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## 15 February 2019

### 1. Written question from **Mr Jones** for reply by the **Leader**

#### Question

At the last Council meeting I sought information regarding the number of Away Days attended by the Cabinet and the Executive Leadership Team (ELT) during 2018/19 along with a breakdown of the costs. Whilst I was provided with the dates, the venues and overall costs, I was not provided with a breakdown. Can you please, therefore, let me have a breakdown of the costs of each of the two Away Days held by ELT at Roffey Park which cost a total of £9,026.34 – by this I mean how much was spent on refreshments/venue hire/accommodation etc.?

#### Answer

The breakdown of the costs for the two Away Days are as follows:

10 to 11 May 2018

	Quantity	Price	Amount
Cancellations	1	141.34	141.34
Day	1	58.50	58.50
Half Day	19	45.00	855.00
Residential	18	162.00	2,916.00
Photocopying	20	0.35	7.00
		Net	3,977.84
		Vat	795.356
		Gross	4,773.20

15 to 16 November 2018

	Quantity	Price	Amount
Dinner	7	21	147.00
Day	7	58.50	409.50
Half Day	27	45.00	1,215.00
Residential	20	162.00	3,240.00
Photocopying	20	0.10	2.00
Photocopying	100	0.35	35.00
		Net	5,048.50
		Vat	1,009.70
		Gross	6,058.20

Day – tea, coffee, lunch and room  
Half Day – tea, coffee, lunch & room  
Residential – Dinner, Bed, Breakfast  
Photocopying – 10p Black & White,  
35p Colour

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The Corporate Leadership Away Days are focused on:

- Strategic issues and challenges which need to be addressed within the organisation;
- The co-design of solutions to the issues corporately across the organisation;
- Team building to ensure, particularly with a new team, the building of effective relationships for future working;
- An opportunity to develop talent within the organisation by including officers from outside the corporate leadership team; and
- A common understanding of the future direction of the organisation to achieve and share a collective ambition for the residents of our county.

The agenda is full and, therefore, timeframe for this extends beyond the 'normal working day', starting early and continuing often into the late evening. Any team development should focus on the opportunity for officers to work together but also to share time with each other to build effective relationships.

The focus of the Away Days is to come away with clear options and solutions.

## 2. Written question from **Mr Quinn** for reply by the **Leader**

### **Question**

In July last year the Government announced a shake-up of Local Enterprise Partnerships (LEPs), in order to boost performance, increase diversity and ensure they are operating in an open and transparent way.

The shake up included a need for LEPs to submit proposals for revised geographies to remove situations in which two LEPs geographies overlap.

I understand that with effect from April this year Coast to Capital LEP will no longer include Croydon or Lewes. Can the Leader comment on the loss of Croydon and Lewes to the Coast to Capital LEP; and also tell me:

- (a) What plans there are for a Committee to scrutinise the LEP;
- (b) How she thinks scrutiny of LEP decision making would work best and what the 'risks' of such scrutiny are (as referred to in the minute 5 of the Coast to Capital Board meeting 43, 22 January 2019); and
- (c) How the LEP plans to select two individuals to strengthen the board representing (1) Adur, Worthing, Arun and Chichester and (2) Horsham, Mid-Sussex, Crawley, Reigate and Banstead, Tandridge and Epsom and Ewell, assuming this is ratified by the Joint Committee in March?

### **Answer**

The decision to remove Croydon and Lewes from the Coast to Capital LEP (C2C) was made by the Government as part of a national policy to prevent areas from being in two LEPs. Croydon is also in the London LEP and Lewes is also in the South East LEP. From April the new Coast to Capital LEP will comprise the whole

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of West Sussex, Brighton and Hove and East Surrey. It will therefore have a much stronger focus on the West Sussex economy and this is to be welcomed.

