

# Health and Housing Scrutiny Committee Agenda



10.00 am Wednesday, 14  
April 2021  
Microsoft Teams

In accordance with Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020, this meeting will be held on a virtual basis. Members of the Public can view a live stream of the meeting at:

<https://www.darlington.gov.uk/livemeetings>

Members of the public wanting to raise issues/make representations at the meeting can do so by emailing [hannah.fay@darlington.gov.uk](mailto:hannah.fay@darlington.gov.uk) 24 hours before the meeting begin

1. Introduction/Attendance at Meeting
2. Declarations of Interest
3. To approve the Minutes of the meeting of this Scrutiny held on 3 March 2021 (Pages 3 - 6)
4. Tees, Esk and Wear Valley NHS Foundation Trust Quality Accounts 2020/21 and 2021/22 –  
Presentation by Head of Planning and Business Development, Tees, Esk and Wear Valleys NHS Foundation Trust  
(Pages 7 - 24)
5. COVID-19 in Darlington –  
Presentation by Director of Public Health  
(Pages 25 - 34)
6. Customer Engagement Strategy 2021/24 –  
Report of Director of Economic Growth and Neighbourhood Services  
(Pages 35 - 50)
7. Joint Autism Review Group –  
Report of Chair of Joint Autism Review Group

(Pages 51 - 62)

8. Work Programme –  
Report of Managing Director  
(Pages 63 - 84)
9. Health and Wellbeing Board –  
The Board met on 18 March 2021. The next meeting is scheduled for 24 June 2021.
10. 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 the meeting.
11. Questions



**Luke Swinhoe**  
**Assistant Director Law and Governance**

**Tuesday, 6 April 2021**

**Town Hall**  
**Darlington.**

**Membership**

Councillors Bell, Donoghue, Dr. Chou, Heslop, Layton, Lee, McEwan, Newall, Tostevin and Wright

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](mailto:hannah.fay@darlington.gov.uk) or telephone 01325 405801

## HEALTH AND HOUSING SCRUTINY COMMITTEE

Wednesday, 3 March 2021

**PRESENT** – Councillors Bell (Chair), Donoghue, Layton, Lee, McEwan, Newall, Tostevin and Wright

**APOLOGIES** – Councillor Heslop

**ABSENT** – Councillor Dr. Chou

**ALSO IN ATTENDANCE** – Councillors Mrs Culley, Keir (Local Services Portfolio), Tait, Michelle Thompson (Healthwatch Darlington) and Dan Jackson (North East and North Cumbria Integrated Care System)

**OFFICERS IN ATTENDANCE** – Penny Spring (Director of Public Health), Ken Ross (Public Health Principal) and Hannah Fay (Democratic Officer)

### HH46 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

### HH47 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST

#### (1) STRATEGIC FRAMEWORK AND BUSINESS PLAN

**RESOLVED** – That discussion on this item be deferred.

#### (2) QUALITY ACCOUNT 2020/21 AND 2021/22

**RESOLVED** – That discussion on this item be deferred.

### HH48 INTEGRATED CARE SYSTEM

The Director of Governance and Partnerships, North East and North Cumbria Integrated Care System gave a verbal update to Members on the next steps for Integrated Care Systems (ICS), following the publication of the Policy paper 'Integration and innovation: working together to improve health and social care for all'.

It was reported that the legislative process would proceed throughout this year and statutory status for ICS was expected by April 2022; all NHS organisations were obligated to develop plans for the next phase of COVID-19 response and service recovery; and that further guidance was anticipated from NHS England.

It was reported that there were 13 Local Authorities in the North East and North Cumbria ICS; the intentions to build on the existing arrangements in each of these areas; that in Darlington there were plans to consider role of the Health and Wellbeing Board and how a partnership board structure may be best set up, with the expectation that the Local Authority and Acute and Primary Care Providers would oversee local delivery with the overall aim of embedding support and strengthening place based arrangements.

Members were informed of the expectation for provider trusts to work in collaboration more formally; and that provider collaboration was well established in the North East.

It was anticipated that the name of the ICS body would be NHS North East and North Cumbria; that the ICS would have a triple aim duty to pursue better health and wellbeing, better quality of services, and sustainable use of NHS resources; and that the ICS would be accountable for the outcomes and health of the population, with the authority to delegate to a place level.

The ICS would be overseen by a twin board model consisting of an NHS Board, which would be accountable for NHS spend and performance; and an ICS Partnership Board, which would be a forum to agree co-ordinated action, provide direction for the early stages of ICS formation and would be responsible for developing a plan to address the health, social care and public health needs of the system.

Discussion ensued on the role of scrutiny; governance arrangements for the twin board model; the role of the Primary Care Network at a system level; and the involvement of the private sector.

The Chief Executive, Healthwatch reminded Members of the role of Healthwatch in delivering statutory duties for Local Authorities and urged all Local Authorities to give consideration to the role of Healthwatch at a place and system level.

**RESOLVED** – That the Director of Governance and Partnerships, North East and North Cumbria Integrated Care System be thanked for his informative update.

**HH49 TO APPROVE THE MINUTES OF THE MEETING OF THIS SCRUTINY HELD ON :-**

**(3) 16 DECEMBER 2020**

Submitted – The minutes (previously circulated) of the meeting of this Scrutiny Committee held on 16 December 2020.

**RESOLVED** – That the Minutes of the meeting of this Scrutiny Committee held on 16 December 2020 be approved as a correct record.

**(4) 13 JANUARY 2021**

Submitted – The minutes (previously circulated) of the meeting of this Scrutiny Committee held on 13 January 2021.

**RESOLVED** – That the Minutes of the meeting of this Scrutiny Committee held on 13 January 2021 be approved as a correct record.

**HH50 COVID-19 IN DARLINGTON**

The Public Health Principal gave a presentation updating Members on the Covid-19 situation in Darlington.

In introducing the presentation, the Director of Public Health summarised the position from the previous meeting of this Scrutiny Committee; advised members that a successful community testing programme was now in place; the NHS England Mass Vaccination centre opened at the Darlington Arena on 1 March, with the capacity to deliver 200-300 vaccinations per day; and that the Feethams House Vaccination Centre continued to deliver vaccinations.

It was reported that there were four tests applied at a national level to identify Darlington's position in relation to the Governments road map out of lockdown; these were Test 1 - The vaccine deployment programme continues successfully; Test 2 - Evidence shows vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated; Test 3 - Infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the NHS; and Test 4 - Our assessment of the risks is not fundamentally changed by new Variants of Concern.

Members noted that as of 28 February 2021, 32,214 Darlington residents had received their vaccine; 94 per cent of 70 year olds had received their first dose; and nine out of ten care residents had received their first dose.

It was reported that the bed occupancy rate for County Durham and Darlington NHS Foundation Trust had, since mid-January, started to decline; that ICU bed occupancy rates had also started to decline; and the rates of cases in those aged 60 and over were decreasing and levelling out.

Members were advised of the figures for variants of concern, noting that the number of cases in the UK were very low; there was no evidence to suggest the variants were more deadly or more transmissible; and that 100 per cent of all positive cases that were genotyped showed the Kent variant to be present.

Details were provided on the figures for PCR and lateral flow testing in Darlington; the Department for Health and Social Care plans for test expansion; the four stages of the Road Map were outlined; and reference was made to the Stay at Home Campaign which would continue throughout all stages of the Road Map.

Discussion ensued on the vaccination of housebound residents and the actions taken to improve the uptake of vaccinations by ethnic communities. Members questioned the accuracy of the lateral flow tests and highlighted the need for improved messaging in relation to the vaccination process, particularly for hearing and site impaired residents.

**RESOLVED** – That the Public Health Principal and Director of Public Health be thanked for their update on Covid-19 in Darlington.

## **HH51 ANNUAL REPORT OF THE DIRECTOR OF PUBLIC HEALTH 2020 - DARLINGTON: IN THE TIME OF COVID-19**

The Director of Public Health submitted a report (previously circulated) to share with Members the Annual Report of the Director of Public Health 2020, Darlington: In the time of COVID-19 (also previously circulated).

The submitted report stated that the Annual Report had been produced as a requirement of the Health and Social Care Act 2012; the subject for discussion was Darlington: In the time of COVID-19; the report discussed the early stages of Covid-19, the North East response, and the local Darlington response; and the Annual Report was written by the previous Director of Public Health, Miriam Davidson.

**RESOLVED** – (a) That the Annual Report of the Director of Public Health 2020, which had a focus on legacy of the programme, be noted.

(b) That the thanks of this Scrutiny Committee be extended to Miriam Davidson for her work as Director of Public Health for Darlington.

## **HH52 WORK PROGRAMME**

The Managing Director submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme and to consider any additional areas which Members would like to suggest should be included in the previously approved work programme.

Members were advised of the proposal at the Adults Scrutiny Committee to undertake a joint review into the impact of COVID-19 on Adult Services and that a quad of aims would be submitted to this Scrutiny Committee for consideration.

**RESOLVED** – That the current status of the work programme be noted.

## **HH53 HEALTH AND WELLBEING BOARD**

Members were advised that the next meeting of the Health and Wellbeing Board was scheduled for 18 March 2021.

