

Health and Partnerships Scrutiny Committee Agenda



**9.30 am Thursday, 29 August 2019
Committee Room No 2, Town Hall,
Darlington. DL1 5QT**

Members of the Public are welcome to attend this Meeting.

1. Introductions/Attendance at Meeting
2. Declarations of Interest
3. To approve the Minutes of the meeting of this Scrutiny Committee held on :-
 - (a) 3 July 2019 (Pages 1 - 4)
 - (b) 23 July 2019 (Pages 5 - 6)
4. Development of a Single Crisis Service across Durham and Darlington and Closure of the Crisis and Recovery House –
Report of Director of Operations, Tees, Esk and Wear Valley NHS Foundation Trust
(Pages 7 - 14)
5. Right Care, Right Place –
Presentation and Report by Director of Operations, Tees, Esk and Wear Valley NHS Foundation Trust
(Pages 15 - 26)
6. Healthwatch Darlington Annual Report 2018/19 –
Presentation of Chief Executive Officer, Healthwatch Darlington
(Pages 27 - 44)

7. Health and Well Being Board –
The Board met on 4 July 2019. The next meeting is scheduled for 28 November 2019.
8. Work Programme –
Report of the Managing Director.
(Pages 45 - 94)
9. SUPPLEMENTARY ITEM(S) (if any) which in the opinion of the Chair of this Committee are of an urgent nature and can be discussed at this meeting
10. Questions



Luke Swinhoe
Assistant Director Law and Governance

Wednesday, 21 August 2019

Town Hall
Darlington.

Membership

Councillors Bell, Dr. Chou, Clarke, Donoghue, Heslop, Layton, Lee, McEwan, Newall and K Nicholson

If you need this information in a different language or format or you have any other queries on this agenda please contact Hannah Fay, Democratic Officer, Resources Group, during normal office hours 8.30 a.m. to 4.45 p.m. Mondays to Thursdays and 8.30 a.m. to 4.15 p.m. Fridays email: hannah.fay@darlington.gov.uk or telephone 01325 405801

HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

Wednesday, 3 July 2019

PRESENT – Councillors Bell (Chair), Clarke, Donoghue, B Jones, Mrs D Jones, Layton, McEwan, Newall and K Nicholson

APOLOGIES – Councillor Heslop

ALSO IN ATTENDANCE – Jill Foggin (Communications Officer, County Durham and Darlington Foundation Trust)

OFFICERS IN ATTENDANCE – Ian Thompson (Assistant Director Community Services), Ken Ross (Public Health Principal) and Hannah Fay (Democratic Officer)

HP1 APPOINTMENT OF CHAIR FOR THE MUNICIPAL YEAR 2019/20

RESOLVED – That Councillor Bell be appointed Chair of this Committee for the Municipal Year 2019/20.

HP2 APPOINTMENT OF VICE CHAIR FOR THE MUNICIPAL YEAR 2019/20

RESOLVED – That Councillor Clarke be appointed Vice Chair of this Committee for the Municipal Year 2019/20.

HP3 DECLARATIONS OF INTEREST

Councillor McEwan declared an interest in Minute HP9/Jul/19 below as the Strategic Council Advisor for All Party Parliamentary Group (APPG) on Obesity. There were no other declarations of interest reported at the meeting.

HP4 TO CONSIDER TIMES OF MEETINGS OF THIS COMMITTEE FOR THE MUNICIPAL YEAR 2019/20, ON THE DATES AS AGREED IN THE CALENDAR OF MEETINGS BY CABINET AT MINUTE C110/FEB/19

RESOLVED – That meetings of this Scrutiny Committee be held at 9.30am for the remainder of the 2019/20 Municipal Year and that the meetings be held on a Thursday, on dates to be agreed with the Chair.

HP5 TO APPROVE THE MINUTES OF THE MEETING OF THIS SCRUTINY COMMITTEE HELD ON:-

(1) 13 MARCH 2019

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 13 March 2019.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 13 March 2019 be approved as a correct record.

(2) 1 MAY 2019

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 1 May 2019.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 1 May 2019 be approved as a correct record.

HP6 PERFORMANCE INDICATORS QUARTER 4 2018/19

The Head of Strategy, Performance and Communications submitted a report (previously circulated) providing Members with an update on performance against those key performance indicators within the remit of this Scrutiny Committee for the period 2018/19.

It was reported that the indicators were aligned with key priorities and the majority used to monitor the Corporate Plan 2017/21.

Details were provided of the 30 indicators that were reported to this Scrutiny Committee, five Culture indicators and 25 Public Health indicators. The majority of the indicators were reported annually and all Public Health Indicators were reported in line with the Public Health Framework National reporting schedule which means that the data is at least one year in arrears or related to aggregate periods.

At Quarter 4 data was available for five Culture indicators and five Public Health indicators had updated information to report.

Particular reference was made to the indicators CUL 008a – per cent of the adult population physically inactive, CUL 009a – per cent of the population physically active and CUL010a – per cent of the population taking part in sport and physical activity at least twice in the last month, which measured the activity of adult population in Darlington and were based on a Sport England Survey and showed that performance was on a par with the North East. It was also stated that CUL 063 – number of school pupils participating in the sports development programme had shown a significant increase in performance as a result of strong partnership working between the Council and schools; and that the performance indicator CUL 064 – number of individuals participating in the community sports development programme showed a reduction in performance as a result of a reduced funding.

The Public Health Principal advised Members that in relation to PBH020 – excess weight among primary school age children in Reception Year and PBH021 – excess weight among primary school age children in Year 6 had both seen an improvement in performance and that Darlington was statistically similar to the national average.

Reference was made to the indicators relating to hospital admissions for unintentional and deliberate injuries to children and Members questioned the methodology to capture non accidental injuries. Members were assured that non accidental injuries were captured, that the figure was very low and that this was reported to and monitored by Children's Services.

Discussion ensued on the figures for smoking in Darlington, which has seen the biggest proportional reduction in smokers but that the figure for Darlington was still

higher than the national average and that the number of adults identified as smoking in the antenatal period had seen a reduction; and the use of e-cigarettes as a replacement to cigarettes.

The Public Health Principal advised Members of the smoking cessation services and initiatives available and the Healthwatch representative confirmed that a survey had been undertaken by Youthwatch Darlington in respect of the support available to young people in Darlington to stop smoking. Reference was also made to the substance misuse service available to residents in Darlington and the representative from Healthwatch confirmed that the Healthwatch report on substance misuse and mental health would be circulated to Members for information.

Members questioned the methodology used to measure admissions for alcohol and whether there was another indicator that was specific to alcohol related attendances at Accident and Emergency.

RESOLVED – (a) That the submitted report be noted.

(b) That an update be provided in respect of an additional indicator specific to alcohol related attendances at Accident and Emergency.

HP7 WORK PROGRAMME

The Managing Director submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme for the Municipal Year 2019/2020 and to consider any additional areas to be included.

There was discussion on the current status of the various topics on the work programme and Members requested an update on Childhood Healthy Weight Plan and an update from Adults and Housing Scrutiny Committee on the outstanding item on Domiciliary Care.

It was suggested that the Scrutiny Committee could look at an item on partnership working with community charities. The representative from Healthwatch Darlington advised Members of Darlington Organisations Together network (DOT), a group of organisations, community groups and services, and agreed to share dates of future DOT meetings with Members.

Members raised concern in respect of the proposal to merge the CCG's in Tees Valley and Durham and requested an update as part of NHS Clinical Commissioning Group Financial Challenges and Impact on Services. The representative from Healthwatch Darlington advised that Healthwatch were developing a survey in respect of the proposals for new CCG's in Tees Valley and Durham and this would be circulated to Members once finalised.

RESOLVED – (a) That the work programme for the Municipal Year 2019/20, as appended to the submitted report, be approved.

(b) That the work programme be updated to reflect the decisions of this Scrutiny Committee.

HP8 HEALTH AND WELL BEING BOARD

Members were advised that the next meeting of the Health and Well Being Board was scheduled for 4 July 2019.

RESOLVED – That Members look forward to receiving an update on the work of the Health and Well Being Board at a future meeting of this Scrutiny Committee.

HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

Tuesday, 23 July 2019

PRESENT – Councillors Clarke, Donoghue, Heslop and Newall

APOLOGIES – Councillors Bell, Dr. Chou, Layton, Lee, McEwan and K Nicholson

ALSO IN ATTENDANCE – Michael Houghton (NHS Darlington Clinical Commissioning Group), Gillian Curry (County Durham and Darlington Foundation Trust), Levi Buckley (Tees Esk and Wear Valleys Foundation Trust) and Diane Lax (Healthwatch Darlington)

OFFICERS IN ATTENDANCE – Hannah Fay (Democratic Officer)

HP9 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

HP10 PROPOSALS FOR NEW CLINICAL COMMISSIONING GROUPS FOR TEES VALLEY AND DURHAM CCGS

Michael Houghton, Director of Commissioning, Strategy and Delivery, NHS Darlington Clinical Commissioning Group (CCG) gave a PowerPoint presentation to Members on behalf of County Durham and the Tees Valley CCG's which provided members with information on the proposals for new CCG's for Tees Valley and Durham CCG's.

Members were advised of the current arrangements for the CCG's that cover Teesside, Darlington and Durham, of which there were five; these CCG's commission services for over 1.2 million people; and that one Accountable Officer and a combined management structure was in place for all five CCG's. Members were advised of what CCG's do and that the proposed merger was an administrative change only which would not affect services provided.

Details were provided of the reasons for the proposed changes, including requirements of the NHS Long Term Plan to have fewer CCG's and to reduce running costs by 20%; and there were four proposed options, these were:

1. Single CCG across the ICS i.e. Cumbria and the North East
2. Single CCG across the 5-CCG collaborative: merger of Darlington CCG, Durham Dales, Easington & Sedgfield CCG; Hartlepool & Stockton-On-Tees CCG; North Durham CCG and South Tees CCG.
3. Single CCG across each Integrated Care Partnership: i.e. the southern ICP (South Tees CCG, Hartlepool and Stockton on Tees CCG and Darlington CCG) and the central ICP (Durham Dales, Easington and Sedgfield CCG, North Durham CCG, South Tyneside CCG and Sunderland CCG)
4. Two CCGs with a shared management structure i.e. a single Tees Valley CCG and a single Durham CCG whilst retaining a shared management structure

Members were informed of the preferred option by the CCG Governing Bodies, option 4, and the reasons for this being the best option.

Members raised concern regarding option 4 and how two separate CCG's would link.

It was confirmed that services were commissioned globally and adapted to the local population; that services were based on national standards; and in respect of TEWV there was a Mental Health and Learning Disability Partnership covering the current CCG's who work as a group to set contract standards.

Members questioned the level of public engagement for the proposals. Members were advised that Healthwatch had undertaken a survey seeking the views of members of the public; that a formal consultation had not been undertaken; that County Durham and the Tees Valley CCGs had engaged with and sought the views of local authorities, NHS providers, Health and Well Being Boards and Scrutiny Committees; and this feedback would be discussed when the Governing Bodies consider the merger proposal at their meetings in August 2019.

Following a question relating to the 20% required reduction in running costs, Members were advised that the monetary value was millions, an exact figure would be confirmed and shared; that 14% had been saved to date and the full 20% was required to be saved by the end of the financial year.