Turning to the specific questions:

- (a) The C2C LEP has an assurance framework. This refers to the introduction of a new Scrutiny Committee, which was proposed by the C2C Audit Committee and will need to be approved by the Joint Committee of the Local Authorities at its next meeting in March.
- (b) C2C is working up the principles and detail of how the Scrutiny Committee will operate. In my view some of the key issues rather than 'risks' that C2C will need to consider in devising a scrutiny function are: managing members' expectations of the function through clear terms of reference; how scrutiny relates to the C2C Audit Committee; the tension between a wish for wide representation across the LEP geography as against a committee that is of a size that can work effectively; and devising a manageable and appropriate programme of work for scrutiny.
- (c) The Board (no. 43) agreed a proposal for one District and Borough representative to cover Adur, Worthing, Arun, Chichester; and a second to cover Horsham, Mid Sussex, Crawley, Reigate & Banstead, Tandridge, and Epsom & Ewell. This change will need to be put to the local authority Joint Committee at its next meeting in March for ratification. I understand that it is proposed that the Districts and Boroughs will make the nominations to the Board. I have welcomed and supported this development to ensure greater involvement by our Districts and Boroughs in the affairs of the LEP.

**3. Written question from Mr Jones for reply by the by the Cabinet Member for Adults and Health**

**Question**

Ahead of the formal meeting of the Cabinet on 29 January 2019, Cabinet Members announced that £750,000 in funding to support homeless charities would be made available in the budget to be discussed on 15 February.

I understand the intention of the Cabinet is that the funding is to be made available to organisations to help them transition to new arrangements following the council leadership's decision to make reductions to the housing related support funding, that comes into effect later this year. I also understand that in order to access this funding organisations will have to bid for it.

Can the Cabinet Member please set out in full the timescale for accessing this fund and the criteria and procedure to be followed?

Clearly the charities and organisations that this fund supported and that are going to suffer because of these future cuts will already have been trying to mitigate the effects of those cuts and will be looking for alternative sources of funding. So, why is the Council not just providing this money to help them to guarantee that they can continue to run for an additional, longer period? Surely it would be

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better to give this money to them without onerous requirements which risks this money failing to be claimed when we know it is desperately needed?

Furthermore, can the Cabinet Member explain what prompted her and fellow Cabinet Members to reach the decision to make £750,000 available in transitional funding having taken a decision in December to cut the housing related support budget by £4m over the next two financial years?

### **Answer**

The application process for the £750,000 transitional funding will be straight forward and will be ring-fenced to the existing providers, all of whom would be eligible to apply. This process will not be onerous. However, to be successful, bids would need to show that this is not simply putting off the inevitable but is transitioning to a new service model or funding source. Priority will be given to services based on the level of reduction faced and the sustainability of the proposal.

A timetable and simple process for the bidding is still being developed and communication regarding next steps will be in place by the end of February 2019. The decision to make this resource available was in direct response to the feedback received from the public, our partners and the Health and Adult Social Care Select Committee.

### **4. Written question from **Mr Oxlade** for reply by the **Cabinet Member for Adults and Health****

#### **Question**

- (a) In June last year the Cabinet Member took a decision to reconfigure the contract with Shaw Homes who currently deliver day care, residential and nursing services across 12 homes in the county. That decision included an investment of £1.1m in 2018/19 in order to enable Shaw Homes to employ an additional 71 full-time equivalent support workers and team leaders. Can the Cabinet Member please:
- (i) Tell me how many additional staff have been employed by Shaw Homes as a result of this investment;
  - (ii) Confirm that work to re-configure the contract is progressing well;
  - (iii) Assure me she remains confident the investment will see improved support arrangements for residents; and
  - (iv) Confirm there will be rigorous internal oversight of future arrangements given that the recent LGA peer review found management of this contract to be poor?
- (b) In October 2018 the Cabinet Member also took a decision to implement extensive changes to day services around the county. The first phase sees existing services currently delivered from Glen Vue in East Grinstead and

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Maidenbower in Crawley transferred to either Shaw Healthcare services (at Deerswood and Burley's Wood) or through other providers or individual solutions as identified.

There was a commitment that full feasibility studies to optimise the use of the existing leases at Glen Vue and Maidenbower would be carried out and there would be close liaison with local groups using the space so they may continue to provide their valuable services to the local communities.