**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.

# **TEWV Quality Account 2020/21 and 2021/22**

**Darlington OSC  
14<sup>th</sup> April 2021**

# Purpose

- To look back at progress made on the Quality Account improvement metrics and priorities this year
- To outline proposed quality improvement priorities for 2021/22 (to be included in the Quality Account 2020/21 document)
- This will help you to respond to our draft Quality Account document when it comes to you later in April
- Please note that your 'local' data includes Darlington as well as County Durham. 'Trustwide' data also includes Teesside, North Yorkshire and York and our Forensics Directorate

# Progress on 2020/21 QA Actions

<u>Priority</u>				<u>Comment</u>
<b>Further Improve the clinical effectiveness and patient experience at times of transition from CYP to AMH services</b>	2	0	4	The work of the Transitions Project has been superseded by the Trust-wide work requested by the Trust's Senior Leadership Group on 'Improving Transitions and Service Provision for People aged 16 to 25 years in Tees, Esk and Wear Valleys NHS Foundation Trust'. Therefore 4 of the planned actions are no longer required.
<b>Improve the personalisation of Care Planning</b>	0	8	0	The Lead for this Quality priority was redeployed to undertake actions relating to the Covid-19 pandemic. We intend to restart this work in 21/22

# QA action progress (continued)

<u>Priority</u>				<u>Comment</u>
<b>Reduce the number of Preventable Deaths (with a focus on learning from deaths)</b>	5	8	0	<p>The Family Conference held in March 2019 was to be followed on 28<sup>th</sup> March 2020 with the second event. However the Covid-19 lockdown prevented this from going ahead. Due to the sensitive nature of this event it is not appropriate to hold this remotely via technology. It is still planned to hold this event during 2021, as soon as social distancing restrictions allow. Therefore the actions connected to the evaluation and development / implementation of the action plan for this event will be carried over to 2021/22</p>
<b>Increasing the proportion of inpatients who report feeling safe on our wards</b>	3	10	0	<p>Some of the specific actions relating to this priority were put on hold due or delayed to the ongoing Covid-19 pandemic; they will be carried over into 2021/22 as part of the 'Feeling Safe' quality improvement priority</p>

# Quality Metrics (at 31/12/2020)

	Quarter 3 20/21			Trend	Comments	19/20
	Durham & D'ton Actual	Target	Trust Actual			
<b>1: Percentage of patients who report 'yes, always' to the question 'Do you feel safe on the ward?'</b>	<b>64.89%</b>	88.00%	<b>64.66%</b>	↑	This is the best position over the last four years but we still remain a long way from target. We are committed to improving patient safety and will keep this as a Quality Account priority. Anti-ligature work and improvements in the production and recording of safety summaries are taking place.	<b>62.39%</b>
<b>2: Number of incidents of falls (level 3 and above) per 1000 occupied bed days (OBDs) – for inpatients</b>	<b>0.13</b>	0.35	<b>0.13</b>	↓		<b>0.15</b>
<b>3: Number of incidents of physical intervention/restraint per 1000 occupied bed days</b>	<b>17.84</b>	19.25	<b>20.90</b>	↓	Although this metric is still not achieving the target, it has been steadily improving over the past year. In Teesside the high level mainly relates to the learning disability and autism services provided at Bankfields Court which have treated a number of patients with complex needs / high acuity during the past few months.	<b>30.45</b>

# Quality Metrics (at 31/12/2020)

	Quarter 3 20/21				Comments	19/20
	Durham and D'ton	Target	Actual			
<b>4: Existing percentage of patients on Care Programme Approach who were followed up within 7 days after discharge from psychiatric inpatient care</b>	<b>96.36%</b>	>95%	<b>96.22%</b>	↓	In 20/21 Q1 we achieved 95.76% and in Quarter 2 96.22%	<b>97.13%</b>
<b>5: Percentage of Quality Account audits completed</b>	<b>NA</b>		<b>N/A</b>	→	No Quality Account audits were scheduled for completion during Q3 2019/20	<b>100%</b>
<b>6a: Average length of stay for patients in Adult Mental Health Assessment and Treatment Wards</b>	<b>19.29</b>	<30.2	<b>22.08</b>	↑	The average length of stay for Adults has decreased over the last three consecutive quarters (Q1 23.50; Q2 22.92) and remains better than the standard, with the Q3 20/21 position being the lowest reported since Q2 2018/19	<b>25.55</b>

# Quality Metrics (at 31/12/2020)

	Quarter 3 20/21				Comments	19/20
	Durham and D'ton	Target	Trust Actual			
<b>6b: Average length of stay for patients in Mental Health Services for Older People Assessment and Treatment wards (days)</b>	<b>55.91</b>	<52	<b>58.94</b>	↓	Average lengths of stay during the year has been significantly less than in previous years. in Q1 it was 70.28 days but only 50.40 days in Q2. This is potentially attributable to the Covid-19 pandemic and the impact of the lockdown and restrictions that were in place throughout the year	<b>66.84</b>
<b>7: Percentage of patients who reported their overall experience as excellent or good</b>	<b>88.76%</b>	94.00%	<b>93.21%</b>	↑	These figures show no significant changes despite the imposition of social distancing on wards (including restrictions to visiting). Patients tell us that they are unhappy with, for example, waiting times, access to services, activities and feeling safe.	<b>91.65%</b>

# Quality Metrics (at 31/12/2020)

	Quarter 3 20/21			Trend	Comments	19/20
	Durham and D'ton	Target	Trust Actual			
<b>8: Percentage of patients that report that staff treated them with dignity and respect</b>	<b>85.99%</b>	94.00%	<b>86.77%</b>	↑	The results against this metric have remained essentially static over the past few years. There will be actions in the Trust's Quality Account for 2021/22 on compassionate care and improving care planning.	<b>85.80%</b>
<b>9: Percentage of patients that would recommend our service to friends and family if they needed similar care or treatment</b>	<b>90.14%</b>	94.00%	<b>91.60%</b>	↑	This metric has been steadily increasing over the past few years; it is anticipated that the planned care planning, feeling safe and compassionate care actions to take place next year will help us to improve this percentage further	<b>86.70%</b>

# Next Year - Priorities for improvement 2021/2022

- We were unable to hold our usual stakeholder engagement events, but we:
  - Have a very clear sense of where our service users, carers, staff and partners think our quality weaknesses are through 'Our Big Conversation'
  - Have modernised the way we report to our Quality Assurance Committee which has made it easier to triangulate data and intelligence so that we can see where we might need to prioritise, for example more of a focus on compassionate care
  - Know that many of the delayed actions due in 2020/21 still need to be done

# Priorities during 2021/2022

TEWV's Quality Assurance Committee has therefore agreed to work up detailed actions for 3 priorities for the new Quality Account:

Page 16

1. Care Planning
2. Feeling Safe
3. Compassionate Care

Detailed plans are set out on next few slides

# Key Care Planning Actions

- Ensure finalised, working version of DIALOG is embedded within CITO (our new electronic patient care record)
- Identify how many patients/agreed others receive a care plan,
- Establish Steering Group oversee development and implementation of high quality, collaborative care planning

## Key Care Planning Actions (cont'd)

- Review and revise local CPA policy in line with system changes and national guidance
- Review and update care planning training
- Ensure sufficient capacity is built into clinic scheduling to properly co-create and develop care plans

# Key Safer Care Actions

- Hold second Family Conference, produce report and implement recommendations
- Establish a Regional Patient Experience Network
- Use data and talk to people with lived experience to identify priority wards in relation to Patient Experience, produce report and deliver recommendations
- Seek ideas as part of the ‘mutual help’ meetings that take place on the wards

## Key Safer Care Actions (cont'd)

- Review current 'ward orientation' process for patients and incorporate into personal safety plans
- Continue existing pilot of body cameras and develop business case for further roll-out
- Share key successes and learning from review of patient safety

# Key Compassionate Care Actions

- Hold engagement events with staff at all levels to develop our new ways of working together and share outputs
- Commission and deliver a range of educational approaches with a focus on Empathy and Compassion
- Design, develop and deliver a new Trust leadership programme to all staff in formal leadership positions
- Seek views of staff about organisational processes and systems which do not live the values, or which get in the way of them living the values, and present findings to Lead Directors
- Review People & Culture processes and policies in relation to Trust values
- Ensure people have access to meaningful breaks and thinking time

# Key Compassionate Care Actions (cont'd)

- Model and promote the values in how we communicate, how we hold meetings and share information
- Produce a prioritised plan for the future to tackle stigma related issues and/or their consequences
- Implement process to capture informal concerns and complaints
- Work with patients and families to develop the Serious Incident review process
- Develop tools to support team and individual conversations about our values

# Quality Metrics for 2021/2022

- We are currently reviewing the suite of Quality Metrics
- We want to align them more closely to our improvement priorities
- Some of the metrics will still be the same
- We will analyse our data in a more sophisticated way, so that we can see where things are really improving or getting worse

# What next?

- We are aiming to send you the draft Quality Account document on 27<sup>th</sup> April
- There is a 30-day period to return your comments, which we print verbatim in an appendix
- TEWV Board of Directors will approve the document in June
- Publication of the final document at end of June
- This will be a slimmed down and more user-friendly document than previously (though we still have to include all the mandatory content)
- We will be happy to bring an update on progress during 2021/2022 to this committee



**DARLINGTON  
BOROUGH COUNCIL**

# Health and Housing Scrutiny Committee

## COVID-19 in Darlington

### 14<sup>th</sup> April 2021

Penny Spring

Director of Public Health



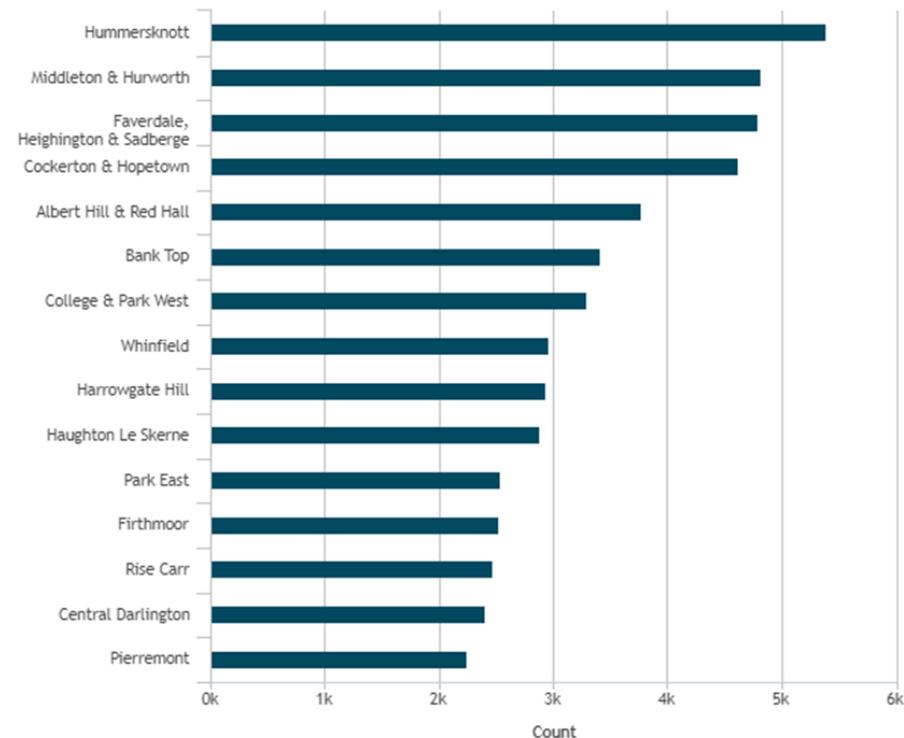
# Darlington situation report

## Test 1 The vaccine deployment programme continues successfully

In Darlington (as of 8<sup>th</sup> April 2021)