Discussion ensued in respect of budget arrangements for option 4; Members stated that other CCG's were in a budget deficit and Darlington was breaking even; and raised concern in respect of the impact these deficits would have on Darlington. Members were advised that the budget allocation had been published until 2021; that budgets would be combined when CCGs merge, however money would not be reallocated as money was invested in services; and that existing financial plans would remain in place.

A Member raised concern regarding possible impact of the proposed change on the 111 service and was advised that the 111 service was provided by NEAS, covering the North East, and that there would be no impact.

Discussion ensued regarding potential job losses as a result of the proposed change; roughly six posts had been lost at a senior level, however a number of these roles were absorbed and new roles created and some staff members had retired; there had been no redundancies; and that this would be a last resort.

RESOLVED – (a) That the representative from NHS Darlington Clinical Commissioning Group be thanked for the presentation.

(b) That Members of this Scrutiny Committee forward any comments and views on the proposals to the Director of Commissioning, Strategy and Delivery, NHS Darlington Clinical Commissioning Group (CCG) by 30 July 2019.

DARLINGTON HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE

DEVELOPMENT OF A SINGLE CRISIS SERVICE ACROSS DURHAM AND DARLINGTON AND CLOSURE OF THE CRISIS AND RECOVERY HOUSE

1. INTRODUCTION & PURPOSE

The purpose of this paper is to outline the next stage of crisis services improvement plans. Specifically, we propose to reconfigure and streamline our adult crisis services across County Durham and Darlington (from 2 teams to 1) to improve patient experience and allow more efficient and effective use of flexible resource, and close the Crisis and Recovery House. All the work described in this paper is fully aligned to the themes identified in the recent Commissioner review of crisis services, and fully aligned with the priorities the concordat and commissioners have identified.

2. Current Crisis Service Provision

There are currently two separate crisis teams covering the North Durham and South Durham and Darlington areas. Both teams work on a 24/7 basis providing comprehensive triage and assessment of individuals who are experiencing a mental health crisis, with the aim of preventing their admission to hospital. Where the individual is admitted to inpatient services, the crisis team works with them to support leave and recovery-based discharge, and enable productive bed flow. The crisis service is also responsible for providing intensive home treatment and facilitating S136 assessments outside of street triage working hours. However, there are significant variances across the teams in terms of staffing levels and ways of working to deliver the service.

The Street Triage Team (STT) works in partnership with Durham Constabulary to provide mental health advice and guidance to assist the Police in joint decision making to best manage risk associated with mental health issues. The team provides support around mental health legislation as well as offering telephone triage and face-to-face contact for those who come into contact with Police where there is concern for their mental health. Core working hours for STT are between 14.00 and midnight, 7 days a week.

In addition to our 2 existing crisis teams, and the Street Triage Service, we also still have a 9 bedded Crisis & Recovery House in Shildon. It has been well regarded by users and received a positive CQC inspection report. However, its utilisation is consistently lower than 50% due to the limitations of use (e.g. ability to self-medicate, restrictions on level of risk that can be accommodated due to CQC registration criteria).

In 2017 there were only **88 admissions** to the crisis house (with an average length of stay of 11 days) and, on average, **less than half the beds were being used** at any one time. During the same period over **1300 people** receive intensive home based treatment in their own home (over **7700 visits**). Between December 17 and

May 18 there were no admissions to the crisis and recovery house and staff worked elsewhere within the crisis service, including providing intensive home based treatment. Since May 2018, the average occupancy has been 8.45%, with a monthly breakdown as follows:

Month	% Occupancy (all admissions)	% bed days used by Darlington residents
June 2018	0%	0%
July 2018	6.45%	38.8% (7 bed days)
August 2018	43.01%	28.3% (34 bed days)
September 2018	36.67%	26.2% (26 bed days)
October 2018	14.7%	17% (7 bed days)
November 2018	14.4%	56.4% (22 bed days)
December 2018	1.79%	0%
January 2019	0.72%	0%
February 2019	0%	0%
March 2019	0%	0%
April 2019	0%	0%
May 2019	0%	0%
June 2019	0%	0%
July 2019	0%	0%

On average, a bed in the crisis and recovery house costs the Trust **£478** per day to run. In comparison, it costs us on average **£380** per day for an inpatient bed in one of our assessment treatment wards and **£324** for one of the beds in our rehabilitation units.

Due to very low demand for the provision over a long period, operationally the house has been temporarily closed (as a result of having zero occupancy) but operationally ready for use for long periods of the past year. This in no way suggested that the work ongoing in the house was of concern, or that the small number of patients that had accessed it derived benefit from the care they receive there. Rather, it reflected a pragmatic, operational consideration to make best and most flexible use of a finite resource for as many of the population as possible whilst better options were being worked through.

3. Summary of Engagement and Consultation Undertaken

Pre Engagement

Given the low use of the House, and concerns about sustainability, the Trust wanted to undertake extensive public/stakeholder engagement about future options to ensure that proposals will meet the needs of service users whilst also delivering value for money. Alongside this, discussions have been continuing with the Crisis Concordat and Commissioners (linked to the concurrent Commissioner review of the wider Crisis pathway) about wider service developments that need to be taken forward with the wider health economy and community. Critical to this is a broad and flexible safe haven model, which it is agreed that TEWV are not necessarily best placed to provide and third sector partners should be considered.

Through the summer of 2018, pre engagement work was undertaken with service users, their families, the public and stakeholders to inform the future direction of our crisis services. The engagement events included representatives from CCGs, NECS, TEWV governor and staff and critically service users and their families. Five engagement events were held, 1 in Darlington and 4 in County Durham, along with a dedicated session with the crisis house staff. A briefing detailing the engagement events was sent to stakeholders which included all service user groups, the voluntary sector, local authorities (including overview and scrutiny committees), MPs, all TEWV members and governors. Further information was fed in from social media engagement. There were 32 attendees at the 5 events including TEWV crisis service staff, governors, Darlington LA Adult social care, N Durham CCG, service users, Darlington Health Watch, Durham LA staff, Rethink, Darlington Samaritans and Durham Police.

Attendees identified that patient choice with a range of options for intensive support should be available. This should include consideration of mobile, community based and virtual options. They emphasised they wanted to feel safe, and that easy, consistent access to support out of normal working hours is particularly important. Support for carers was also highlighted as being important, along with peer support/ability to speak to an expert by experience. Unsurprisingly, ease of access, a quick response and early support to avoid the situation escalating into a crisis was identified as a priority along with better informal access as opposed to a formal “assessment” process. Consistency was identified as another common theme, in addition to service users wanting to feel listened to.

A number of attendees talked about the need for a Safe haven, safe space, somewhere that isn't home which may not provide IHT but offers time out, staff support (social care), peer support and knowledge of local resources for signposting. Those attending talked about a one stop shop and seamless provision between different agencies as individuals rarely had only 1 issue and often their social situation was exacerbating their mental health condition.

The CCGs have recently confirmed that access to national Long Term Plan funding has been secured for the development of Safe Havens within County Durham and Darlington. This work will be coordinated through the crisis care concordat and it is proposed that this service is commissioned through the third sector, based on the provision of similar services across the country. This will be an exciting development to complement a revised crisis model.

Feedback identified that staff with a range of personal and professional skills is important, particularly that staff should be skilled in mental health and have a good knowledge of other local services/resources for signposting, and at a human level that staff should demonstrate empathy, listening, caring, compassion, patience and effective communication skills.. Social care support was also highly valued and mentioned frequently. Attendees confirmed that a clear, structured and purposeful care plan which was developed in conjunction with them was important, and that this plan was followed consistently by staff. The Transforming care agenda and need for effective community support for people with a learning disability was also reflected.

Feedback suggested a broader criteria should be adopted to be able to support a range of people, offering a drop in facility and potentially using Shildon as a base for crisis teams. However, many people acknowledged that Shildon as a location is not easily accessible for many parts of County Durham.

In addition to the comments received at the engagement events we also received comments from Darlington Mind who put forward a proposal for closer working via their supported housing facility and MH tenancies, and since this time have successfully developed a small crisis house provision within Darlington, supported through the Crisis Concordat and new national monies.

4. New Service Model

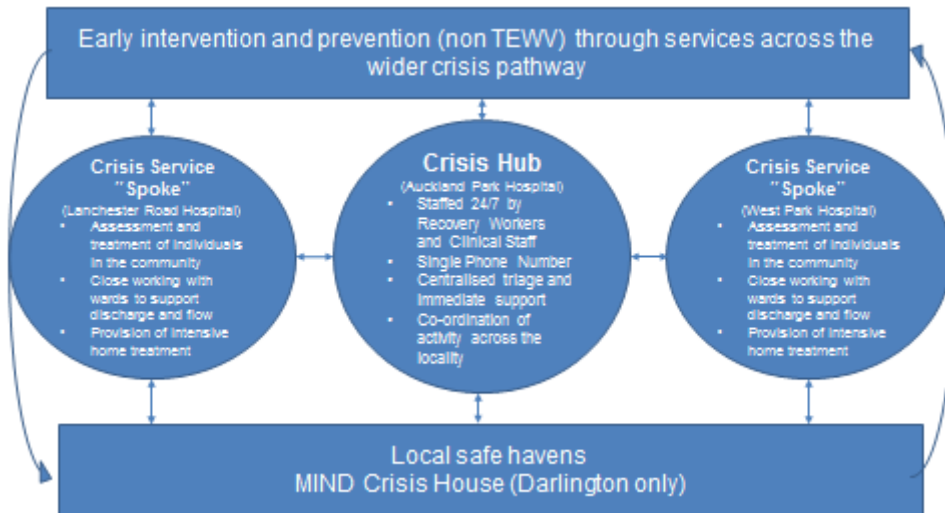
Building on information received through the pre engagement work outlined above, a three-day Improvement Event was held in September 2018 to consider ways to improve our crisis services and what our future service provision should look like. This event was clearly informed by the outputs of the pre-engagement work, and the event itself had strong service user, carer and governor representation to ensure that we could be confident the outputs were robustly co-produced. The outputs from this event and consequent detailed proposals that have been developed to support our transformation of crisis services are summarised below.

Staff, patients and stakeholders, through the workshop in September, proposed that the current crisis service is reconfigured to create a single team which could provide a more standardised approach. This proposal was strongly supported the local Crisis Concordat (of which Darlington Borough Council are members), Mental Health and Learning Disability Partnership, Commissioners and TEWV Trust. As a result, a hub and spoke model will be implemented before the end of 2019, once appropriate accommodation for the central hub is available.

From all the analysis undertaken, it is clear that the current model of a Crisis and Recovery House does not meet the needs of the population as a whole, and intensive home treatment needs to be better linked to community team processes and crisis services to have maximum impact. The current House, with the regulation framework around it, is not able to provide a clearly defined and visible alternative intensive home treatment model in the way we would wish to do or in the way service users want. The pre-engagement exercise identified that provision of intensive home treatment is not contingent on a bed base being available. There was, however, a need for access to 'respite' and 'safe haven' for those experiencing significant mental health crisis, and to prevent needs escalating, including support for carers. As a result of the consultation, consideration of alternative community based safe haven models and continued minimal occupancy of the Crisis and Recovery House, decommissioning this service (as proposed in August 2018) is felt to still be the only viable option, bringing the opportunity to reinvest the resource released from the closure of the Crisis & Recovery House into the integrated Crisis Service and an increase in Intensive Home Treatment, in addition to a contribution to CRES. The reinvested resource would enable us to provide a 24/7, centralised contact point for the service along with increased capacity for Intensive Home Treatment, and in so-doing maximise crisis team clinician capacity for crisis assessments. Importantly, funding has also now been secured to develop local safe havens, in line with the

model proposed through our engagement and consultation work. Work has now started to operationalise this.

