708 303 300**; or email  
**[enquiries@healthwatchhaverling.co.uk](mailto:enquiries@healthwatchhaverling.co.uk)**



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## **Overview and Scrutiny Meeting – Safeguarding Update.**

### **Safeguarding Cars**

The role of the car is to attend the call and take control of the investigation. The specialist officers assigned to this vehicle then use the resources at the scene as they see fit, requesting extra resource from the ROM (Operations Inspector) if necessary. The purpose of safeguarding attending is to ensure that a high quality investigation is done straight away ensuring the victim is safeguarded from the outset. Officers have been directed that the members of the car prioritise getting control of and looking after the victim, whilst our colleagues at the scene (under safeguarding direction) work on the other building blocks of witnesses (local enquiries with neighbours included), suspects (arrest enquiries, searches), forensic evidence (seizures, photos, scenes of crimes officers), scenes (cordons, seizures, Scenes of crimes officers) etc.

The demand modelling for this function predicted that there would be approximately 2 call-outs per day total.

We parade 2 cars of staff per shift, to be available to turn out to a crime which fits one of the 2 following criteria:

### **Criteria 1 – Both Vulnerable Victim AND Serious Crime**

#### **Vulnerable Victim**

Defined as:

- The victim is a subject of Domestic Abuse
- Vulnerable due to significant mental/physical impairment
- Racially/Religiously Motivated or Homophobic or Transphobic

#### **Serious Crime**

Defined as:

- Serious Injury
- Lethal Barrelled Weapons
- Knife Enabled
- Substantial Loss to Victim
- Blackmail
- Rape or Serious Sexual Assault
- Child Abuse (Intra-Familial, Professional, Carer, Historic)
- Perverting Justice Offences
- Professional Judgement

## Domestic Abuse

The cross-government definition of domestic violence and abuse is:

any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- psychological
- physical
- sexual
- financial
- emotional

## Criteria 2- Complex Incident

Defined as:

- Sudden and unexpected deaths of children (U18)
- Parental Child Abduction
- Child Sexual Exploitation
- Professional Judgement

## PC Abstractions

Police Constables in Safeguarding have been protected from abstraction to Emergency Response & Patrol Teams at this time. This will allow them to concentrate on their core duties around safeguarding the boroughs most vulnerable.

## Outstanding Suspects

All Domestic Abuse suspects will be circulated on Emerald Warrants Management System within 24 hours.

It is the responsibility of the crimes sergeant to provide a list of all of the outstanding suspects to the night duty team for arrest enquiries to be conducted. This should hopefully result in more abusers being picked up quickly after an allegation of crime has been made, with the knock on effect of increasing victim confidence and satisfaction in the response of the police. Enquiries will be ordered by risk.

Where an arrest is not appropriate, a rationale needs to be recorded by the Officer In Case on the details of the crime report.

Mr Ross has commissioned a team of 3 to assist in gaining intelligence to locate suspects, which launched on the 14<sup>th</sup> August, with the objective of hunting down those who are wanted by police.

## **DVPN/DVPO**

Domestic Abuse is a power and control issue, and in the absence of being able to prosecute the offender a Domestic Violence Prevention Notice (DVPN) is a core tactic in providing safety to the victim. A DVPN provides a power vacuum for Domestic Abuse professionals to operate within, with the victim.

If a No Further Action relates to a job where the suspect is:

- Over 18
- Has used or threatened violence
- There are no other control measures (bail/non molestation orders etc)

Officers should be seeking a DVPN/Domestic Violence Prevention Order DVPO on every occasion. We receive about 4-8 prisoners per day, and that our detection rates are about 30%, this would be 3-6 DVPNs or bail conditions per day.

## **MASH**

Three Community Safety Unit Detective Constables (DC's) are seconded into the new, larger MASH (Multi Agency safeguarding Hub) teams. Their role is to support decision making in relation to Domestic Abuse specifically and to engage in strategy discussions as needed. This supports recommendations resulting from a recent HMIC (Her Majesty's Inspectorate of Constabularies) case examination. Until this point we have not had capacity to deliver on this. DC's will be selected from Teams, and will start on 04/09/2017. They will work from within one of the MASH departments in the Local Authorities. This will rotate every three months.