- 53,349 (57.38% of adults) have been given 1<sup>st</sup> dose
- 95% of all those aged over 65years have received their first dose of vaccine
- Over 9 out of 10 residents in care homes have received their first dose of vaccine.
- 8393 have received 2<sup>nd</sup> dose of vaccine.
- Vaccination sites include:-
  - Feethams House – manned by local GPs
  - Mass Vaccination Centre – Darlington Arena (opened 1<sup>st</sup> March)
  - Cockerton Community Pharmacy

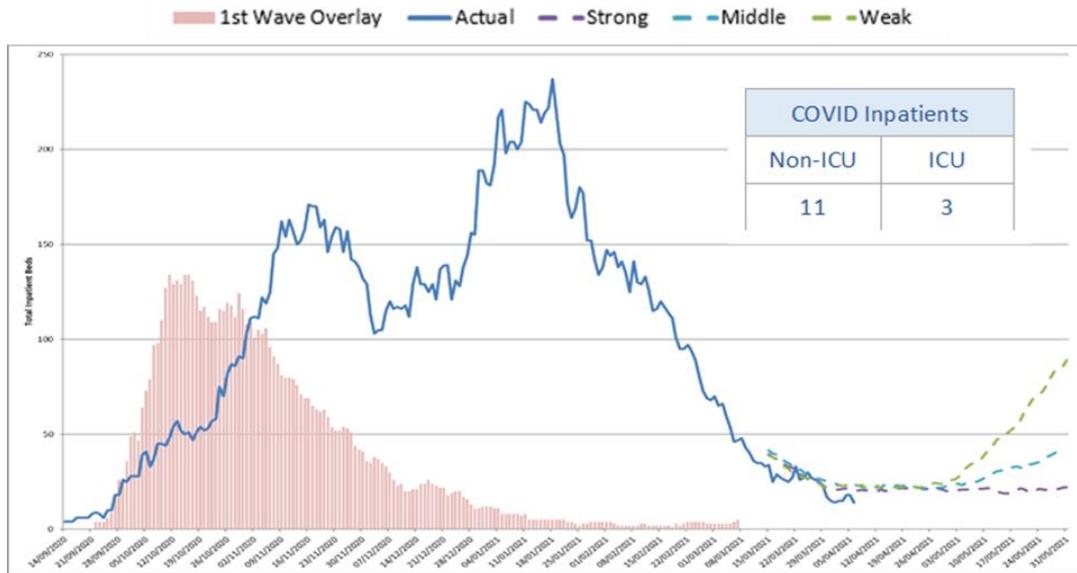
Cumulative number of residents who have received at least one dose of a COVID-19 vaccine (count)  
(Week end 28/03/2021) for MSOAs of Darlington (Unitary)  
source: COVID-19 Vaccinations



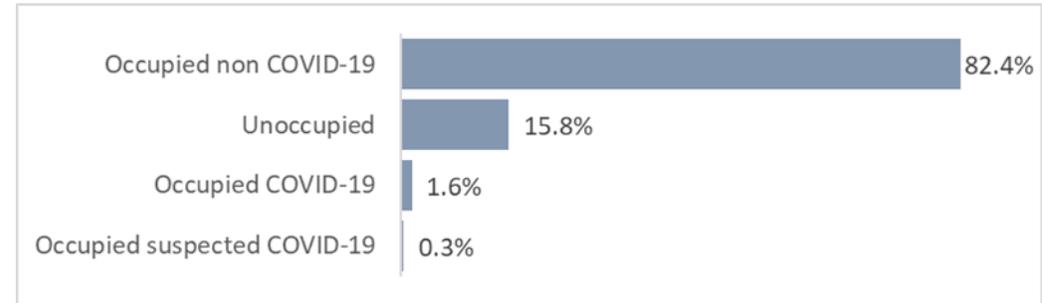
Cumulative no. residents vaccinated for COVID-19, Week end 28/03/2021  
Powered by LG Inform Plus

# Test 2 Evidence shows vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated

Page 27



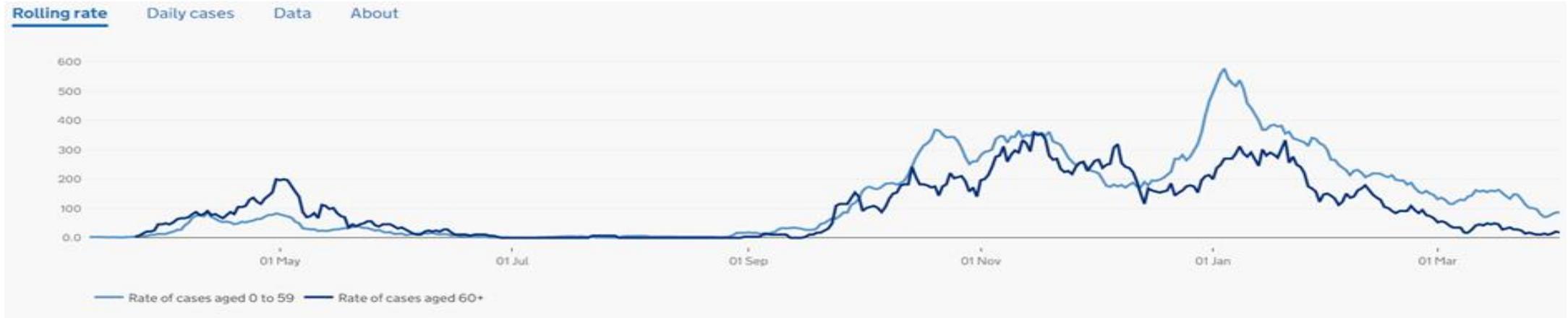
COVID Inpatient occupancy actuals against 1st wave curve and Durham University 3 predictive scenarios (taking into account variants, vaccinations and lockdown easing (source: CDDFT)



Hospital beds occupied by COVID-19, suspected COVID-19, non COVID-19 and unoccupied- CDDFT

# Test 3 Infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the NHS

Case detection rate >60s Darlington



All deaths in 2020 by week, with proportion where COVID-19 is mentioned and weekly average occurrence 2015 to 2019; Darlington



# Test 4. Our assessment of the risks is not fundamentally changed by new Variants of Concern.

Percentage of new positive lab samples with the new variant (S gene target failure) present

UTLA LTLA hierarchy - UTLA	UTLA LTLA hierarchy - Area name	Cases with SGTF
PHE Centre	North East	100.0%
Darlington	Darlington	100.0%
Hartlepool	Hartlepool	100.0%
Middlesbrough	Middlesbrough	100.0%
Redcar and Cleveland	Redcar and Cleveland	100.0%
Stockton-on-Tees	Stockton-on-Tees	100.0%

# Roadmap Steps 1 & 2

### STEP 1: 8 March

-  Schools and colleges are open for all students. Practical Higher Education Courses.
-  Recreation or exercise outdoors with household or one other person. No household mixing indoors.
-  Wraparound childcare.
-  Stay at home.
-  Funerals (30), wakes and weddings (6).

### 29 March

-  Rule of 6 or two households outdoors. No household mixing indoors.
-  Outdoor sport and leisure facilities.
-  Organised outdoor sport allowed (children and adults).
-  Minimise travel. No holidays.
-  Outdoor parent & child groups (up to 15 parents).

### STEP 2

At least five weeks after Step 1, no earlier than 12 April.

-  Indoor leisure (including gyms) open for use individually or within household groups.
-  Rule of 6 or two households outdoors. No household mixing indoors.
-  Outdoor attractions, such as zoos, theme parks and drive-in cinemas.
-  Libraries and community centres.
-  Personal care premises.
-  All retail.
-  Outdoor hospitality.
-  All children's activities, indoor parent & child groups (up to 15 parents).
-  Domestic overnight stays (household only).
-  Self-contained accommodation (household only).
-  Funerals (30), wakes, weddings, receptions (15).
-  Minimise travel. No international holidays.
-  Event pilots begin.

# Next Step 3 - after 17th May and as we progress

## STEP 3

At least five weeks after Step 2, no earlier than 17 May.



Indoor entertainment and attractions.



30 person limit outdoors.  
Rule of 6 or two households indoors (subject to review).



Domestic overnight stays.



Organised indoor adult sport.



Most significant life events (30).



Remaining outdoor entertainment (including performances).



Remaining accommodation.



Some large events (except for pilots) - capacity limits apply.  
Indoor events: 1,000 or 50%.  
Outdoor other events: 4,000 or 50%.  
Outdoor seated events: 10,000 or 25%.



International travel - subject to review.

## Safe Behaviours



Wash hands frequently, for at least 20 seconds.



Wear a face covering in enclosed environments.



Maintain space with anyone outside your household or bubble.



Meet with others outdoors where possible.