The new service model is shown diagrammatically below:



Triage workers in the Hub will predominantly be support worker/health care assistants with appropriate training to safely provide initial support to individuals presenting in crisis. In addition, there will be qualified crisis clinicians with responsibility for making clinical decisions and/or providing further advice. The clinical staff will also be responsible for co-ordinating all crisis activity across the shift. This core team will be based at the hub for the whole shift whilst the other staff on duty will report to 'spoke bases' at Lanchester Road Hospital and West Park Hospital. This will reduce waiting time for patients, support a levelled work flow for the shift, and ensure that key relationships and roles within the spoke sites (Lanchester Road and West Park Hospitals) are maintained.

There will be a single contact number for D&D crisis services that will enable all calls to reach this central hub. Particularly for times of peak demand, there will be a queue system employed on all calls which would let the caller know their position in the queue of calls to give them some idea of how long they will be waiting before their call is answered. A recorded message will provide advice and guidance e.g. Samaritans telephone number, advice to call care coordinator if known to services and their call is during office hours, etc. during times when individuals are waiting for calls to be answered. There will be no answerphone option available on this phone line as there have previously been, learning from lessons from service user feedback and serious incidents. Based on evidence from the commissioner crisis review, it is very likely that a percentage of callers coming through to the hub will require signposting to other, more appropriate services outside of the crisis teams, i.e. across the wider crisis pathway; for example, third sector providers, wellbeing services, social welfare provision e.g. housing services/resources, financial advice, employment advice, local food bank/fuel services as well as signposting to other local resources including the community and voluntary sector. To support this, work is ongoing through the crisis concordat to develop a centralised directory of services for the crisis pathway as a whole that can be used to support all agencies and ensure individuals access the right care for their needs. Options to extend this

provision in the future to provide a 111 equivalent for mental health are currently being explored through the Crisis Concordat.

Savings made from the closure of the Crisis & Recovery House would be re-invested into the Crisis Service and enhancing the offer of Intensive Home Treat that the team is currently able to provide.

5. Financial/Value for Money:

Any future service model will be predicated on the principle of providing value for money for people who need support in a mental health crisis across County Durham and Darlington. The business plan and financial plan identifies a potential contribution to CRES which would need to be considered within any proposed future service model. In summary the proposed direct revenue budgets in AMH Durham and Darlington for the current and proposed service would be as follows:

It is anticipated that the resource released will be invested into the integrated Crisis Service and an increase in Intensive Home Treatment and will also provide a cash releasing efficiency saving (CRES) of £265k (recurring) in line with national efficiency saving targets.

Proposed annual cost £k	Current annual cost £k	Annual saving (CRES) £k
2,917	3,182	-265



The financial information includes the AMH crisis team and the crisis and recovery house direct budgets. The assumptions are that the single crisis team would have a hub at a current Trust base and there would be no additional revenue costs from utilising that site as a hub.

There may be some temporary additional costs for excess travel (3 years) and redeployment in the first instance for any organisational change implications linked to the change of services. This would reduce the indicative annual savings in the initial

years however these changes are anticipated to be minimised based on the service change proposed and the use of a hub and spoke model.

An Equality Impact Assessment has also been completed.

6. CONCLUSION

Detailed consolation and engagement work over the past 12 months has supported the development of a single crisis service for Durham and Darlington, with an increased capacity for intensive home treatment through a non bed based approach. Implementation of this will necessitate the closure of the Crisis and Recovery House at Shildon, which currently cannot be efficiently used and does not represent value for money for the majority of service users. In parallel, TEWV will work with partners to develop a more bespoke, community based safe haven approach which better meets the needs of the user group. It is expected that having a single specialist team dedicated to crisis, with one set of standard work, will lead to zero variance in ways of working across the locality. It is anticipated that the skill-sets of team members will also need to be evaluated, to ensure equity of bands and roles across all staff groups.

7. RECOMMENDATIONS



Overview and Scrutiny Committee are asked to:

- Note the outcome of the work undertaken and the proposed integration of crisis services across Durham and Darlington
- Support the single service approach and the implementation of the revised model
- Support decommissioning of the Crisis and Recovery House to enable resource to be more effectively reinvested in an enhanced crisis and home treatment service. Due to the collaborative approach and consolation with stakeholders in developing the model it is not anticipated that public consultation is needed although OSC are asked to confirm this approach.
- Note the planned development of a safe haven approach to supplement the specialist crisis service provision.

Levi Buckley
Director of Operations
Durham and Darlington

Background Papers:

Appendix 1: Crisis House briefing note and engagement information



 role and future of the crisis and recover
 Crisis and recovery house in D&D.pdf

Appendix 2: NECS/North Durham CCG Crisis Review Papers



EiC Cover Sheet MH
Crisis Review.pdf



MH Crisis Review
Report Final 29.08.16



NECS MH Crisis
Review Engagement |



attendees.docx

Appendix 3: Summary of proposed Safe Haven Approach



Appendix 4 - Safe
Haven Design summa



Right Care, Right Place Programme (RCRP)

Jo Murray
RCRP Delivery Lead (D&D)

making a

difference

together

Key Drivers for Change

Tees, Esk and Wear Valleys



NHS Foundation Trust



PRIMARY CARE NETWORKS

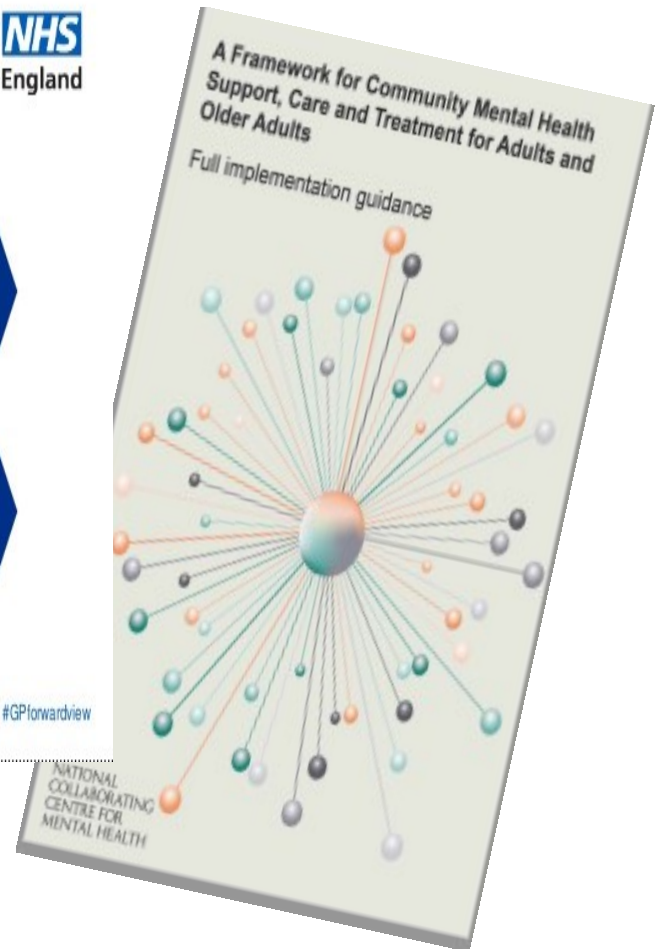
Primary care networks are small enough to give a sense of local ownership, but big enough to have **impact** across a 30-50K population.

They will comprise groupings of 100-150 clinicians and wider staff **sharing a vision** for how to improve the care of their population and will serve as service delivery units and a unifying platform across the country.

www.england.nhs.uk



#GPforwardview



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Our Long Term Plan will make the
NHS fit for the future

#NHSLongTermPlan

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Key Drivers for change



“It feels like we are on opposing sides, rather than all working to provide the best patient care we can”
GP

“Better handover to other services so not to feel like a big gap in support and potential to go back down”
Service User

“We have a serious gap in provision for people suffering mental health difficulties who are deemed not “risky” enough for secondary care intervention yet are refused primary care intervention as they are too “risky” or “complex”.
Staff

Right Care, Right Place

Tees, Esk and Wear Valleys



NHS Foundation Trust

- Improve how the whole system works together for both planned and unplanned care (especially thinking about how services better “wrap around” PCNs)
- Reduce “hand offs” within the Trust and with other providers
- Ensure needs are identified and addressed as early as possible
- Reduce unwarranted variations whilst making sure we provide what local communities need
- Make best use of all resources (money/ staff/ community assets)
- Address physical healthcare needs better and in a more joined up way

making a

difference

together

Next 3-4 months



- Two key, parallel pieces of work for community services over the next 3-4 months:
 - Speak to PCNs and TEWV staff - what would make the biggest difference quickly; where possible test 'prototypes' to assess the impact
 - Plan and deliver wider engagement events to develop a shared (and possibly radical) vision for the future for implementation (within the 'givens' that we have) over the coming 3-4 years

making a

difference

together



Jo Murray

RCRP Delivery Lead
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RIGHT CARE, RIGHT PLACE: DURHAM AND DARLINGTON

KEY MESSAGES AUGUST 2019

1. WHAT IS “RIGHT CARE, RIGHT PLACE”?

In response to the NHS Long Term Plan, Five Year Forward View for Mental Health and forthcoming Community Mental Health Framework, the TEWV Trust Board have initiated a new programme of improvement covering community, inpatient and urgent care delivery, needs to be prioritised. This new programme is called “Right Care, Right Place” (RCRP) and it aims to deliver better experience and outcomes for services users, our staff and our partners by focusing on how all of our services, and those of our partners, can work more seamlessly and better together, reflecting staff, users’, carers’ and partners’ feedback. Using a recovery-focused and trauma informed approach, RCRP will work systemically (not just within TEWV) so that we can:

- Improve how the whole system works together for both planned and unplanned care (especially thinking about how services better “wrap around” PCNs)
- Reduce “hand offs” (ie passing people between services) within the Trust and with other providers
- Ensure people’s needs are identified and addressed as early as possible
- Reduce unwarranted variations whilst making sure we provide what local communities need
- Achieve the best use of all resources (money/ staff/ community assets)
- Address physical healthcare needs better and in a more joined up way

The programme will link closely to all other Trust and multi-agency programmes of work to avoid duplication.

2. WHAT IS ALREADY HAPPENING IN DARLINGTON, AND WHAT MIGHT THIS NEW PROGRAMME MEAN LOCALLY?

We do not plan to duplicate existing work and groups. Therefore, the Crisis Concordat will remain the focus for urgent care work, and work to make our use of beds more efficient within TEWV will continue. Development of community services will inevitably be the biggest area for development, in particular to look at how mental health services better “wrap around” PCNs. We will set up a specific project group for Darlington, most likely as a sub group to the New Models of Care work, involving PCNs, third sector, public health, patients, families and other stakeholders to lead this. We have however set up a senior reference group to co-ordinate and oversee the work.

3. THE “GIVENS”

There is a genuine intention to be creative and move away from traditional organisation, commissioning or delivery arrangements where appropriate or where these inadvertently create a barrier to easy access to care. However, there are a range of “givens” that services and partners will need to work within as a framework to support this development. These are currently being finalised but will include national performance measures, CQC and other regulatory requirements etc.