I believe that negotiations with Age UK are progressing well with regard to them taking over Glen Vue. I would, however, appreciate it if the Cabinet Member could tell me:

- (i) Where residents will be able to access the services provided by each of the community groups who were delivering services from Maidenbower as of October last year, once the centre closes at the end of April;
- (ii) What it is proposed will happen to this facility after April; and
- (iii) Taking account of any interest expressed to date, what it is envisaged the facility will be used for?

**Answer**

(a) Shaw contract

- (i) Currently 22% of the additional staff required under the variation have been sourced and recruitment is on-going. Recruitment and retention of social care staff within the county, and nationally, remains a challenge. The County Council is improving its market support on this issue through its 'Proud to Care' initiative, a one-stop website for job seekers and interested individuals to get information about what it is really like to work in care apply for a variety of jobs in care across West Sussex - this website is scheduled to go live in late February 2019. Shaw is actively engaging with this initiative as well as a range of other options to improve the recruitment position.
- (ii) Work to reconfigure the Shaw contract is progressing. The first draft of the Legal Variation has been drafted and Acuity Legal has been instructed to manage this with our lead Solicitor. Given the level of investment and the size of the contract, it is important that this variation is managed robustly. Practical changes to the service are taking place alongside the legal variation process to ensure that customers are able to benefit from these improvements at the earliest stage possible, for example all the homes will have received the new equipment by 25 February 2019.
- (iii) The additional investment will see an increase in staffing levels across the homes, improvements in equipment and increased staff training, better transparency around data sharing issues and tighter monitoring of key performance indicators, particularly around quality

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of services. The County Council has made clear to Shaw its expectation for these services. Services will be monitored closely to ensure that this investment translates into real improvements in the standards of care provided across the Shaw homes.

In advance of this additional investment we are already seeing utilisation improving from 89% in October 2018 to 94% in January 2019, this is due to a focused operational investment. Increasing the staffing quotas in line with other services we will ensure greater access to the provision and improved quality in the services, particularly for individuals with more complex needs.

- (iv) The County Council has acknowledged that historically this contract has not received the rigour required. The contract now has dedicated resources in place to support this work. A directorate review of contract and commissioning services is currently in progress and this will further strengthen contract management across the department as well as strengthening the links with corporate contracts.

The adult improvement programme is maintaining oversight of the Shaw contract until the contract variation is in place and the new commissioning structures are embedded to ensure that this contract receives the robust scrutiny required.

I can also confirm that Paul McKay, Director of Adults' Services, will be meeting Shaw as part of monitoring the contract and improving performance.

(b) Maidenbower Day Services

- (i) Maidenbower Day Centre is occupied by the County Council under an agreement with Crawley Borough Council until 2056. As the County Council will no longer require the building once the day service closes at the end of April 2019 it is seeking to sublet the facility to a third party. This opportunity is currently being marketed and the marketing period is set to close on 22 February 2019.

The incoming tenants will be advised of the range of community groups accessing the facilities and it will be for these parties to negotiate arrangements in respect of this.

All current community groups have been advised of the process and the timescales, unfortunately the County Council cannot guarantee that the building will be available for these groups beyond the end of April.

- (ii) The centre has a planning use class 'D1 Non-residential Institutions' - Clinics, health centres, crèches, day nurseries, day centres, schools, art galleries (other than for sale or hire), museums, libraries, halls, places of worship, church halls, law court. Non-residential education and training centres. The property is being marketed on this basis.

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**5. Written question from Mr Oxlade for reply by the by the Cabinet Member for Adults and Health**

I understand that frail, elderly and vulnerable West Sussex residents are able to access a 13-week free trial in order to benefit from the technology enabled lives service (telecare service) to optimise their wellbeing and independence.

In May 2015 District and Borough Councils were told that West Sussex County Council would work with them to deliver telecare services from April 2016 but that subsequently it was decided that the County Council would procure a new contract for these services. Therefore, in December 2017 a Cabinet Member decision to commence a procurement process was published, with the intention being that a new provider would take up provision of the service from September 2018.