Minimise the number of different people you meet and the duration of meetings, if possible.



Let fresh air in.



Download the NHS Test & Trace app.



Get a test immediately if you have any symptoms.



Self isolate if you have symptoms, have tested positive, or had contact with someone with COVID-19.

# Next Phase – Recovery

## Longer term Impacts of COVID

- **Economic** – job losses, business failure, lower incomes, changes in consumer behavior
- **Educational** – missed curriculum learning, impact on social development, missed PHSE, poorer attainment, missed extracurricular opportunities, missed PE and School Sports
- **Health** – Long COVID, backlog of elective care, increase in anxiety and depression, increase in obesity, decrease in Physical Activity, increase in deaths, staff burnout health and social care sectors
- **Social** – increase in social isolation, increase risk of abuse and exploitation during lockdown, relationship pressures, family separation and breakdown

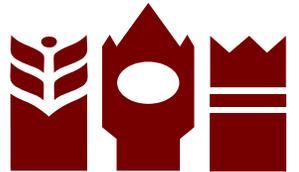
## UK Recovery Strategy July 2020

1. **Supress the virus** – Test and Trace, Outbreak management, easing of restrictions, hands face space
2. **Open up society and the economy** – support to businesses, easing of restrictions, Access to Work
3. **Plan to rebuild** – access to testing, self isolation, continued enforcement, vaccination strategy
4. **Preparing for winter** –preventing resurgence in cases, avoiding outbreaks of other respiratory diseases
5. **Lifting restrictions step by step** – Following the Roadmap, assess evidence before each step, plan for different scenarios, review the situation regularly



**DARLINGTON  
BOROUGH COUNCIL**

Any questions?



This page is intentionally left blank

## HEALTH AND HOUSING SCRUTINY COMMITTEE 14 APRIL 2021

---

### CUSTOMER ENGAGEMENT STRATEGY 2021-2024

---

#### SUMMARY REPORT

##### Purpose of the Report

1. To consider the draft Customer Engagement Strategy for 2021-24.

##### Summary

2. Darlington Borough Council Housing Services has a long and successful track record of engaging with and involving tenants in the delivery of housing services.
3. One of the key strands of the new Social Housing Regulator's Consumer Standards covers 'Tenant Involvement and Empowerment'. These state that we must consult our tenants at least once every three years on the best way of involving them in the governance and scrutiny of our housing service.
4. The Customer Engagement Strategy for 2021-24 (**Appendix 1**) sets out the process for how we will involve and empower our tenants, including how our engagement activities will be monitored and reported.

##### Recommendation

5. It is recommended that Members:-
  - (a) Consider the contents of the report, and
  - (b) Recommend the Customer Engagement Strategy for 2021-24 for approval by Cabinet.

**Ian Williams**  
**Director of Economic Growth and Neighbourhood Services**

##### Background Papers

- (i) The Charter for Social Housing Residents: Social Housing White Paper
- (ii) Tenant Involvement and Empowerment Standard: Regulator of Social Housing

Anthony Sandys: Extension 6926

S17 Crime and Disorder	There are no issues
Health and Well Being	There is no impact in this report
Carbon Impact and Climate Change	There is no impact in this report
Diversity	The Customer Engagement Strategy ensures that all tenant involvement and empowerment activities will take into account the diverse needs of Council tenants
Wards Affected	All wards with Council housing
Groups Affected	Council tenants and leaseholders
Budget and Policy Framework	There are no implications
Key Decision	This is an Executive decision
Urgent Decision	This is not an urgent decision
One Darlington: Perfectly Placed	This report supports the 'Building Strong Communities' theme of the Sustainable Community Strategy.
Efficiency	There are no implications
Impact on Looked After Children and Care Leavers	There are no implications

## MAIN REPORT

### Information and Analysis

6. One of the key strands of the Government's Social Housing White Paper: 'The Charter for Social Housing Residents' is 'To have your voice heard by your landlord'. Specifically, social landlords are expected to:
  - (a) Seek out best practice and consider how they can continually improve the way they engage with their tenants.
  - (b) Support more effective engagement with tenants by giving them the tools to influence their landlords and hold them to account.
  - (c) Review professional training and development to ensure tenants receive a high standard of customer service.
7. Social Housing is controlled by the Regulator of Social Housing and they have set out specific expectations and outcomes that providers of social housing are expected to achieve. The main area of regulation covering Local Authorities is the Consumer Standard.
8. One of the four Consumer Standards set by the Regulator is the **Tenant Involvement and Empowerment Standard**, which social housing providers must comply with. For Local Authorities, Members who govern service delivery, are responsible for ensuring the Council meets the relevant standards and determining how this is done.
9. The Customer Engagement Strategy 2021-24 sets out how the Council will meet the standards, including what specific activities will be undertaken, the expected

outcomes that will be achieved and how these will be monitored and reported.

10. The Council's Housing Services has a long and successful track record of engagement with our tenants and consulting with them on every aspect of service delivery through:
  - (a) The Tenants Scrutiny Panel
  - (b) The Readers Panel
  - (c) Housing Connect magazines and the Annual Report
  - (d) The Housing pages of the Council website and the Housing Facebook page
  - (e) Customer satisfaction surveys
  - (f) Mystery shopping exercises
  - (g) Customer complaints
  - (h) Estate walkabouts
11. The Customer Engagement Strategy focusses on four specific themes:
  - (a) **Providing the right information.** This is about how we will provide our tenants with the right information about our services that meets their diverse needs, how we will encourage tenants to use our digital services and what support we will provide to ensure that no-one is excluded.
  - (b) **Listening to our tenants.** This is about how we will consult our tenants on all aspects of service delivery; how the outcome of consultation will be reported and how we will ensure tenants can make their voice heard.
  - (c) **Making decisions with our tenants.** This is about how we will involve our tenants in decision making processes and how we will use the outcome of consultation to make decisions and shape the services tenants receive.
  - (d) **Maximising scrutiny and accountability.** This is about how we will build trust and transparency and ensure our tenants can hold us to account, how we will support our tenants to build their capacity and empower them to be more effectively involved, and how we will use complaints about our services to understand what has gone wrong and what we need to do to put things right.
12. Specific actions within the strategy will be supported by an annual Engagement Plan, setting out the detailed activities we will undertake to consult with and involve our tenants.
13. Where possible, we will promote opportunities for engagement through digital channels, whilst always providing more traditional methods of engagement through surveys, telephone contact and face to face meetings. For those tenants who are digitally excluded from our services, we will provide the right level of support to ensure that everyone can become involved.
14. The Customer Engagement Strategy has already been considered by the Tenant's Board and covers the three-year period from 2021 to 2024. The Tenant Involvement and Empowerment Standard states that social housing providers must consult tenants at least once every three years on the best way of involving tenants in the governance and scrutiny of the organisation's housing management service.

15. Regular updates on the progress against the strategy will be provided to the Tenants Board and on an annual basis reported to this Scrutiny Committee.

# Customer Engagement Strategy

2021 - 2024





# SAVE TIME, DO IT ONLINE...

**DO IT  
ONLINE**



For details of everything you can do online, visit  
[www.darlington.gov.uk/doitonline](http://www.darlington.gov.uk/doitonline)

# Introduction

Darlington Housing Services has a long history of working with our tenants to help shape their communities and influence decisions about their homes and the services we provide. Our approach to tenant engagement and participation is embedded in our culture of openness and honesty, demonstrated through our resident groups and tenant's panel.

This strategy sets out how we will continue to involve and empower our tenants, ensuring they are at the heart of everything we do. It also sets out how we will explore new ways to engage with our tenants and ensure that no-one is left out.

Our strategy will help us to strengthen and expand opportunities for our tenants to make a positive difference to our services and future direction.

## Our Aims

- Provide our tenants with the right information and hold us to account.
- Ensure our tenants can give us their views in the ways they want to and make their voice heard.
- Improve and expand the ways our tenants can be involved and participate in decision making.
- Improve the ways we can engage with our tenants through digital and social media channels.
- Empower tenants by providing training opportunities to ensure they have the right skills to make a meaningful contribution.
- Involve our tenants in making key decisions, such as improving safety and tackling climate change.
- Work with our tenants to improve services and help us implement change.
- Ensure we provide our tenants with feedback following consultation.
- Learn from complaints about our services, put things right and be open and honest when things haven't gone so well.
- Work with our partners to get the best outcomes for our tenants.



Councillor Kevin Nicholson,  
Health and Housing  
Portfolio Holder

# Our Priorities

## 1. Providing the right information

We will provide our tenants with the right information about our services in the ways they want. We will encourage our tenants to use our digital services, providing opportunities for everyone to be involved. We will ensure that we provide the right level of support for our tenants to access our services, ensuring no-one is excluded.

### How will we do this?

- We will make all of our written communications easy to understand and clear about how our tenants can access services, providing information in a way that suits our tenants.
- We will provide up to date information about our services through our easy to use website and Housing Facebook page.
- We will provide the right level of support with explanations and advice on how our tenants can use our digital services and through our Darlington Home Online service.
- We will regularly update our social media platforms giving tenants information about their homes and the area they live in. We will also provide a forum where tenants can provide feedback on our services.
- We will provide telephone and face to face services for those who need it and ensure our staff are always on hand to speak to our tenants.





## How will we know we have been successful?

- All of our written communications will be in Plain English and approved by our reader's panel.
- Increased hits to our website pages and more subscribers to our Facebook page.
- More subscribers to the Darlington Home Online service.
- Less calls to our housing contact team, with more support provided to the people who need us the most.
- Positive feedback from our tenants about the information we provide and the ways in which they can contact us.

## 2. Listening to our tenants

**We will encourage and grow tenant involvement and participation. We will provide opportunities for our tenants to develop and feel fulfilled. We will put our tenants at the heart of everything we do and ensure their voice is heard.**

### How will we do this?

- We will provide a range of opportunities for our tenants to give their views and get involved through surveys, our tenant's panel, and mystery shopping.
- We will give clear expectations and explanations of the role our tenants will play in engagement activities and how these will shape services.
- We will develop training opportunities to ensure everyone has the right skills to get involved and participate fully in activities which they feel are important to them.
- We will understand the barriers to effective engagement and take action to remove them.