4. ENGAGEMENT AND INVOLVEMENT

We have made a genuine commitment to co-produce our plans with partners, service users, families and staff. Work is developing to make sure we are able to do this properly, balancing rapid testing in some areas of different ways of working with agreeing a shared vision for the future. The Trust’s Expert by Experience Lead has provided advice and guidance re meaningful user involvement. Healthwatch are also engaged to begin to consider how they could help with wider engagement. Priority work for August will be planning the vision development events for October (dates to be confirmed before the end of August), and a Design Events for Darlington is being planned for November to begin to develop implementation plans.

Ideas Generation

A simple “ideas generation” exercise has started across services internally and externally, simply asking people to identify what 2 things (big or small) they think would make the biggest difference to people struggling with their mental health. To date, 180+ ideas have been generated (primarily from PCNs) to date, and there are a number of possible prototypes emerging that services will be encouraged to test through August and September to evaluate the impact.

The NHS MH Implementation Plan has recently been published and outlines plans for a £2.3bn investment nationally in mental health services over the next 5 years. The work commenced to date on the RCRP programme places us in a strong position to take advantage of this by building on the creative and different approaches being developed.

5. WHAT HAS BEEN HAPPENING OVER THE PAST MONTH?

The RCRP programme in Darlington is progressing reasonably well from a system perspective. There has been an increasing level of engagement, including primary care and the voluntary sector, and generally a high level of enthusiasm to take the opportunity we now have to do things differently, building on the good practice already available within the system. In relation to the 3 specific workstreams:

Acute Care – bed action plans are now in place for both adult mental health and older people’s services, although generally, Durham and Darlington locality performs well in this area

Urgent Care - Adult crisis services continue work to move towards a single hub and spoken model. Discussions about RCRP are planned for the next Crisis Concordat meeting. Bids have been submitted in conjunction with the CCGs for additional investment in crisis services. Work is also being considered through the Crisis Concordat to support co-ordination of different strands of work related to high intensity users

Community Services - Much of the work related to RCRP over the past month has related to community services. There has been a significant focus on external engagement and immediate ideas generation to identify potential prototype work. Initial meetings are being held over the summer with the Primary Care Networks, the community and voluntary sector, and other key stakeholders in Darlington (including DBC). Work will include ensuring there are strong links with emerging Social Prescribing Link Worker roles. Discussions have also started more strategically to consider commissioning approaches and resources might be used to best effect to support this programme.

Data packs showing referral trends by directorate, team, PCN and practice have been produced and shared with a small number of people for comment to support further development. It is hoped these may help the system to start to focus questions and explore creative and robust solutions based on a real understanding of specific local issues. For example, if CYP referrals have significantly increased in 1 practice, understanding if this may be linked to new housing or school developments may help focus ideas about possible solutions/work that may be required.

6. NEXT STEPS

We are undertaking two key pieces of work which we will run in parallel over the coming 3-4 months:

1. Through existing forums, speak to PCNs, users/carers/families, stakeholders and TEWV staff to identify what would make the biggest difference quickly, and where possible test these ‘prototypes’ to assess the impact
2. Plan and deliver wider engagement events with service users, families, PCNs, other stakeholders (including voluntary sector) and our staff within TEWV develop a shared (and possibly radical) vision for the future for implementation (within the ‘givens’ that we have) over the coming 3-4 years

This is an exciting but ambitious programme of work and we intend to send updates to all key partners/stakeholders in Darlington services as the work progresses

If you would like to discuss anything in more detail please don't hesitate to contact Jo Murray, Right Care Right Place Delivery Lead (Durham and Darlington), at jo.murray1@nhs.net

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RIGHT CARE, RIGHT PLACE (DURHAM AND DARLINGTON)

Name:

I work/live in (please circle):

Derwentside	Durham	Chester le Street	Darlington
Easington	Sedgefield	Dales	

I am (please circle):

Service User	Carer/Family Member	Primary Care	Local Authority	Voluntary Sector
TEWV staff	Police	CDDFT	Other (please specify)	

What 2 things (big or small) could we do that would make the biggest difference to people who might need help with their mental health?

1.

2.

RIGHT CARE, RIGHT PLACE (DURHAM AND DARLINGTON)

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2.

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Healthwatch Darlington

Annual Report 2018/19

29th August 2019

Our vision is simple

Health and care that works for you. People want health and care support that works - helping them to stay well, get the best out of services and manage any conditions they face.



Our purpose

To find out what matters to you and to help make sure your views shape the support you need.



Our approach

People's views come first - especially those that find it hardest to be heard. We champion what matters to you and work with others to find solutions. We are independent and committed to making the biggest difference to you.



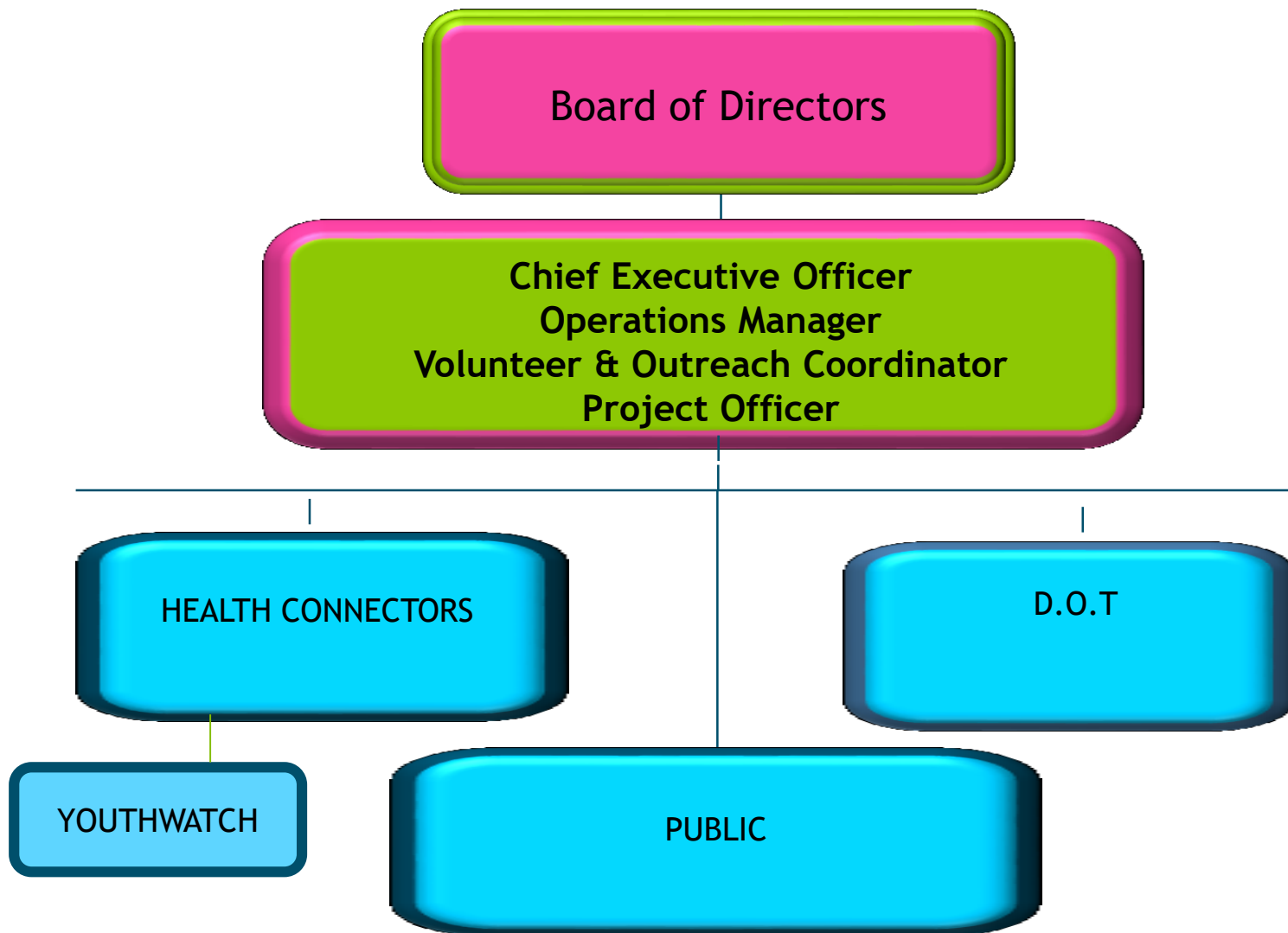
“No matter who you are, how old you are, or where you live, you do have a voice and you have the right for that voice to be heard”

Our main job is to raise people’s concerns with health and care decision-makers so that they can improve support across our locality. The evidence we gather also helps us recommend how policy and practice can change for the better.

We do this by:

- Visiting services to see how they work
- Running surveys and focus groups
- Going out in the community and working with other organisations
- Meeting with providers and their commissioners to consider and act upon the views, experiences and needs we present.
- Providing information and signposting people to local services including the voluntary and community sector.

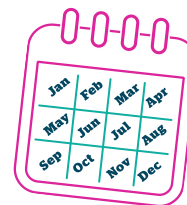
HWD 2018/19 Structure



Highlights from 2018/19



880 people shared their health and social care story with us via our surveys and outreach activity.



We have 23 volunteers helping to carry out our work. In total, they gave up 1602 hours.



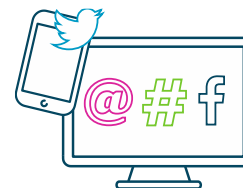
279 people accessed Healthwatch signposting and information online or contacted us with questions about local support.



We visited 42 services and 7 community events to understand people's experiences of care.



We recommended 35 improvements were adopted by services to make health and care better in our community.



288,971 people engaged with us through our website and social media.