## **STAFFING**

We have recruited a number of Sexual Offences Investigation Technique (SOIT) officers and some CAIT (Child Abuse Investigation Team) vacancies are being filled. This will ease the pressure on existing team members and leave others more accessible to the community and our victims.

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## CHILDREN & LEARNING OVERVIEW AND SCRUTINY COMMITTEE, 31 August 2017

<b>Subject Heading:</b>	School Expansion Programme
<b>CMT Lead:</b>	Tim Aldridge, Director of Children's Services
<b>Report Author and contact details:</b>	Trevor Cook, 01708 431250, trevor.cook@havering.gov.uk
<b>Policy context:</b>	Statutory responsibility to provide a school place for Havering children

### SUMMARY

This report updates members of the Committee on the progress of the school expansion programme since the last report in April 2017.

The Local Authority has a statutory duty to plan and secure sufficient school places for their area to meet the needs of its children and families. Since 2011, the Council has created an additional 3,500 primary school places through the expansion of 21 primary schools in the borough and the number of Primary age pupils is expected to continue rising significantly from 2015/16 to 2020/21, with more than 4,000 extra pupils, and this will continue to rise further.

As Primary children move into the secondary sector, the number of Secondary age pupils is expected to rise significantly from 2015/16 to 2022/23, this will cause our current surplus of places in the Secondary sector to be eroded and surpassed.

The ONS live birth data for 2013 shows that most London boroughs experienced a drop in their birth rate from 2013 to 2014, however, Havering had a 5% increase. While many London boroughs have already experienced the increase in birth rate which is now starting to plateau, for Havering we are still at the early stages of our increase in the birth rate.

There are also planned major housing developments and regeneration schemes in Havering, and in addition some areas have seen rapid housing growth and other demographic changes that have led to more families with school age children moving into these areas, which in turn create an additional demand for school places.

## RECOMMENDATIONS

Members are asked to note the content of the report.

## REPORT DETAIL

### Background:

Havering in common with the many other London Boroughs and urban areas has been experiencing an increase in demand for primary school places for the last three years and continuing significant growth is forecast in the coming years. This increase in demand is due to rising birth rates in Havering, as well as families moving into the borough from other parts of London, the UK and abroad.

In October 2016, Cabinet approved Phase 4 of the school expansion programme as part of the Commissioning Plan for Education Provision 2015/16 – 2019/20. The Cabinet report contained detailed pupil projections across Early Years, Primary, Secondary and SEN phases, whilst also setting out the likely demand for school places as a result of the two housing zones planned for Rainham and Romford.

Cabinet will receive a further report in Autumn 2017, updated in line with the latest housing projections contained in the draft Local Plan, recommending approval of Phase 5 of the school expansion programme.

The main source of finance for the school places programme is the Basic Need grant awarded by the Department for Education. The Basic Need grant is determined by the annual SCAP (School Capacity) return made by the LA to the DfE and thus far, the Council has been able to manage the expansion programme for Phases 1 to 4 within the Basic Need Grant Allocation. The Council has also been able to apply sums secured through section 106 agreements towards some of the school expansion schemes.

Below is a summary of the proposed expansions in each phase agreed under Phase 4. The projected demand in future years which has been reported in this year's SCAP return, will be subject to approval by Cabinet and is therefore not reported in this update.

### Early Years:

Plans are underway to increase the Early Years provision in key wards, including Mawney, Harold Wood, Gooshays, Hylands, Rainham and Wennington, South Hornchurch and Upminster to meet the growing demand for places for 2, 3 and 4 year olds, whilst also increasing capacity for working parents of 3 and 4 year olds

to access up to 30 hours of free childcare. A number of school nurseries are being created, or expanded, as part of the wider programme of school expansion works.