- We will ensure community activities support locally prioritised actions.
- We will create a positive engagement culture where all staff understand the importance of customer engagement and actively promote it as an essential part of their roles.

## How will we know we have been successful?

- Increased tenant participation and evidence that tenants have given their views through a range of activities.
- Our tenant's panel are consulted about key decisions affecting our services. Training is provided to ensure their contribution is valued and meaningful.
- Evidence that our consultation activities reflect the diversity of our communities and that we work with tenants we don't usually hear from.
- Increased participation through online engagement.
- Customer engagement is a key training priority for all housing staff to ensure everyone plays a role in listening to our tenants and implementing change.

### 3. Making decisions with our tenants

We will ensure the results of customer engagement are used to develop services and bring about positive change. We will use customer insight to make improvements and shape what we do and how we do it. We value the contribution tenants make in improving services and will ensure we provide feedback each time a contribution is made. We will involve our tenants to ensure their homes are safe and decent.

#### How will we do this?

- We will use the results of customer engagement to make decisions about our services and their communities.
- We will provide feedback on what we have done to improve services and bring about positive change as a direct result of customer engagement.
- We will involve our tenants with the maintenance, safety and energy efficiency of their homes.
- We will create health and safety and fire safety champions in local communities and provide our tenants with the right training and support to undertake these roles.
- We will empower our tenants to make decisions and take the lead.
- We will engage with the tenants of our new build homes and use their feedback to inform our future designs and choice of products.
- We will ensure our tenants can make a positive contribute to their health and well-being and tackle poverty and exclusion.



## How will we know we have been successful?

- Increased satisfaction in housing services.
- Evidence that customer engagement has been used to make decisions and shape services.
- Evidence that tenants have been empowered to make a positive contribution to the maintenance, safety and energy efficiency of their homes.
- Fire safety checks are carried out regularly with tenants.
- Evidence that tenant's views have informed our future designs and choice of products.

## 4. Maximising scrutiny and accountability

We will build trust and transparency and ensure our tenants can hold us to account. We will ensure our Council Members can provide scrutiny of our decisions to ensure our tenants have been involved and listened to. We will work with our partners to get a better understanding of how we can engage with and support our communities. We will use complaints about our services to understand what has gone wrong and what we need to do to put things right.

### How will we do this?

- We will explore opportunities for wider tenant involvement, which can form a bridge between local communities and housing services.
- We will use our tenant's panel to provide scrutiny and challenge and ensure that decisions that will affect our tenants are transparent.





- We will publish our performance on our website on a regular basis so that tenants can see how we are measuring up and improving.
- Key decisions about our services will be made by Council Members and the results of customer engagement and involvement will form the basis of any recommendations. Equality impact assessments will help us understand any adverse effects on the decisions we make.
- We will ensure tenants understand the level of service they can expect from us and what to do if they don't think we are meeting it.
- We will ensure our tenants know how they can complain about our services and that complaints are given priority. We will thoroughly investigate all complaints and provide tenants with a full and honest response.
- We will put right what has gone wrong and ensure we learn from any mistakes, publishing the details of any improvements.
- We will engage with our colleagues and external organisations about how we can better engage and support our tenants.

## How will we know we have been successful?

- Evidence of decisions made in consultation with our tenant's panel.
- Evidence of challenge and scrutiny by our Council Members.
- Evidence that key performance measures and how we compare with others are regularly published and communicated to our tenants. Evidence that performance has improved.
- Evidence that complaints are consistently resolved promptly, politely and fairly.
- Complaints about our service are reducing.
- Evidence that complaints about our services have been used to drive changes and improvements.



## Measuring and Monitoring

Effective monitoring and reporting of this strategy will help us understand if our engagement activities are making a difference. Therefore, we will measure and report on the effectiveness of this strategy by doing the following:

- We will expect to see an increase in the number of our tenants becoming involved and influencing decision making. We will measure and report on this through our website, our tenant's panel, Housing Connect magazine and an annual report to our tenants.
- We will evaluate the progress of engagement activities at regular intervals throughout the year to ensure these are working effectively.
- We will publish the details of customer engagement opportunities through an annual plan, regularly reporting on how we are progressing.
- We will publish the records of meetings and decisions made.
- We will provide an annual report to the Health and Housing Scrutiny Committee on progress against our strategy.
- We will ensure customer engagement forms a core competency for housing staff and is reflected in all job roles, recruitment processes and training plans.

**“We want to hear your views on the service we provide and encourage more people to get involved with the tenants panel.”**

**Matthew Hufford**

**Communications and Engagement  
Co-ordinator.**



**Contact one of our Customer  
Engagement Officers today**

**Call**  
405333

**Contact on Facebook:**  
Darlington Borough Council Housing

**Email**  
customerengagement@darlington.gov.uk



**Creating homes,  
building futures**



## HEALTH AND HOUSING SCRUTINY COMMITTEE 14 APRIL 2021

---

### JOINT AUTISM REVIEW GROUP

---

#### SUMMARY REPORT

#### Purpose of the Report

1. To present the outcome and findings of the Joint Review Group established to examine the autism provision within Darlington Borough Council and to consider the most appropriate way to progress the key themes identified by the Joint Review Group.

#### Summary

2. At a meeting of the Health and Housing Scrutiny Committee held on 30 January 2020, a draft Terms of Reference (**Appendix 1**) in relation to autism provision in Darlington was approved by the Committee and it was agreed to establish a Joint Autism Review Group with the Adults and Children and Young People Scrutiny Committees.
3. Members of each Scrutiny Committee nominated representatives to participate in the Review and comments were provided from officers from the Children, Education, Adults and Public Health Service areas on the Quad of Aims (**Appendix 2**).
4. Although an initial meeting of the Review Group was held on 2 March 2020, where Officers from Darlington Borough Council were also in attendance, the review group did not meet again until 24 February 2021 in light of the COVID-19 pandemic.
5. A number of issues have been considered and discussed at the meetings and the notes of those meetings are attached (**Appendix 3**), along with the recommendations.
6. The Review Group recommended that the Adults, Children and Young People and Health and Housing Scrutiny Committee give consideration to the recommendation that a Cross Party Autism Working Group be established to progress the key themes identified by the Review Group, and that, if agreed, the recommendation be forwarded to Cabinet for consideration.
7. In considering the recommendations of the Review Group, Members are asked to consider whether the establishment of a Cross Party Autism Working Group is the appropriate way forward to progress the key themes which have been identified through the Review Group.
8. As Members will be aware, the Council's democratic arrangements support the scrutiny function and there is no reference to the governance arrangements around

the establishment of working groups, so it may be more appropriate for this Committee to agree to monitor and progress the key themes as part of its work on-going work programme.

### Recommendation

9. That, taking into account the views of the Adults Scrutiny Committee and Children and Young People Scrutiny Committee as detailed in paragraph 15, the Health and Housing Scrutiny Committee consider the most appropriate way to progress the key themes identified by the Review Group.

**Councillor A Scott**  
**Chair of Joint Autism Review Group**

Hannah Fay : 5801

S17 Crime and Disorder	This report has no implications for Crime and Disorder
Health and Well Being	The initiative could have a positive impact on people's health and well-being.
Carbon Impact and Climate Change	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	There are no specific Wards which are affected by this report.
Groups Affected	All
Budget and Policy Framework	This report does not represent a change to the budget and policy framework
Key Decision	Not a key decision
Urgent Decision	Not an urgent decision
One Darlington: Perfectly Placed	To enable people to be more healthy and independent, to enable children with the best start in life and to provide a safe and caring community
Efficiency	The outcome of this report does not impact on the Council efficiency agenda
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

10. At the initial meeting of the Review Group on 20 March, Officers from Darlington Borough Council informed Members of the work that had been undertaken to date in Darlington and Members held an in-depth discussion in respect of the services available in Darlington for residents with autism, identifying a number of key areas for further consideration.
11. The Chair of the Review Group and the Cabinet Member with the Adults Portfolio met with Officers from the Commissioning Team in January 2021 prior to the Review Group reconvening, to gain an understanding of the commissioning arrangements for autism services in Darlington and to identify an approach to progress the review. Reference was made to the 2018 Autism Self-Assessment Framework which was recognised as a useful tool to enable Members of the review group to identify gaps in services.
12. At the meeting of the Review Group on 24 February 2021 Members held an in-depth discussion regarding the 2018 Autism Self-Assessment Framework.
13. The Review Group identified a number of key themes requiring further investigation concluded that a Cross Party Autism Working Group be established to progress the key themes of training and awareness, support, diagnosis and employment.

### Consultation

14. As the review is joint across three scrutiny Committees, this report has been circulated electronically to Members of the Adults and Children and Young People Scrutiny Committee to give them the opportunity to consider and respond to the recommendations contained in this report. Unfortunately, due to timescales, it was not possible for the report to be considered at a formal meeting of those Scrutiny Committees.
15. Responses from the Members of the Adults and Children and Young People Scrutiny Committees have been limited, however the views of one Member who did respond were in line with the recommendations of the Joint Review Group.

### Constitution

16. In considering how to monitor and progress the key themes, Members are asked to give consideration to the Council's Constitution
17. As Members will be aware, the Council's democratic arrangements support the scrutiny function and there is no reference to the governance arrangements around the establishment of working groups, so it may be more appropriate for this Committee to agree to monitor and progress the key themes as part of its on-going work programme.
18. If Members agree to adopt this approach, it will be less resource intensive for Officers as the work will be included as part of the scheduled meetings. If there are particular areas of concern, the Review Group could be reconvened to look at

those areas and report back to this Scrutiny Committee.

19. If a working group is to be established some thought will need to be given to its membership, frequency and reporting arrangements and a recommendation will need to be made to Cabinet.