How we've made a difference

- Tackling barriers to accessing mental health services for people with an addiction
Full report here: [Substance Misuse Report 2018](#)
- Children and Young People Mental Health Services
Full report here: [CYP MH Report](#)
- Black, Minority, and Ethnic Communities (BME) GP Registration & Accessibility
Full report here: [GP BME Report 2018](#)
- Enter and View Programme for County Durham and Darlington Foundation Trust
Full report here : [Hospital Enter and View](#)

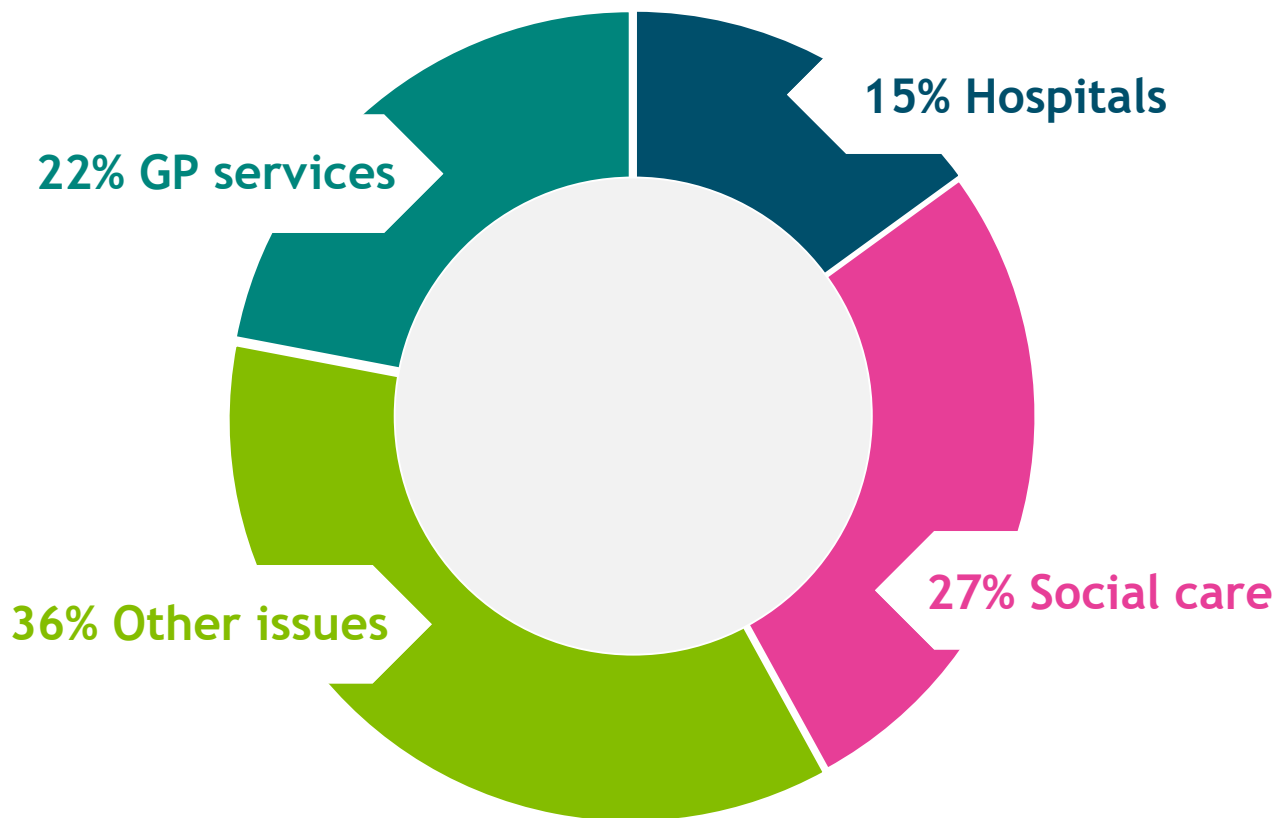
How we've made a difference

- Stroke Services
- What's it like to live in a care home?
- Improving Access to Psychological Therapies (IAPT)
- Great North Care Record
- Healthwatch Collaboration across the North East - NHS Long Term Plan

What services do people want to know about?

People don't always know how to get the information they need to make decisions about their own health and care. Healthwatch plays an important role in providing advice and pointing people in the right direction for the support they need.

Here are the most common things that people ask us:



How we provide people with advice and information

Finding the right care or support can be worrying and stressful. There are many organisations that can provide help, but people don't know where to look. That's where we come in! Last year we helped **279** people access the advice and information they need.

You can come to us for advice and information in a number of ways including:

- + Specific advice and information online
- + Our contact us form
- + At community events
- + Promoting helpful services across our social media channels and weekly e-bulletin
- + Over the phone, email or post.

Health Connectors

Our volunteer Health Connector programme between 2nd January 2018 - 31st March 2018 has consisted of:

- Volunteer Strategy developed
- Volunteer & Outreach Action Plan developed
- Volunteer Recruitment pack created
- Volunteer recognition scheme created
- Health Connector logo established.
- Volunteer training programme created.

Our Website development has included;

- Meet the Health Connectors team page
- Testimonials and feedback section
- Recruitment pack and roles section
- Volunteer of the month recognition



Our volunteers



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At Healthwatch Darlington we couldn't make all of these improvements without the support of our **23** volunteers that work with us to help make care better for their communities.

- + Raise awareness of the work we do in the community
- + Visit services to make sure they're meeting people's needs
- + Support our day to day running e.g. governance
- + Collect people's views and experiences which we use in our reports



Youthwatch

- ❖ Improve information and signposting available for young patients in the local area
- ❖ Listen to young patients views and experiences
- ❖ Gather views and experiences
- ❖ Support and represent young people's voice for health and social care in Darlington
- ❖ Raise awareness online via our social media platforms increasing our reach

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Loneliness in Young People

Just like many of the elderly, a lot of young people experience loneliness throughout the year. In fact, it is a lot more common than you would think!

Talk to us...

Causes
 Living alone
 Homelessness
 Stressful events
 Low self esteem
 Having a disability
 Bullying and intimidation
 Friends moving away
 Friends or family problems
 Leaving school, college or work
 Domestic violence/abuse
 Stay at home parent

Impacts
 Eating issues
 Substance misuse
 Sleep disturbance
 Cognitive deterioration
 Stress
 Anxiety
 Depression
 Paranoia

Solutions
 Tell family/friends how you feel
 Join a community social group
 Join a club or hobby group
 Join a volunteering group
 Talk to someone, anyone
 Develop new routines
 Go for a walk outside
 Practice yoga

Further help
 bbc.com/ownit
 (Online wellbeing)
 Humankindcharity.org.uk
 (Darlington young carers)
 Youngminds crisis text line:
 85258
 Do-it.org
 (Volunteering opportunities)
 Samaritans:
 116 123

Social Media and Your Wellbeing
 Social media can be a great tool for reducing loneliness for young people. However, it is important to remember, for people who are experiencing low mood and isolation, this can have the opposite effect, as we can be led to think that other people's lifestyles are much better than ours. This is often incorrect but it can leave us feeling inadequate.



Contact us: 01325 380145
j.austin@healthwatchdarlington.co.uk

Created by Youthwatch Darlington, a volunteering group, for 14 - 25 year olds.



Volunteers improve the information available for young patients in local GP surgeries



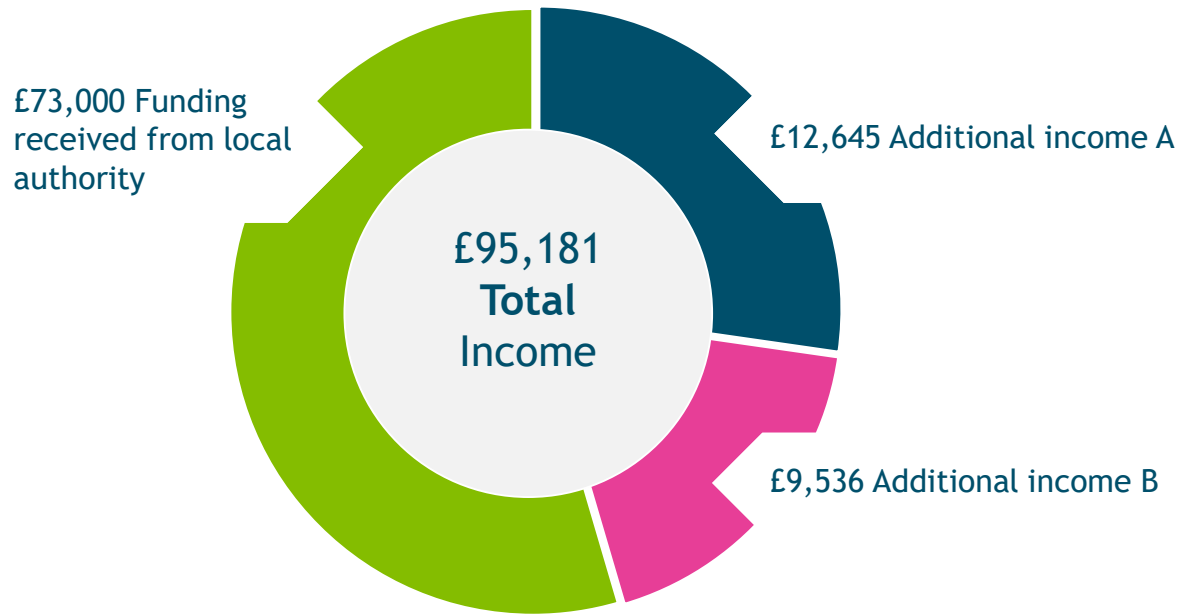
Our young volunteers were asked by a local GP practice manager to visit their surgery. The surgery wanted their input and ideas to improve the information available for young patients within the waiting areas.

Thanks to our young volunteers' feedback and ideas the surgery now have a brand-new display area for young patients which features information on mental health, carers, sexual health, local support groups and healthy living.

Furthermore, the surgery now has recommendations on where to order leaflets and what to include on their website for young patients.

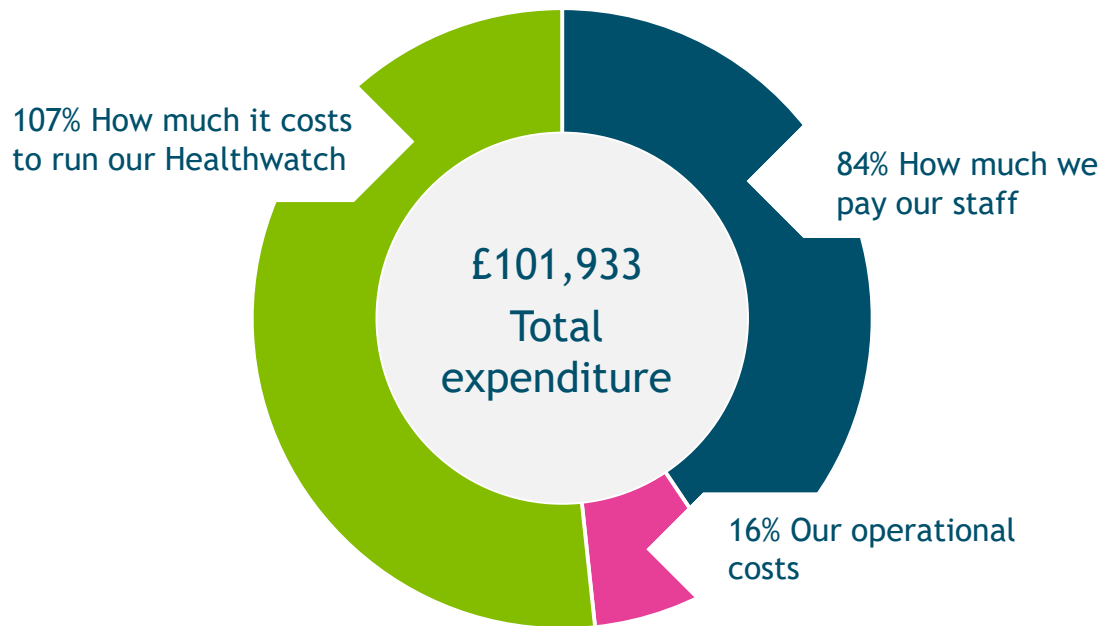
Our finances

- To help us carry out our work, we are funded by our local authority and we received £73,000. We also received £22,181 of additional income from public and third sector organisations



Our finances

- In 2018-19 we spent £101,933 which meant we spent some of our reserves.



Our plans for this year

Our “What’s Important to You?” survey as well as information gathered at our community outreach has informed our work plan for 2019/20:

- ❖ Children and young people’s mental health
- ❖ Learning disabilities
- ❖ Primary care access,
- ❖ Hospital discharge services
- ❖ Seldom heard groups.

ANY QUESTIONS?