Collier Row Primary Planning area:

- Expansion of Crownfield Infant School from 3FE to 4FE for 2017;
- Expansion of Crownfield Junior School from 3FE to 4FE for 2020.

Harold Hill Primary Planning area:

- Expansion of Broadford Primary School from 2FE to 3FE for 2017;
- Expansion of Pyrgo Priory Primary School from 2FE to 3FE for 2018;
- Expansion of Mead Primary School from 3FE to 4FE for 2018.

Rainham and South Hornchurch Primary Planning area:

- Expansion of Whybridge Infant School from 2FE to 3FE for 2017;
- Expansion of Whybridge Junior School from 2FE to 3FE for 2018;
- Expansion of Rainham Village Primary School from 2FE to 3FE for 2018;
- Expansion of Brady Primary School from 1FE to 2FE for 2019;
- A further 1FE will be needed for 2019;
- A site has been identified for one 3FE Primary school from 2021.

Romford Primary Planning area:

- Expansion of Hylands Primary School from 2FE to 3FE for 2017;
- Expansion of Mawney Primary School from 2FE to 3FE for 2017;
- Concordia Free School is expected to open on its permanent site for 2018;
- A further 1FE will be needed for 2019.

North East Secondary Planning area:

- Expansion of Drapers' Academy from 6FE to 7FE for 2018.

North West Secondary Planning area:

- A further 1FE will be needed for 2019.

Central Secondary Planning area:

- Marshalls Park School PAN rationalised from 172 to 180 for 2017;
- Emerson Park School PAN rationalised from 192 to 210 for 2017;
- Frances Bardsley Academy PAN rationalised from 220 to 240 for 2017;
- Expansion of Royal Liberty School from 4FE to 5FE for 2018.
- Expansion of Marshalls Park School from 6FE to 8FE for 2018.
- Expansion of Redden Court Academy from 5FE to 6FE for 2018.
- Expansion of Emerson Park School from 7 FE to 8FE for 2019.
- Expansion of Redden Court Academy from 6FE to 7FE for 2019.

### East Secondary Planning area:

- Hall Mead Academy PAN rationalised from 192 to 210 for 2019.

### SEN:

To meet the Primary SEN demand, three Additionally Resourced Provisions (ARPs) will need to be established in the Upminster, or Harold Hill, or Rainham and South Hornchurch primary planning areas.

For Secondary SEN, two ARPs will need to be established in the schools in the East and Central secondary planning areas.

Longer term forecasts highlighted the demand for a new Special School, and in April 2017, the LA was notified that it had been successful in submitting and Expression of Interest to the DfE to establish a new Special Free School for 60 children with Communication and Interaction Needs (C&I) and Social, Emotional and Mental Health (SEMH) in the age range 3 to 16. The competition process has now launched and will run for 4 months, with an expected decision on the proposer being made in January 2018. Information for perspective proposers can be found on the Havering Council website here;

[https://www.havering.gov.uk/news/article/219/new\\_commissioned\\_special\\_free\\_school\\_for\\_havering](https://www.havering.gov.uk/news/article/219/new_commissioned_special_free_school_for_havering)

The competition is also being advertised on the GOV.UK website here;

<https://www.gov.uk/government/publications/setting-up-a-new-special-school>

Depending on the interest shown, local and regional events may be held later in the year to bring together perspective sponsors.

### Next Steps:

Statutory processes are needed for any school expansion, including pre-consultation activity, publication of statutory notices, and implementation of decisions.

At the same time as the statutory process above being conducted, any required planning permissions must be sought before the Local Authority can publish the statutory notices.

A further Cabinet report will be prepared for Autumn 2017 which will provide an update to the current pupil projections, and identify plans to meet the planned demand for school places up until 2020/21.

## IMPLICATIONS AND RISKS

### **Financial implications and risks:**

#### Capital;

The Expansion Programme included within the October 2016 Cabinet report and subsequent 2017/18 Budget Setting reports was based on confirmed funding sources with the exception of £5m estimated 2019/20 Basic Need Allocation. The Council has recently been notified that it will not receive any Basic Need Allocation for 2019/20, and this will need to be factored into the Autumn 2017 Cabinet report. However, the Council has been allocated additional grant specifically for SEN places (c2.4m over the next three years) which had not been previously budgeted for. In addition, one of the Secondary expansions expected to cost £4m will not be going ahead. This will mean that the remaining approved expansion schemes can be delivered within the confirmed funding sources available.