**JOINT REVIEW GROUP TO EXAMINE AUTISM PROVISION WITHIN DARLINGTON BOROUGH COUNCIL**

<b>REASON FOR REQUEST?</b>	<b>RESOURCE (WHAT OFFICER SUPPORT WOULD YOU REQUIRE?)</b>
<p>To review and understand the provisions and services and contractual arrangements between this Council and our providers who provide the Autism provisions, diagnoses and support services for Darlington.</p> <p>To ascertain that the best services possible are provided for the benefit of individuals on the autistic spectrum to enable them to thrive. To hold ourselves and our partner organisations accountable for the services provided.</p>	<ul style="list-style-type: none"> <li>• Representatives from relevant partner organisations, for example (and not limited to) Durham Constabulary, DDFS, TEWV, NHS, CCG, CQC, NEAS etc.</li> <li>• Relevant Council Officers where necessary</li> <li>• Independent advisor(s) where necessary.</li> </ul>
<b>PROCESS (HOW CAN SCRUTINY ACHIEVE THE ANTICIPATED OUTCOME?)</b>	<b>HOW WILL THE OUTCOME MAKE A DIFFERENCE?</b>
<ol style="list-style-type: none"> <li>1. Examine organisations, partners and the services they provide.</li> <li>2. Make an evaluation of the benefits to individuals on the Autism Spectrum and their carers of the services provided and investigate their effectiveness and value to the service users.</li> <li>3. Discuss possible improvements to the services and provisions that may be highlighted by Scrutiny and/or</li> </ol>	<ol style="list-style-type: none"> <li>1. Ongoing accountability via scrutiny of partners who provide services and provision. Ongoing scrutiny of any arrangements between partners, and partners and service users to provide assurance that they are in the best interest of the service users..</li> <li>2. Any reasonable recommendations for improvements outlined by ongoing investigation and scrutiny to be given reasonable consideration.</li> <li>3. To gain a better understanding of the needs of individuals with autism and their carers and the services provided to them by this Council.</li> </ol>

<p>service users, thereby enabling meaningful inclusion of those on the Autism Spectrum and their parents/carers within the Scrutiny process in line with best practice as defined by the current Autism Strategy.</p>	<ol style="list-style-type: none"><li>4. That this Council leads with and is an active proponent of good services for individuals with Autism, champions best practice within Darlington and plays an active role in keeping themselves and partners accountable.</li><li>5. Darlington be recognised as an Autism Friendly Town.</li></ol>
--	---

**Signed Councillor Rachel Mills      Date .....**  
**(Member of Children and Young People Scrutiny Committee)**

## Appendix 2

### Comments on Quad of Aims from Service Areas

#### CHILDRENS

Any recommendations and improvement in the service area will be welcome. A caveat would be that the outcomes will be achieved when timely diagnosis takes place, something which is not effective at the moment, and as provided by CAMHS is out of our control to some degree. We believe Speech and Language therapists have to be recruited to provide input to the diagnosis and there is a national shortage!!

However; we would look forward to contributing in the main from an Early Help, CAP and Lifestages perspective as these services are instrumental in working within the autism spectrum.

#### EDUCATION

I think it is positive that scrutiny are considering this need and it demonstrates members interest and involvement in SEND issues. The base at Hurworth is contracted by the LA and funded through the ESFA so there should be no MTFP implications in this quad of aims in terms of the base. Any recommended significant changes may, however, impact on the High Needs budget. It is important to note that the base only offers placements for secondary age pupils and if any recommendations are made for increased primary support this would be an additional pressure on HNB.

Due to DfE funding arrangements any change in commissioning the base or pupils' numbers would have a long (likely to be 2 academic years) lead in time.

I would suggest Graham Easterlow as Head of Service should provide officer support rather than a case officer. The Parent Carer Forum would also be a useful mechanism for obtaining parent/carer views.

#### ADULTS

I would like to see the reason for the request to include other partners, especially NHS, but also other community stakeholders, rather than a focus on 'contractual arrangements between this Council and our providers ....' It is an issue that cuts across all age groups and communities. This is reflected within the cross scrutiny focus, but not necessarily within the reason for the review.

#### PUBLIC HEALTH

The proposed approach is shared across 3 Scrutiny Committees , I think that is positive rather than each committee addressing issues separately. Earlier this week I attended a Health and Housing Scrutiny Pre meet with Cllrs Bell and Clarke and Cllr Bell indicated that he was in agreement that the Health and Housing Committee would be the lead

I have some concern about the expected level of " Officer support" indicated in the Resources Required part of the form. A number of the Members are new and will have not operated one of these before , they will need clarity from Democratic Office that the work is to be largely conducted by members

This is a topic of great interest across the committees , so it is work that will be welcomed. I am also pleased to see reference to Autism Friendly Town , actions have already been progressed on that.

## **AUTISM JOINT REVIEW GROUP**

2<sup>nd</sup> March 2020

**PRESENT** – Councillor A Scott (Chair), Councillors Bartch, Bell, Curry, Layton, Mills and Renton

**APOLOGIES** – Councillor Heslop

Following the decision by the Adults, Children and Young People and Health and Housing Scrutiny Committees to establish a Joint Review Group to examine the Autism Provision, the Group met to receive an overview of work undertaken to date in Darlington and to consider how it wished to undertake its review, noting the aims to champion best practice, improve awareness and scrutinise what was not working well.

Details were provided of the work undertaken to make Darlington an autism friendly town which included the introduction of Quiet Hour in the Cornmill Centre; roll out of a training programme to Council frontline staff and a number of hotels in the town. Work had been undertaken with DWP to improve the employment opportunities for people with autism however this had limited success; and work undertaken with schools to implement autism ambassador proved challenging.

Discussion ensued in respect of services available in Darlington and reference was made to two significant incidents in relation to abuse of inpatients with autism and learning disabilities. Members highlighted that current services for Darlington residents were very limited.

Concern was raised in respect of formal diagnosis of autism; that the diagnosis tool was inadequate; and diagnosis for adults, in particular females, was very poor. Reference was made to mental health issues associated with autism diagnosis; and the need to improve awareness of pathways and of support available. Members identified a number of areas for further consideration which included a scope of autism services that were available to bid for, noting that the bidding process needed to be more autism friendly; the need to explore what support was on offer in Darlington schools; the role of Health and Well Being Board in reviewing delays in diagnosis; to identify national framework to benchmark Darlington against; and to ascertain from the LGA what work had been undertaken by other Local Authorities

Members felt that autism should be taken into consideration in all Council decisions; and Members agreed that the Darlington MP be contacted to lobby for improved diagnosis for children, young people and adults with autism.

**IT WAS AGREED** – (a) That the Chair and Councillor Mills meet with the Assistant Director, Commissioning, Performance and Transformation to discuss commissioning arrangements in respect of autism services.

(b) That the MP for Darlington be contacted to lobby for improved diagnosis for children, young people and adults with autism.

## **AUTISM JOINT REVIEW GROUP**

24<sup>th</sup> February 2021 (via Teams)

**PRESENT** – Councillor A Scott (Chair), Bell, Curry, Heslop Layton, Mills

**APOLOGIES** – Councillor Renton

The Chair of the Review Group reminded Members of the initial meeting of the group that was held in March 2020; and that the group had been put on hold due to the COVID-19 pandemic.

The Chair and Councillor Mills met with the Commissioning Team in January 2021 to discuss a way forward for the group. Reference was made to the Autism Self-Assessment Framework which was undertaken in 2018 and it was agreed that the Autism Self-Assessment Framework be shared with the Review Group, to enable the group to identify gaps in the provision and next steps.

Discussion ensued on the Autism Self-Assessment Framework:

- Members noted that the Autism Lead Role for the Local Authority was designated to the Assistant Director of Adult Services; that this role was in the process of being appointed to; and highlighted the importance of a named lead being in post.
- Reference was made to the Autism Steering Group and the Members discussed the suggestion of political representation on this group. It was suggested that the Chair of the Steering group could be invited to participate in the review group.
- Members noted that data recorded by the Local Authority for children and young people with autism was robust, however the data collected for adults with autism was sparse and as such the full picture was not known.
- Members agreed that awareness in respect of adults with autism was very limited.
- It was reported that there was very limited training for professionals in respect of assessing people who present with mental health problems and autism. Members noted that some staff within the Local Authority had received awareness training, however the self-assessment identified that 600 members of staff were eligible for training. Members highlighted the need for consistency in the quality of training. Members agreed that further work was required to identify gaps in training.
- In respect of diagnosis, Members felt that there was an invisible co-hort of undiagnosed people that were on the spectrum; that these individuals could often present at partner agencies for a number of different reasons; and this highlighted the need for improved partnership working to help obtain a diagnosis.

- Members discussed the challenges faced by individuals and families in obtaining a referral and felt that significant work was needed to make the autism diagnostic pathway more accessible. Members felt that schools should play a bigger role in helping to identify children and young people with autism. Members agreed that further investigation was required in respect of referrals and diagnosis.
- Members questioned the availability of support groups for parents, carers and people with autism and were advised that whilst there were no Council run groups there were other groups available.
- Members highlighted the need to acknowledge the impact of COVID-19 and lockdown on mental health and that support for people with autism needed to be prioritised.
- Members suggested the use of council owned facilities to run autism friendly events; reference was made a number of initiatives and events that had been in place prior to the pandemic; and that consideration should be given to continue these in the future.
- Members noted that regular employment for adults with autism was a key area to help improve quality of life. Members agreed that there was a requirement for improving awareness and training for employers to help support existing employees that were either undiagnosed or not open about their diagnosis.
- In relation to the Criminal Justice System it was report that people with autism were more likely to be involved in the criminal justice system, and this was a key area that could help identify undiagnosed individuals.

Members agreed that training and awareness, support, diagnosis and employment were key themes requiring further investigation.