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HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE 29 AUGUST 2019

WORK PROGRAMME

SUMMARY REPORT

Purpose of the Report

1. To consider the work programme items scheduled to be considered by this Scrutiny Committee during the 2019/20 Municipal Year and to consider any additional areas which Members would like to suggest should be added to the previously approved work programme.

Summary

2. Members are requested to consider the attached draft work programme (**Appendix 1**) for the remainder of the 2019/20 Municipal Year which has been prepared based on Officers recommendations and recommendations previously agreed by this Scrutiny Committee in the last Municipal Year.
3. Any additional areas of work which Members wish to add to the agreed work programme will require the completion of a quad of aims in accordance with the previously approved procedure (**Appendix 2**).

Recommendations

4. It is recommended that Members note the current status of the Work Programme and consider any additional areas of work they would like to include.
5. Members' views are requested.

Paul Wildsmith
Managing Director

Background Papers

No background papers were used in the preparation of this report.

Author: Hannah Fay

S17 Crime and Disorder	This report has no implications for Crime and Disorder
Health and Well Being	This report has no direct implications to the Health and Well Being of residents of Darlington.
Carbon Impact	There are no issues which this report needs to address.
Diversity	There are no issues relating to diversity which this report needs to address
Wards Affected	The impact of the report on any individual Ward is considered to be minimal.
Groups Affected	The impact of the report on any individual Group is considered to be minimal.
Budget and Policy Framework	This report does not represent a change to the budget and policy framework.
Key Decision	This is not a key decision.
Urgent Decision	This is not an urgent decision
One Darlington: Perfectly Placed	The report contributes to the Sustainable Community Strategy in a number of ways through the involvement of Members in contributing to the delivery of the eight outcomes.
Efficiency	The Work Programmes are integral to scrutinising and monitoring services efficiently (and effectively), however this report does not identify specific efficiency savings.
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers

MAIN REPORT

Information and Analysis

6. The format of the proposed work programme, attached at **Appendix 1** has been reviewed to enable Members of this Scrutiny Committee to provide a rigorous and informed challenge to the areas for discussion.
7. Each topic links to the outcomes and the conditions in the Sustainable Community Strategy – One Darlington Perfectly Placed:-

SCS Outcomes:

- a) Children with the best start in life
- b) More businesses more jobs
- c) A safe and caring community
- d) More people caring for our environment
- e) More people active and involved
- f) Enough support for people when needed
- g) More people healthy and independent
- h) A place designed to thrive

Three Conditions:

- a) Build strong communities
- b) Grow the economy
- c) Spend every pound wisely

8. In addition, each topic links to performance indicators from the Performance Management Framework (PMF) to provide robust and accurate data for Members to use when considering topics and the work they wish to undertake. There are some topics where appropriate PMF indicators have not yet been identified however; these can be added as the work programme for each topic is developed.

Forward Plan and Additional Items

9. Once the Work Programme has been agreed by this Scrutiny Committee, any Member seeking to add a new item to the work programme will need to complete a quad of aims, attached at **Appendix 2**.
10. A copy of the Forward Plan has been attached at **Appendix 3** for information.

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HEALTH AND PARTNERSHIPS SCRUTINY COMMITTEE WORK PROGRAMME

No.	Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
1	<p>Performance Management and Regulation/ Management of Change</p> <p>Regular Performance Reports to be Programmed</p>	Quarter 2 - 5 December 2019	Relevant AD	<p>A safe and caring community</p> <p>Children with the best start in life</p> <p>More people healthy and independent</p> <p>More people healthy and independent</p>	<p>Build strong communities.</p> <p>Spend every pound wisely</p>	Full PMF suite of indicators	To receive biannual monitoring reports and undertake any further detailed work into particular outcomes if necessary
2	<p>Monitoring Outcomes from the Medium Term Financial Plan 2016-20</p> <p>Impact of ceasing/ reducing the following and has there been any cost shunting to other areas within the Council as a result of:-</p>		Miriam Davidson/ Christine Shields	<p>A safe and caring community</p> <p>Children with the best start in life</p> <p>More people healthy and independent</p>	<p>Build strong communities.</p> <p>Spend every pound wisely</p>	Full PMF suite of indicators	To receive monitoring reports and undertake any further detailed work into particular outcomes if necessary

No.	Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
(a)	Voluntary Sector Funding	Update report 31 October 2019 Last considered 19 December 2018 and 4 July 2018	Christine Shields				To update Members following the monitoring and evaluation of this funded projects
(b)	Healthwatch Darlington - Streamlined Service offered by HWD since April 2017	The Annual Report of Healthwatch Darlington 29 August 2019	Michelle Thompson, HWD				To scrutinise and monitor the service provided by Healthwatch – Annual
3 (a)	Integrated Care System (ICS) (Formerly Sustainability and Transformation Plan (STP) including the Better Health Programme (BHP))	Engagement and Communicatio n Strategy – To be confirmed Last reported 13 March 2019	Gillian Curry, Head of Comms and Charity, CDDFT Nicola Bailey CCG	More people healthy and independent	Spending Every Pound Wisely Build Strong Communities		To scrutinise and challenge progress of the principles underpinning the ICS and BHP and timelines for progress
(b)	NHS Clinical Commissioning Group	Last considered 4 July 2018	Mark Pickering, NHS	More people healthy and independent	Build Strong Communities		To scrutinise and monitor the CCG to ensure delivery of the

No.	Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
	Financial Challenges and Impact on Services	Updates to be provided when available	Darlington CCG		Spending Every Pound Wisely		necessary QIPP required in order to achieve its financial duties and service delivery 2018/19
4	CCG Stroke Services/Review of Stroke Rehabilitation Services	Feedback report on consultation 29 August 2019 Update on public consultation - 13 March 2019	Katie McLeod CCG	More people healthy and independent	Spending Every Pound Wisely	To be determined	To scrutinise and challenge the CCG's and review of Stroke Rehabilitation Services in the community following discharge from Bishop Auckland Hospital
5	Director of Public Health Annual Report 2018/19 and 2019 Health Profile	5 December 2019	Miriam Davidson	More people healthy and independent			Annual report

No.	Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
6 (a)	<p>Primary Care (to include GP Access to appointments)</p> <p>To include:-</p> <p>Digital Health (formerly Telehealth)</p> <p>New Models of Care</p> <p>To include: the vision and proposals for Community Hubs around Darlington.</p>	<p>Update on new GP contract – 31 October 2019</p> <p>Last considered 19 December 2018 ; and by Review Group 16 Nov 2016</p> <p>Last considered 14 February 2018</p>	<p>Rebecca Thomas CCG/ Amanda Riley PCN</p> <p>Ian Dove CDDFT</p> <p>Karen Hawkins, CCG</p>	<p>More people healthy and independent</p> <p>More people active and involved</p>	<p>Build Strong Communities</p> <p>Spending Every Pound Wisely</p>		<p>To scrutinise development around Primary Care Network and GP work, including digital health and its application, including signposting to services.</p> <p>To scrutinise and challenge new Models of Primary Care</p>

No.	Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
(c)	Social Prescribing and NHS Long Term View	Last considered 12 Sep 2018 Progress report on new model to be provided in 6 months' time	Karen Hawkins CCG	More people healthy and independent	Spending Every Pound Wisely Build Strong Communities	To be determined	
(d)	The role of Health Navigators	Last considered 14 Feb 2018		More people healthy and independent	Spending Every Pound Wisely Build Strong Communities		
7	Crisis Service Changes	29 August 2019	Levi Buckley TEWV				To receive a briefing and undertake any further detailed work if necessary.

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No.	Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
8	Right Care, Right Place	29 August 2019	Levi Buckley TEWV				To receive a briefing and undertake any further detailed work if necessary.

JOINT COMMITTEE WORKING – ADULTS AND HOUSING SCRUTINY COMMITTEE

	Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
9	<p>End of Life and Palliative Care – To include the Dementia End of Life Pathway</p> <p>Health and Partnerships to lead</p>	<p>Date to be advised</p> <p>Scoping Meeting held 25Apr17.</p> <p>Work undertaken in 2018 and 2019 with support from Dr Malcolm Moffatt of Public Health.</p>	CDDFT/CCG	<p>A safe and caring community</p> <p>Enough support for people when needed.</p>	<p>Spending Every Pound Wisely</p> <p>Build Strong Communities</p>	To be determined	To scrutinise the provision of end of life care for people suffering from dementia across all agencies and service providers

JOINT COMMITTEE WORKING – CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE

	Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
10	Childhood Healthy Weight Plan (Childhood Obesity Strategy) Children and Young People to lead	5 December 2019 27 November 2017. Interim report to Cabinet 11 September 2018.	Ken Ross	Children with the best start in life	Spending Every Pound Wisely Build Strong Communities	To be determined	To review the effectiveness of the Childhood Healthy Weight Plan on childhood obesity and mental health links in children and young people.

ARCHIVED ITEMS

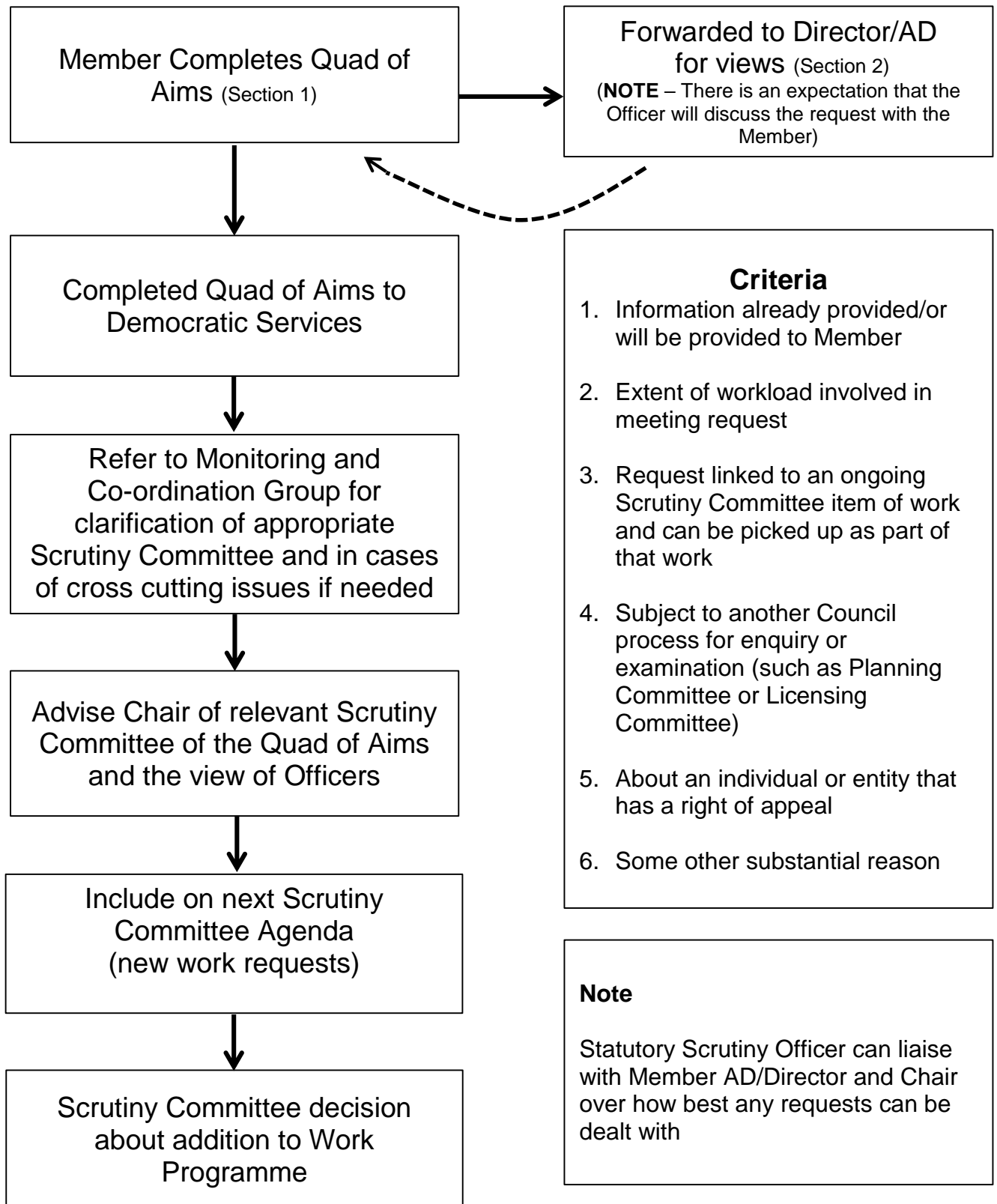
Topic	Timescale	Lead Officer/ Organisations Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
Access to GP Appointments /GP Survey Results	Last considered 11 April 2018	Karen Hawkins/ Graeme Niven Darlington CCG	More people healthy and independent	Spending Every Pound Wisely Build Strong Communities	To be determined	To gather, collate and assess evidence of accessing GP appointments taking into consideration the two new schemes implemented as part of the Prime Minister's Challenge Fund. To scrutinise the results of the GP Survey
Pain Management	Last considered 31 October 2018; and 6 Sept 207 as part of the Regional Back Pain Pathway Programme	Karen Hawkins CCG	More people healthy and independent More people active and involved	Spending Every Pound Wisely Build Strong Communities	To be determined	To scrutinise and challenge the pain management pathway
Social Fund Arrangements	Last considered by Scrutiny 1 Nov 2017	Neeraj Sharmah, Citizens Advice Bureau				