#### Revenue;

The revenue implications for primary schools are that, in creating additional classes, additional resources will be incurred particularly for teaching and support staff. For each financial year after the October census date, the schools' annual funding allocation will reflect the additional pupils that will be on roll. For the period September to March before the new financial year, however, additional resources will need to be provided. This will be met from a Pupil Growth Contingency held within the Schools Budget (funded by the Dedicated Schools Grant) as agreed by the Schools Funding Forum.

### **Legal implications and risks:**

The Council has a statutory duty to secure that efficient primary and secondary education is available to meet the needs of the population of their area (Section 13 Education Act 1996).

At present, certain types of school organisational change (including change of age range, change of character, expansion through enlargement of premises, increase/decrease or change of provision for pupils with special educational needs) are subject to statutory processes of consultation and decision-making.

### **Human Resources implications and risks:**

The human resources implications for the schools to be proposed for expansion will be managed by the schools themselves. There is likely to be a need to recruit additional teaching and support staff and the relevant schools will undertake the recruitment and selection process in accordance with the appropriate policies and procedures. There are growing difficulties in recruiting to teaching posts and therefore schools will need to consider that additional resources and a longer

recruitment timescale may be required to fill vacancies. The Havering Education HR service will provide support as appropriate and required to all schools, academies or free schools that purchase relevant services.

### **Equalities implications and risks:**

An Equality Analysis was conducted for Phase 3 of the Primary Expansion Programme and was attached as an appendix 4 to the October 2016 Cabinet report. The issues arising from that analysis are in general still applicable and will be given due regard. A similar analysis will be undertaken for Phase 4 of the Expansion programme as firm proposals emerge to fully assess their impact on children with protected characteristics and their families. The Commissioning Plan for Education Provision 2015/16 - 2019/20 which identifies needs was also the subject of Equalities Analysis.

Expanding school capacity to meet the rising demand means that the Authority will be able to offer as many children as possible a local school place in their home authority. A primary objective of the expansions programme is to ensure that high quality education is available to all children in Havering. Officers will ensure that the consultation process is thorough and inclusive. Mitigating actions will be undertaken where an adverse impact has been identified in the EA.

<b>BACKGROUND PAPERS</b>
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None.



## CHILDREN AND LEARNING OVERVIEW AND SCRUTINY COMMITTEE, 31 August 2017

### Subject Heading:

**Future Education Services**

### SLT Lead:

Tim Aldridge, Director of Children's Services

### Report Author and contact details:

Ian Elliott, Programme Manager  
Tel: 01708432606  
ian.elliott@havering.gov.uk

### Policy context:

Education and Learning

### SUMMARY

This report updates members of the Committee on plans to review services provided by the local authority to schools over the next academic year.

The relationship between the London Borough of Havering (LBH) education services and schools continues to evolve. Against a backdrop of academisation and proposed changes to schools funding it is important for schools to receive timely, coherent and quality services from the borough to enable schools to deliver quality teaching, learning and support to children locally.

Traded services are experiencing challenging economic conditions and this is anticipated to continue. The Local Authority's statutory duties to schools reduce as they become academies. The imperative to find financial savings across Children's Services makes it timely for the borough to undertake a wholesale review of both statutory and traded services available to schools and reshape our relationship locally.

Our vision is one of quality education to children and young people in a sustainable self-improving education system across the borough, with the local authority providing cost effective services within available financial resources.

### RECOMMENDATIONS

It is recommended that the Overview and Scrutiny Committee takes note of this report and the need to review education services provided by the borough. The Committee is asked to consider the content of this report and agree for updates on the review of education services to be presented to future meeting(s) of the Committee.