Particular discussion ensued on the future of this review group. Members proposed that this review group becomes a cross party working group to progress the key themes.

#### **IT WAS AGREED –**

- (a) That Members support the proposal to establish a Cross Party Autism Review Group.
- (b) That the Adults, Children and Young People and Health and Housing Scrutiny Committee consider the following recommendation of the Autism Joint Review Group:-
  - (i) That a Cross Party Autism Working Group be established to progress the key themes identified by the Review Group.

- (c) That, if agreed, the above recommendation be forwarded to Cabinet for consideration.

## HEALTH AND HOUSING SCRUTINY COMMITTEE 14 APRIL 2021

---

### 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 2020/21 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 2020/21 Municipal Year which has been prepared based on Officers recommendations and recommendations previously agreed by this Scrutiny Committee.
3. A request has been received (**Appendix 2**) from a Member of the Adult Scrutiny Committee requesting that this Scrutiny Committee be invited to contribute to a review of Adult Care Services during COVID, led by Adult Scrutiny, enabling Scrutiny members to learn for any future waves of coronavirus and associated restrictions/lockdowns, or any other future disease outbreak response which may be required.
4. In accordance with the agreed procedure (**Appendix 3**), the request was forwarded to the Acting Assistant Director, Adult Services for a view on its merits, using the identified criteria.
5. The response of the Acting Assistant Director, Adult Services is attached (**Appendix 2**).

#### Recommendations

6. 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.
7. In accordance with the agreed procedure, taking into account the views of the Acting Assistant Director, Adult Services, this Scrutiny Committee is requested to make a decision about whether to be involved in the review of Adult Care Services during COVID, and if agreed, to nominate Members to participate in the review.

**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 and Climate Change	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

8. 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.
9. 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

10. 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

11. 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 3**.
12. A copy of the Forward Plan has been attached at **Appendix 4** for information.

**HEALTH AND HOUSING SCRUTINY COMMITTEE WORK PROGRAMME**

<b>Topic</b>	<b>Timescale</b>	<b>Lead Officer/ Organisation Involved</b>	<b>SCS Outcome</b>	<b>Darlington Conditions</b>	<b>Link to PMF (metrics)</b>	<b>Scrutiny's Role</b>
<b>Local Outbreak Control Plan – COVID-19 in Darlington</b>	14 April 2021	Public Health	A safe and caring community  More people healthy and independent  Enough support for people when needed	Build strong communities		To receive regular updates and undertake any further detailed work if necessary.
<b>Customer Engagement Strategy 2021-2024</b>	14 April 2021	Pauline Mitchell	More people active and involved	Build strong communities		To look at work being done within communities and how the Customer Panel engage with new communities.
<b>COVID-19 Recovery and Vaccinations</b>	23 June 2021	Public Health	A safe and caring community  More people healthy and independent  Enough support for people when needed	Build strong communities		To receive regular updates and undertake any further detailed work if necessary.

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<b>NHS Clinical Commissioning Group Financial Challenges and Impact on Services</b>	23 June 2021	Mark Pickering, NHS Darlington CCG	More people healthy and independent	Build Strong Communities  Spend Every Pound Wisely		To scrutinise and monitor the CCG to ensure delivery of the necessary QIPP required in order to achieve its financial duties and service delivery
<b>Drug and Alcohol Service Contract (Joint with Communities and Local Services Scrutiny Committee)</b>	23 June 2021	Ken Ross	A safe and caring community  More people healthy and independent	Build Strong Communities  Spend every pound wisely		To update Scrutiny Members undertake any further work if necessary.
<b>Performance Management and Regulation/ Management of Change</b>  Regular Performance Reports to be Programmed	Year End/Q4 August 2021 Q2 December 2021	Relevant AD	A safe and caring community  Children with the best start in life  More people healthy and independent	Build strong communities.  Spend every pound wisely	Full PMF suite of indicators	To receive biannual monitoring reports and undertake any further detailed work into particular outcomes if necessary
<b>Homelessness Strategy and the Homelessness Reduction Act</b>	20 October 2021  Last considered 21 October 2020	Anthony Sandys	A safe and caring community  Enough support for people when needed	Build strong communities		To look at the impact following the introduction of the Act. Update on current position within Darlington

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<b>Healthwatch Darlington - The Annual Report of Healthwatch Darlington</b>	20 October 2021  Last considered 2 September 2020	Michelle Thompson, HWD	A safe and caring community  Children with the best start in life  More people healthy and independent	Build strong communities.  Spend every pound wisely		To scrutinise and monitor the service provided by Healthwatch – Annual
<b>Our Big Conversation – Strategic Framework and Business Plan</b>	To be agreed	TEWV				To update Scrutiny Members undertake any further work if necessary.
<b>Review of the Housing Allocations Plan</b>	To be agreed	Anthony Sandys/ Janette McMain	Enough support for people when needed	Spend every pound wisely  Build strong communities		To update Members on the implementation of the Housing Allocation Policy
<b>CCG Stroke Services/Review of Stroke Rehabilitation Services</b>	To be agreed	Katie McLeod CCG	More people healthy and independent	Spend 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

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<b>Better Care Fund</b>	To be agreed  Last considered 2 September 2020	Paul Neil				To receive an update on the position of the Better Care Fund for Darlington
<b>Director of Public Health Annual Report and Health Profile</b>	To be agreed - 2022	Penny Spring	More people healthy and independent			Annual report
<b>Monitoring Outcomes from the Medium Term Financial Plan 2016-20</b>  Impact of ceasing/ reducing the following and has there been any cost shunting to other areas within the Council as a result of:-  Voluntary Sector Funding	         Joint briefings 14 October 2020 and 10 March 2021	         Christine Shields	A safe and caring community  Children with the best start in life  More people healthy and independent	Build strong communities.  Spend every pound wisely	Full PMF suite of indicators	         To update Members following the monitoring and evaluation of this funded projects

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p><b>Primary Care (to include GP Access to appointments)</b></p> <p><b>To include:-</b></p> <p><b>Digital Health (formerly Telehealth)</b></p>	<p>Last considered 31 October 2019</p> <p>Last considered 19 December 2018 ; and by Review Group 16 Nov 2016</p>	<p>Rebecca Thomas CCG/ Amanda Riley PCN</p> <p>Ian Dove CDDFT</p>	<p>More people healthy and independent</p> <p>More people active and involved</p>	<p>Build Strong Communities</p> <p>Spend 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><b>Childhood Healthy Weight Plan (Childhood Obesity Strategy)</b></p>	<p>Last considered 30 January 2020</p>	<p>Ken Ross</p>	<p>Children with the best start in life</p>	<p>Spending Every Pound Wisely</p> <p>Build Strong Communities</p>		<p>To review the effectiveness of the Childhood Healthy Weight Plan on childhood obesity and mental health links in children and young people.</p>
<p><b>Crisis Service Changes</b></p>	<p>Last considered 21 October 2020</p>	<p>Jennifer Illingworth, TEWV</p>	<p>Enough support for people when needed</p>	<p>Spend every pound wisely</p>		<p>To receive a briefing and undertake any further detailed work if necessary.</p>
<p><b>Right Care, Right Place</b></p>	<p>Last considered 21 October 2020</p>	<p>Jennifer Illingworth, TEWV</p>	<p>Enough support for people when needed</p>	<p>Build strong communities.</p> <p>Spend every pound wisely</p>		<p>To receive a briefing and undertake any further detailed work if necessary.</p>

<b>Topic</b>	<b>Timescale</b>	<b>Lead Officer/ Organisation Involved</b>	<b>SCS Outcome</b>	<b>Darlington Conditions</b>	<b>Link to PMF (metrics)</b>	<b>Scrutiny's Role</b>
<b>Tenancy Policy</b>	Last considered 21 October 2020	Pauline Mitchell	Enough support for people when needed	Build strong communities		To consider the updated Tenancy Policy.
<b>Non Elective Urology Briefing</b>	Last considered 16 December 2020	CCG	Enough support for people when needed			To receive a briefing and undertake any further detailed work if necessary.
<b>Integrated Care System (ICS) (Formerly Sustainability and Transformation Plan (STP) including the Better Health Programme (BHP))</b>	Engagement and Communication Strategy  Last considered 3 March 2021	Simon Clayton, NECS	More people healthy and independent	Spend every pound wisely  Build Strong Communities		To scrutinise and challenge progress of the principles underpinning the ICS and BHP and timelines for progress

**JOINT COMMITTEE WORKING – ADULTS SCRUTINY COMMITTEE**

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<b>Loneliness and Connected Communities</b>  <b>Adults and Housing to Lead</b>	Scoping meeting 28 January 2020  Meeting on 5 October 2020  Meeting on 15 December 2020					
<b>CQC Ratings in the Borough of Darlington</b>  <b>Health and Housing to lead</b>	Scoping Meeting held 18 November 2019  Briefing note circulated 21 October 2020					To monitor and evaluate CQC scoring across the Borough for heath and care settings.

Page 7

**JOINT COMMITTEE WORKING – CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE AND ADULTS SCRUTINY COMMITTEE**

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<b>Autism Provision Review Group</b>	Scoping meeting held 2 March 2020  Meeting held 24 February 2021  Report to scrutiny on 14 April 2021		Enough support for people when needed			To review the provisions and services and contractual arrangements between this Council and our providers who provide the Autism provisions, diagnoses and support services for Darlington.