Darlington Partnerships Overview and Local Strategic Partners	Last considered 13 March 2019	Seth Pearson				Update on progress of the Darlington Partnership.
Winter Pressures (MTFP 2019/20)	Considered 13 March 2019	James Stroyan				To scrutinise the additional spend on winter pressures.
Integrated Care System (ICS) (Formerly Sustainability and Transformation Plan (STP) including the Better Health Programme (BHP)) To incorporate - Discharge to Assess and Discharge Management To include Maternity Services	Last considered 20 December 2017	DBC/CCG/ CDDFT Sue Jacques CDDFT	More people healthy and independent More people healthy and independent Children with the best start in life	Spending Every Pound Wisely Build Strong Communities	To be determined To be determined	To scrutinise the processes around discharge To receive regular updates and assurances with regard to maternity services
Substance Use/Misuse – Drugs and Alcohol (to include the promotion	Date to be confirmed					

of non alcoholic drinks)						
JOINT COMMITTEE WORKING – ADULTS AND HOUSING SCRUTINY COMMITTEE						
Community Equipment Loan Service (CELS) Adults and Housing to lead	Members of A&H Scrutiny updated H&P Scrutiny following a visit to Mediquip 21 June 2017	Darlington CCG	More people healthy and independent	Spend Every Pound Wisely	To be determined	To scrutinise and monitor the spend and review the operation of the contract following its award in 2015.
Domiciliary Care Adults and Housing to lead		CDDFT HWD looking at Domiciliary Care	More people healthy and independent	Spend Every Pound Wisely Build Strong Communities	To be determined	To scrutinise and challenge processes in place
JOINT COMMITTEE WORKING – CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE						
Mental Health and Wellbeing for Children and Young People in Darlington		Ken Ross	More people healthy and independent More people active and involved	Spending Every Pound Wisely Build Strong Communities	To be determined	To examine CAMHS Service

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PROCESS FOR ADDING AN ITEM TO SCRUTINY COMMITTEE'S PREVIOUSLY APPROVED WORK PROGRAMME



PLEASE RETURN TO DEMOCRATIC SERVICES

QUAD OF AIMS (MEMBERS' REQUEST FOR ITEM TO BE CONSIDERED BY SCRUTINY)

SECTION 1 TO BE COMPLETED BY MEMBERS

NOTE – This document should only be completed if there is a clearly defined and significant outcome from any potential further work. This document should **not** be completed as a request for or understanding of information.

REASON FOR REQUEST?	RESOURCE (WHAT OFFICER SUPPORT WOULD YOU REQUIRE?)
PROCESS (HOW CAN SCRUTINY ACHIEVE THE ANTICIPATED OUTCOME?)	HOW WILL THE OUTCOME MAKE A DIFFERENCE?

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Signed Councillor

Date

SECTION 2 TO BE COMPLETED BY DIRECTORS/ASSISTANT DIRECTORS

(NOTE – There is an expectation that Officers will discuss the request with the Member)

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	Criteria
1. (a) Is the information available elsewhere? Yes No If yes, please indicate where the information can be found (attach if possible and return with this document to Democratic Services)	1. Information already provided/or will be provided to Member
(b) Have you already provided the information to the Member or will you shortly be doing so?	2. Extent of workload involved in meeting request
2. If the request is included in the Scrutiny Committee work programme what are the likely workload implications for you/your staff?	3. Request linked to an ongoing Scrutiny Committee item of work and can be picked up as part of that work
3. Can the request be included in an ongoing Scrutiny Committee item of work and picked up as part of that?	4. Subject to another Council process for enquiry or examination (such as Planning Committee or Licensing Committee)
4. Is there another Council process for enquiry or examination about the matter currently underway?	5. About an individual or entity that has a right of appeal
5. Has the individual or entity some other right of appeal?	6. Some other substantial reason
6. Is there any substantial reason (other than the above) why you feel it should not be included on the work programme?	

Signed **Position** **Date**

PLEASE RETURN TO DEMOCRATIC SERVICES

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**FORWARD PLAN
FOR THE PERIOD: 7 AUGUST 2019 - 31 DECEMBER 2019**



What is a Forward Plan?

The Forward Plan is a list of all of the decisions, which are due to be taken by Cabinet, including key decisions taken by Cabinet a Member of the Cabinet or a designated Officer in accordance with the Local Authorities (Executive Arrangements) (Access to Information) (England) Regulation 2012. It also gives notice of the decisions that are likely to be taken in private. These decisions need to be published on the Forward Plan at least 28 clear days before the decision is to be taken. The Plan is updated on an ad hoc basis, but at least once a month. It can be accessed on the Council website www.darlington.gov.uk.

What is a Key Decision?

A key decision in the Council's constitution is defined as to:

1. result in the Borough Council incurring expenditure which is, or the making of savings which are, significant having regard to the budget for the service or function to which the decision relates; or
2. be significant in terms of its effects on communities living or working in an area comprising one or more wards in the Borough.

What are the reasons that a report can be held in private?

Whilst the majority of the Executive decisions listed in this Forward Plan will be open to the public and media organisations to attend, there will inevitably be some decisions to be considered that contains, for example, confidential, commercially or personal information.

The Forward Plan is a formal notice under the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 that some of the decisions listed in this Forward Plan will be held in private because the report will contain exempt information under Schedule 12A of the Local Government Act 1972 (set out below) and that the public interest in withholding the information outweighs the public interest in disclosing it.

1. Information relating to any individual
2. Information which is likely to reveal the identity of an individual
3. Information relating to the financial or business affairs of any particular person (including the authority holding that information)
4. Information relating to any consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office holders under the authority
5. Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings
6. Information which reveals that the authority proposes:—
 - (a) to give under any enactment a notice under or by virtue of which requirements are imposed on a person; or

DARLINGTON BOROUGH COUNCIL FORWARD PLAN

- (b) to make an order or direction under any enactment
7. Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime.

Who takes Key Decisions?

Under the Council's constitution, key decisions are taken by Cabinet.

Are only Key Decisions listed in the Forward Plan?

The Council only has a statutory obligation to publish key decisions and decisions that are to be heard at a private meeting, however, all decisions to be taken by Cabinet are included on the plan to give Scrutiny Committees and the public an early indication of decisions to be made.

What does the Forward Plan tell me?

The Plan gives information about:

- What decisions are coming up
- What key decisions are coming up
- When those decisions are likely to be made
- Which decisions will be held in private
- Who will make those decisions
- The relevant Scrutiny Committee that the decision relates to
- What consultation will be undertaken
- Whether the decision will be an open or closed report (and the reason why) (public and press are not allowed to access closed reports and will not be able to stay in the Cabinet meeting when a closed report is being considered)
- Who you can contact for further information

How to make representations

Members of the public have a right to make representations to the Council, including whether they think that any items we are proposing to consider in private should be dealt with in public. The Council will consider any representations before a decision is taken.

Anyone who wishes to make representations to the decision maker about a particular matter should do so in writing, at least a week before it is due to be considered, either by letter or email to Lynne Wood using the contact details set out below.

How and who do I contact?

Each entry in the Plan indicates the names of all the relevant people to contact about that particular item.

For general information about the decision-making process and for copies of any documents outlined in the Forward Plan please contact Lynne Wood, Elections Manager, Democratic Services, Resources Group, Town Hall, Feethams, Darlington, DL1 5QT. Tel: 01325 405803. Email: lynne.wood@darlington.gov.uk.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

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**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

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**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Haughton Children's Centre

Brief Description

To consider the proposed lease arrangement of the Haughton Children's Centre to the Education Village Academy Trust to provide Special Educational Needs and Disabilities (SEND) placements at Beaumont Hill Academy.

Decision Type

Key

Decision Status

For Determination

Urgent Decision

Yes

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Children and Young People Scrutiny Committee

Relevant Cabinet Member(s)

Children and Young People Portfolio

Contact Officer/Report Author

Tony Murphy, Head of Education and Inclusion
Tony.Murphy@darlington.gov.uk

Department

Childrens and Adults

Wards Affected

Haughton and Springfield

Consultation Process

Meetings and communications.