## REPORT DETAIL

The changing education financial environment includes significant changes to funding streams, specifically to the funding formula for schools (with the intended introduction of a National Funding Formula from 2018) reductions to the Dedicated Schools Grant and the increasing (almost exclusive) channelling of a range of funds through Teaching Schools and Multi-academy Trusts.

Earlier this year Officers commissioned a piece of work to consider a number of options (models) for the future delivery of education traded services. On completion of this work it became clear that the authority needs to review its education services in their entirety, including both statutory and traded services. A review across all services (not solely traded) will better enable us to achieve our objective of working with all educational settings to establish a sustainable self-improving education system across the borough and also deliver / commission services within available financial resources.

### Review of Education Services

In order to develop new structures and/or models of service delivery locally it is necessary to look at three broad groups of services during a period of review:

#### **Group 1: Services with exclusively statutory roles**

In broad terms, the following education functions remain with the local authority on a statutory basis:

- The provision of sufficient high quality early years and school places, and provision for vulnerable children and adults (up to the age of 25);
- Appropriate assessment and support for the borough's most vulnerable children and young people; and
- Appropriate and prompt intervention to prevent school failure in respect of maintained schools.

#### **Group 2: Services that have no statutory functions**

These are (broadly) services where the local authority does not have a statutory duty to provide a function, for example the provision of school governor training to academies, or the provision of school improvement quality assurance services to academies.

#### **Group 3: Services that have both statutory and non-statutory functions.**



In broad terms, these are services and functions where the local authority has a duty and schools and / or the local authority fund services at or beyond a statutory minimum. For example, behavioural support to schools potentially falls into this category.

### **Objectives of a review of education services**

The approach to reviewing education services is proposed to be conducted as consistent with the following objectives:

- The reconfiguration and streamlining of statutory and essential in-house services will reflect a new role for the local authority at reduced cost and with increased efficiency. To achieve this objective we will look for greater synergy between some elements of children's social care and education services, to be focused on the more vulnerable young people and families in the borough;
- Ensure that schools in Havering continue to thrive by retaining/securing high-quality non-statutory services. This objective will be achieved at significantly reduced (or zero) cost to the authority by creating financially sustainable commercial services which could remain within the council, or be part of partnership arrangements with other local authorities or 'spin out' into external organisations to trade with schools.
- Increasing the capacity and capability of schools, teaching schools and multi-academy trusts to provide support to one another via a sustainable self-improving education system.

The review of all services provided to schools will identify:

- what is potentially no longer statutory provision that can be stopped or traded;
- which currently traded services are not recovering costs and assess their future viability to become commercially viable;
- efficiencies in processes and procedures;
- the most appropriate future delivery model for services in the context of the education community's shared vision for education across the borough; and
- a plan to implement the agreed delivery model by September 2018, which is sustainable, of quality and financially sound.

### **Governance and timing**

Given the importance to continue to provide services to schools whilst managing a sustainable financial position, The Chief Executive and Director of Children's services will oversee a phased programme of reviews of services, commencing in September 2017. Following an initial scoping exercise during August and September 2017 the reviews will be carried out internally by managers and staff in the Education and Learning Department. Phasing the programme will enable engagement with staff groups and schools throughout the review and also ensure minimal disruption to services provided to schools during this period.

## IMPLICATIONS AND RISKS

### **Financial implications and risks:**

None arising directly as a result of this report. The review is intended to generate financial savings to the authority, the detail of which will be reported via the council's budgetary reporting cycle.

### **Legal implications and risks:**

It is recommended that the Overview and Scrutiny Committee notes the content of the Report and notes that further reports will be presented updating on progress against the agreed project plan resulting from the review.

### **Human Resources implications and risks:**

None arising directly as a result of this report. The result of the review could create Human Resource implications that will be managed by the Council, consistent with established processes and procedures.

### **Equalities implications and risks:**

As a public authority the Council is required to comply with the general duty as set out in the Equality Act .This states that those subject to the general equality duty must have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity between different groups
- Foster good relations between different groups.

## BACKGROUND PAPERS

None