**QUAD OF AIMS (MEMBERS' REQUEST FOR ITEM TO BE CONSIDERED BY SCRUTINY) Appendix 2**

**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.

Page 75

<b>REASON FOR REQUEST?</b>	<b>RESOURCE (WHAT OFFICER SUPPORT WOULD YOU REQUIRE?)</b>
<p>Review of Adult Care Services during Covid</p> <p>A review has already been carried out of Children’s Services (by the Children &amp; Young People Scrutiny Committee), on how they coped during the pandemic, how the service users and their families found them, and any changes which need to be made as a result, or any ongoing needs which might be identified. It would seem very relevant to carry out a similar review for Adults Services – in conjunction with the Health &amp; Housing Scrutiny Committee to learn for any future waves of coronavirus and associated restrictions / lockdowns, or indeed any other future disease outbreak response which may be required.</p>	<p>ASC Staff time to input into parts a and b, and to contact adults in receipt of care to invite them to take part and support them to do so if needed.</p> <p>Democratic services time to support parts b, c and compile the report in d.</p>
<b>PROCESS (HOW CAN SCRUTINY ACHIEVE THE ANTICIPATED OUTCOME?)</b>	<b>HOW WILL THE OUTCOME MAKE A DIFFERENCE?</b>
<p>a) Invite ASC staff managers to detail how their services had to be changed throughout the pandemic in response to lockdown restrictions (much of this already exists in reports to scrutiny committees, but useful to bring it together in one place) – this would be a desktop exercise.</p> <p>b) Invite ASC staff and domiciliary care workers to provide their experience of how their services changed on the ground in practise, how they felt about it, their experiences</p>	<p>It will ensure that services which continue to be delivered remotely are done in the best manner possible for the end users (some may choose to continue remote services even after lockdown restrictions are lifted for example), and allow learning for how best to deliver services if future restrictions have to be reimposed, for coronavirus reasons or any other future disease outbreak. It would also identify any ongoing needs e.g. mental health issues caused by the change to care during the coronavirus lockdown restrictions, which could then be addressed.</p>

from the front line of what worked and what didn't work so well, what they felt might have worked better – this could be a half-day hearing from staff invited to take part (via a Teams meeting) and/ or utilise the output from the staff survey.

- c) Invite adults and carers, in receipt of social care services to provide their feedback, experiences, what went well or badly, how they think the service could have been (or be) improved, and write this up as a report to ASC services – this could be a half or full day (or 2 half-day) hearing from adults invited to take part (via a Teams meeting) – clearly those who do not have technology available or know how to use it would require support to take part.
- d) Pull all of the above together into a report to ASC teams and report to the Adults Scrutiny Committee and the Health and Housing Scrutiny Committee.

**Signed Councillor Holroyd .....**

**Date .....2 March 2021.....**

**SECTION 2 TO BE COMPLETED BY DIRECTORS/ASSISTANT DIRECTORS**  
**(NOTE – There is an expectation that Officers will discuss the request with the Member)**

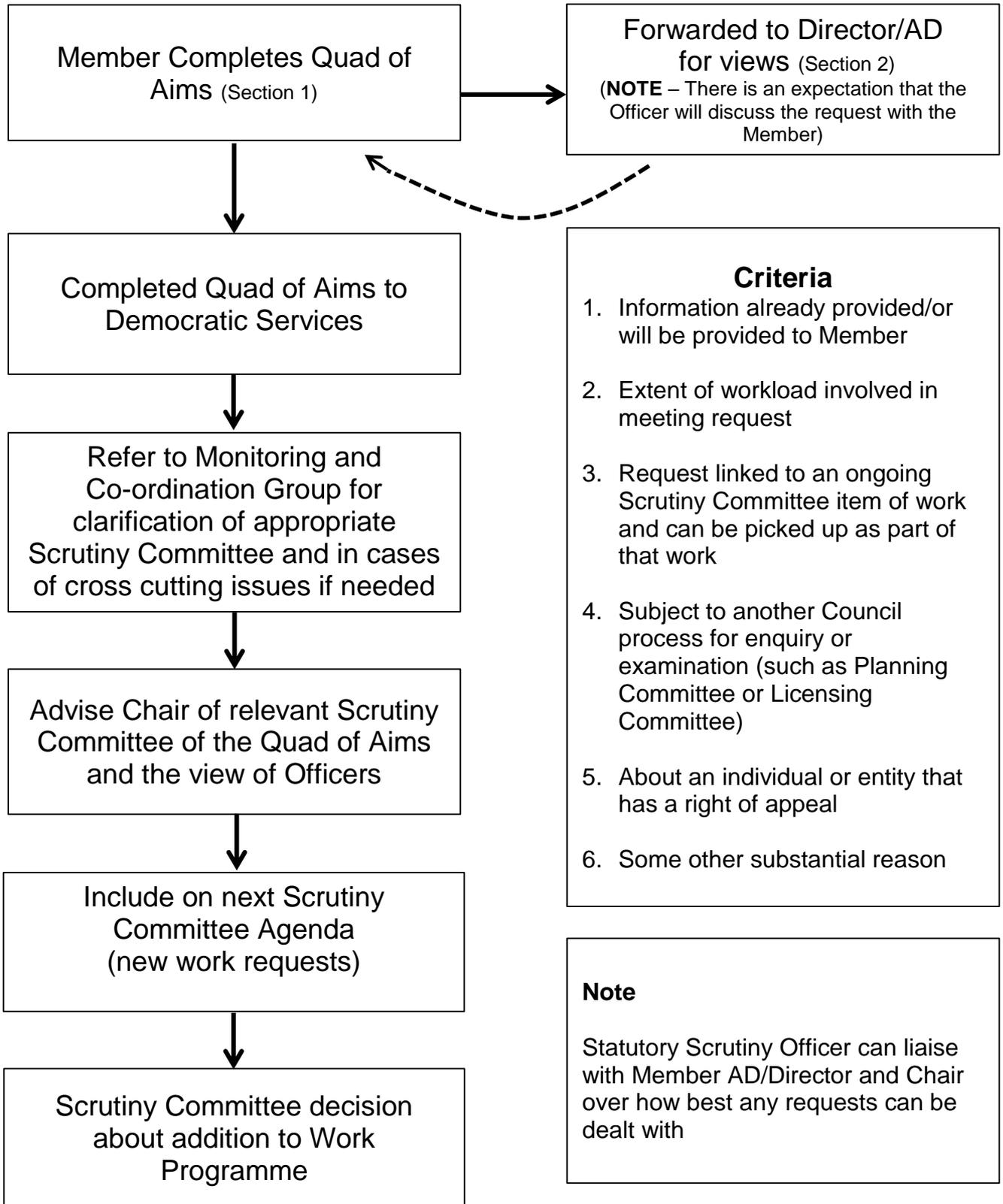
	<b>Criteria</b>
<p>1. (a) Is the information available elsewhere? Yes .....x..... No .....</p> <p>If yes, please indicate where the information can be found (attach if possible and return with this document to Democratic Services)</p> <p>Previous scrutiny reports – Covid update – Staff survey</p> <p>(b) Have you already provided the information to the Member or will you shortly be doing so?</p> <p>.....Provision of information to be supported by Democratic Services</p>	<p>1. Information already provided/or will be provided to Member</p> <p>2. Extent of workload involved in meeting request</p> <p>3. Request linked to an ongoing Scrutiny Committee item of work and can be picked up as part of that work</p>
<p>2. If the request is included in the Scrutiny Committee work programme what are the likely workload implications for you/your staff?</p> <p>Impact on officer time to be minimised by utilising information already collated. Therefore officer time should be mainly required in participating in TEAMS meeting (reference in B)</p>	<p>4. Subject to another Council process for enquiry or examination (such as Planning Committee or Licensing Committee)</p>
<p>3. Can the request be included in an ongoing Scrutiny Committee item of work and picked up as part of that?</p> <p>I believe this is a stand alone piece of work</p>	<p>5. About an individual or entity that has a right of appeal</p>
<p>4. Is there another Council process for enquiry or examination about the matter currently underway?</p> <p>No</p>	<p>6. Some other substantial reason</p>
<p>5. Has the individual or entity some other right of appeal?</p> <p>N/A</p>	
<p>6. Is there any substantial reason (other than the above) why you feel it should not be included on the work programme?</p> <p>No</p>	

Page 77

**Signed .....L.Thirkeld..... Position Acting Assistant Director Date 26/3/21**

This page is intentionally left blank

## 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?

Page 80

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)**

	<b>Criteria</b>
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? .....	

Page 81

**Signed** ..... **Position** ..... **Date** .....

**PLEASE RETURN TO DEMOCRATIC SERVICES**

This page is intentionally left blank

**FORWARD PLAN  
April to August 2021**



<b>Title</b>	<b>Decision Maker and Date</b>
Annual Procurement Plan 2021/22	Cabinet 13 Apr 2021
Locomotion No 1 and Replica	Cabinet 13 Apr 2021
Proposed Waiting Restrictions George Stephenson Drive - Objections	Cabinet 13 Apr 2021
Release of Capital Allocation in the MTFP - Capitalised Repairs in Corporate Buildings	Cabinet 13 Apr 2021
Stronger Communities Fund	Cabinet 13 Apr 2021
Customer Engagement Strategy 2021/24	Cabinet 4 May 2021
Children and Young People Scrutiny Committee Review - Effects of the Pandemic on Children and Young People	Cabinet 4 May 2021
Special Educational Needs and Disabilities (SEND) Capital Projects	Cabinet 4 May 2021
Partnership Working in Darlington	Cabinet 1 Jun 2021
Proposed Waiting Restrictions on Woodland Road, Outram Street and Duke Street	Cabinet 1 Jun 2021
School Term Dates 2022/23	Cabinet 1 Jun 2021
Collection of Council Tax, Business Rates and Rent 2020-21	Cabinet 6 Jul 2021
Project Position Statement and Capital Programme Monitoring Outturn 2020/21	Cabinet 6 Jul 2021
Project Position Statement and Capital Programme Monitoring - Quarter One	Cabinet 6 Jul 2021
Representation on Other Bodies 2021/22	Cabinet 6 Jul 2021
Revenue Budget Outturn 2020/21	Cabinet 6 Jul 2021
Revenue Budget Monitoring - Quarter 1	Cabinet 6 Jul 2021
Xentrall Shared Services Annual Report	Cabinet 6 Jul 2021
Complaints, Compliments and Comments Annual Reports 2019/20	Cabinet 7 Sep 2021

This page is intentionally left blank