Document to be submitted

Report

DARLINGTON BOROUGH COUNCIL FORWARD PLAN

Title

In2 Project

Brief Description

To support young people in their transition from Yr6 primary school to Yr7/8 secondary school from some of the deprived Wards within the Borough

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee**Relevant Cabinet Member(s)**

Economy and Regeneration Portfolio

Contact Officer/Report Author

Ian Thompson, Assistant Director Community Services
Ian.Thompson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

Bank Top and Lascelles; Eastbourne; Harrowgate Hill; North Road; Northgate; Stephenson

Consultation Process

Meetings and communications

Document to be submitted

Report

DARLINGTON BOROUGH COUNCIL FORWARD PLAN

Title

Treasury Management Annual Report and Outturn Prudential Indicators 2018/19

Brief Description

Report providing information on the regulation and management of the Council's borrowing, investments and cash-flow and requesting approval of the Prudential Indicators.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Peter Carrick, Finance Manager Central/Treasury Management
peter.carrick@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Replacement of Dog Control Orders with Public Space Protection Orders

Brief Description

To request approval to commence consultation with the public regarding converting the existing Dog Control Orders into Public Space Protection Orders.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Economy and Regeneration Portfolio

Contact Officer/Report Author

Ian Thompson, Assistant Director Community Services
ian.thompson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

8 week public consultation - Police, Crime and Victim Commissioner and Police will also be consulted

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Release of Capital Allocation in the Medium Term Financial Plan

Brief Description

Release of capital for the Town Hall Toilet Refurbishment in Block D and Access Points in Customer Contact Centre.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Kelvin McDade

kelvin.mcdade@dalington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

Park East

Consultation Process

Internal communication

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Regulatory Investigatory Powers Act (RIPA)

Brief Description

To inform and update Members about issues relevant to the use of the Regulation of Investigatory Powers Act 2000 and developments and recent developments

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Amy Wennington, Principal Lawyer (Litigation)
amy.wennington@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Public Spaces Protection Order (PSPO) Monitoring Report

Brief Description

To update Members on the actions taken with regard to the recently introduced PSPO for the town centre.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Community Safety Portfolio

Contact Officer/Report Author

Ian Thompson, Assistant Director Community Services
Ian.Thompson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

College; Northgate; Park East; Park West

Consultation Process

None

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Annual Review of the Investment Fund

Brief Description

To provide an update on the schemes and projects agreed by Cabinet to be being funded from the £50m investment fund.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Elizabeth Davison, Assistant Director Resources
elizabeth.davison@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report

DARLINGTON BOROUGH COUNCIL FORWARD PLAN

Title

Review of Complaints to the Ombudsman

Brief Description

To provide Members with an update of the outcome of cases which have been determined by the Local Government, Social Care Ombudsman (LGSCO) and the Housing Ombudsman (HO)

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Leader of the Council

Contact Officer/Report Author

Lee Downey, Complaints and Information Governance Manager
lee.downey@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Complaints, Compliments and Comments Annual Reports 2017/18

Brief Description

To consider the annual complaints, compliments and comments annual reports for Adult Social Care, Children's Social Care, Corporate, Housing and Public Health.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Adults and Housing Scrutiny Committee, Children and Young People Scrutiny Committee, Efficiency and Resources Scrutiny Committee, Health and Partnerships Scrutiny Committee, Place Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Lee Downey, Complaints and Information Governance Manager
lee.downey@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report and complaints reports.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Special Education Needs & Disability Capital Project Release of Funds

Brief Description

Request for authorisation for the release of Capital Funds for two new Special Educational Needs and Disability Units.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Children and Young People Scrutiny Committee

Relevant Cabinet Member(s)

Children and Young People Portfolio

Contact Officer/Report Author

Paul Richardson, Head of Skills and Employability
paul.richardson@darlington.gov.uk

Department

Childrens and Adults

Wards Affected

All Wards

Consultation Process

Follow up from consultation on SEND Strategy

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Sale of Four Riggs Car Park, off Bondgate, Darlington

Brief Description

To seek Cabinet approval for the sale of land at Four Riggs Car Park.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Fully exempt 3 Information relating to the financial or business affairs of any particular person (including the authority holding that information)

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Richard Adamson, Estates Officer
Richard.Adamson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

Northgate

Consultation Process

Internal communication.
External consultation as part of normal planning process.

Document to be submitted

Report

DARLINGTON BOROUGH COUNCIL FORWARD PLAN

Title

Schedule of Transactions

Brief Description

To consider the Schedule of Transactions and seek approval of the terms negotiated. (NOTE - this report is included on the agenda for each meeting of Cabinet but there are not always transactions to consider)

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Fully exempt 3 Information relating to the financial or business affairs of any particular person (including the authority holding that information)

Decision Maker

Cabinet

Date of Decision

10 Sep 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Guy Metcalfe, Head of Service for Asset Management and Investment
Guy.Metcalfe@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report and Schedule of Transactions.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Fairer, Richer Darlington

Brief Description

Tackling poverty and inequalities in Darlington by supporting local wealth creation that benefits all residents.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

8 Oct 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Seth Pearson, Partnership Director
seth.pearson@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

Methods

Document to be submitted

Report

DARLINGTON BOROUGH COUNCIL FORWARD PLAN

Title

Permit System to Manage and Co-ordinate Roadworks

Brief Description

An update on work to develop a permit scheme for roadworks coordination that Councils across the country are being required to consider by the Department for Transport.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

8 Oct 2019

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Leisure and Local Environment Portfolio

Contact Officer/Report Author

Dave Winstanley, Assistant Director Capital Projects, Transport and Highways Planning
dave.winstanley@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

Meetings and correspondence.

Document to be submitted

Cabinet Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Tees Valley Joint Waste Management Contract

Brief Description

To approve the outline business case for Waste Management post 2025 and the associated inter-authority agreement.

Decision Type

Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

8 Oct 2019

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Leisure and Local Environment Portfolio

Contact Officer/Report Author

Ian Thompson, Assistant Director Community Services
ian.thompson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

N/A

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Darlington Crematorium Refurbishment

Brief Description

To present the options to Members to consider regarding refurbishment of the existing Crematorium in West Cemetery.

Decision Type

Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

8 Oct 2019

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Leisure and Local Environment Portfolio

Contact Officer/Report Author

Ian Thompson, Assistant Director Community Services
Ian.Thompson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

Meetings and survey.

Document to be submitted

Cabinet Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Rail Heritage Quarter

Brief Description

To present the outcome of work to date on the Rail Heritage Quarter, timeline for implementation and funding strategy.

Decision Type

Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

8 Oct 2019

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Leisure and Local Environment Portfolio

Contact Officer/Report Author

Ian Thompson, Assistant Director Community Services
ian.thompson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

Various

Document to be submitted

Report and Master Planning Documents.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Joint Venture Proposal with Esh Homes

Brief Description

Proposal for New Sites outside the Darlington Boundaries.

Decision Type

Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

8 Oct 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Elizabeth Davison, Assistant Director Resources
elizabeth.davison@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report

DARLINGTON BOROUGH COUNCIL FORWARD PLAN

Title

Housing Allocation Policy

Brief Description

Changes are being made to the Tees Valley Allocation Policy to both reflect the legislative requirements around the Homeless Reduction Act 2017 and ensure the policy is clear and transparent for applicants.

Decision Type

Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

8 Oct 2019

Relevant Scrutiny Committee

Adults and Housing Scrutiny Committee

Relevant Cabinet Member(s)

Housing, Health and Partnerships Portfolio

Contact Officer/Report Author

Janette McMain

Janette.McMain@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

Public consultation has been undertaken via a press release and survey around the Common Allocations Policy, with website links to the survey on the Compass and DBC's websites. The survey has been widely circulated to staff in Housing and Housing Providers/Housing related providers asking they encourage their staff and customers to complete the survey.

Document to be submitted

Report and Housing Allocation Policy.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Library Service Update

Brief Description

To present proposals to Members for the refurbishment of Crown Street Library and proposed service.

Decision Type

Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

5 Nov 2019

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Leisure and Local Environment Portfolio

Contact Officer/Report Author

Ian Thompson, Assistant Director Community Services
ian.thompson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

Meetings / discussions.

Document to be submitted

Cabinet Report and Library Plan

DARLINGTON BOROUGH COUNCIL FORWARD PLAN

Title

Council Tax Empty Property Premium

Brief Description

To consider and approve changes to the Council Tax Empty Property Premium from April 2020.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

5 Nov 2019

Council

5 Dec 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Anthony Sandys, Head of Housing and Revenues
anthony.sandys@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

Letter and e-mail.

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Council Tax Support - Scheme Approval 2019.20

Brief Description

To consider and approve a draft Council Tax Support Scheme.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

5 Nov 2019

Council

5 Dec 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Anthony Sandys, Head of Housing and Revenues
anthony.sandys@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report and Council Tax Support Scheme.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Revenue Budget Monitoring - Quarter 2

Brief Description

To provide an up to date forecast of the revenue budget outturn as part of the Council's continuous financial management process.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

5 Nov 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Peter Carrick, Finance Manager Central/Treasury Management
peter.carrick@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Project Position Statement and Capital Programme Monitoring - Quarter 2

Brief Description

To provide information on the delivery of the Council's Capital Programme, the financial outturn position, financing of Capital expenditure and an update on the current status of all construction projects currently being undertaken.

Decision Type

Non-Key

Decision Status

For Determination

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

5 Nov 2019

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Peter Carrick, Finance Manager Central/Treasury Management, Brian Robson, Head of Capital Projects
peter.carrick@darlington.gov.uk, brian.robson@darlington.gov.uk

Department

Resources

Wards Affected

All Wards

Consultation Process

None

Document to be submitted

Report

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Items Due for Consideration with no agreed Cabinet date

Title

Darlington Borough Local Plan 2016/36 - Proposed Submission

Brief Description

To agree the final draft of the Local Plan to advertise for representations and ultimately submit for examination.

Decision Type

Non-Key

Decision Status

Item Deferred

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

Council

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Economy and Regeneration Portfolio

Contact Officer/Report Author

David Hand, Head of Service for Planning Policy, Economic Strategy and Environment

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Department

Economic Growth and Neighbourhood Services

Wards Affected

All Wards

Consultation Process

Legal duty to seek representations prior to submission to Government for examination. Email and Letter and use of the Council's consultation portal.

Document to be submitted

Report and draft Local Plan

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Faverdale Masterplan Report

Brief Description

Approval of supporting documents for Local Plan Submission Draft.

Decision Type

Key

Decision Status

Item Deferred

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

Council

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Economy and Regeneration Portfolio

Contact Officer/Report Author

David Nelson, Planning Officer
David.Nelson@darlington.gov.uk

Department

Economic Growth and Neighbourhood Services

Wards Affected

Harrowgate Hill

Consultation Process

Document to be made available on the Council's website.

Document to be submitted

Report and Masterplan Documents for Faverdale.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Skerningham Masterplan Report

Brief Description

Approval of supporting document for Local Plan Submission Draft

Decision Type

Key

Decision Status

Item Deferred

Urgent Decision

No

Anticipated Restriction

Open

Decision Maker

Cabinet

Date of Decision

Council

Relevant Scrutiny Committee

Place Scrutiny Committee

Relevant Cabinet Member(s)

Economy and Regeneration Portfolio

Contact Officer/Report Author

David Nelson, Planning Officer
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Department

Economic Growth and Neighbourhood Services

Wards Affected

Harrowgate Hill; Haughton and Springfield; Sadberge and Middleton St. George;
Whinfield

Consultation Process

Document to be made available on the Council's website

Document to be submitted

Report and Masterplan Document for Skerningham.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Title

Proposed Sale of Land at High Faverdale

Brief Description

To seek Cabinet approval of a proposed sale of land at High Faverdale.

Decision Type

Key

Decision Status

Item Deferred

Urgent Decision

No

Anticipated Restriction

Part exempt 3 Information relating to the financial or business affairs of any particular person (including the authority holding that information)

Decision Maker

Cabinet

Date of Decision

Relevant Scrutiny Committee

Efficiency and Resources Scrutiny Committee

Relevant Cabinet Member(s)

Efficiency and Resources Portfolio

Contact Officer/Report Author

Guy Metcalfe, Head of Service for Asset Management and Investment
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Department

Economic Growth and Neighbourhood Services

Wards Affected

Brinkburn and Faverdale

Consultation Process

None.

Document to be submitted

Cabinet Report.

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**