I am given to believe that this has not in fact happened. I would, therefore, be most grateful if the Cabinet Member could please:

- (a) Explain why the procurement of this service has not yet happened;
- (b) Outline her current intentions in respect of procuring this highly valued service;
- (c) Confirm that whatever the intentions are for delivering this service in the longer term that it will continue to include the 13-week free trial arrangement.
- (d) Confirm that there is no risk of legal challenge in respect of the existing contract arrangements (which I gather are currently delivered through a three month rolling contract arrangement); and
- (e) Confirm that she has continued to keep Coastal West Sussex, Crawley and Horsham and Mid Sussex Clinical Commissioning Groups (CCGs) informed, given that they jointly fund the service with the County Council?

**Answer**

- (a) Members will be aware that the procurement process in 2018 was paused whilst the County Council took the opportunity to review the current technology offer. A peer review was commissioned from Hampshire County Council, one of the leading authorities in the country in successfully delivering technology enabled care (TEC) to people with care and support needs. At its very best a modern and innovative technology offer supports people to stay in their homes and live as independently as possible for as long as possible and can reduce, delay and prevent the need for costly care packages and placements in care homes, not only improving outcomes for residents but providing significant financial benefits to the Council. Technology is moving at a rapid pace with new apps, wireless sensors and smart appliances appearing every week. New devices and apps can help people communicate with experts, seek urgent help, reduce social isolation, control the home environment as well as maintaining health, fitness and wellbeing. The beauty of digital delivery is that it does not need to be left at the door when people go out – it enables greater independence. It is our

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ambition to have this kind of service and the peer review helped us to understand the art of the possible, and use the procurement process to realise this ambition.

The peer review found that the current offer had some of the following problems:

- It has not been updated or kept pace with developments in care and health technology and has not established itself as part of the mainstream social care offer;
- It has low take up in adult social care with only 2.4% of the 4,500 contacts received each month about social care leading to a referral to the service. People only take up technology if they can afford it and are willing to pay for it which means that for a significant number of people improved outcomes are being missed. Because technology is paid for directly by customers, it is currently an optional 'add on' rather than an integrated and 'active' element of the care package people are deterred from using it: this is an unusual model; and
- The service, including policies, training and approach to referrals, is not aligned to a strengths-based approach to adult social care, which is person-centred and based on the principles of Care Act 2014, and is thus outdated.

By taking active steps to modernise, innovate, change practice and culture and mainstream technology in adult social care, the peer review has estimated that the service could reach a much higher number of people, will become a central consideration for all care packages, be available to all eligible people and will be at the forefront of maintaining independence, health and wellbeing across the health and social care system. Such benefits have been seen in counties such as Gloucestershire and North Yorkshire.

- (b) Our intention is to commission a service that is modern, innovative, that supports our vision and strategy to keep people well and independent in their own homes, reducing our current overuse of residential care and achieves maximum system benefits. The model also has to support the principles of the Care Act 2014. The current model therefore needs to be updated to reflect the vision and strategy and the findings from the peer review to meet this ambition.
- (c) In order to achieve the benefits as outlined above, our commissioning intentions are to support more residents who have ongoing care and support needs with technology.

TEC should be the default offer to all of our social care customers promoting the principles of choice, control and self-determination. By offering a 13-week trial period only, we are currently enforcing an arbitrary decision point where customers have to decide whether they want to continue or not. This decision can often be a financially-led rather than a needs-led one. We know that most customers who need TEC solutions have an ongoing need for care and not something that is resolved within 13 weeks.



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Should a customer decide not to continue to pay for TEC and end the 13-week trial they may be therefore placing themselves (and us as a County Council) at risk.

By providing technology to people with Care Act eligible needs we can means test via our normal financial charging arrangements, thus ensuring that customers who cannot afford to pay for TEC will be supported in any case. For those people with needs that do not fall under Care Act eligibility, and/or for self-funders we can potentially sign post to the borough and district councils who all offer TEC.

At present we know that on average 55 percent of customers choose to continue paying for TEC services after the 13 weeks.

- (d) Appropriate legal advice has been sought throughout.
- (e) We are, of course, engaging with our CCG colleagues as key partners in the recommissioning of the service. We actively and regularly engage with health colleagues as part of our ongoing programme of training and support to prescribers of and they were active participants in the peer review.

**6. Written question from Mr Quinn for reply by the Cabinet Member for Children and Young People**

In 2017 a study found a sharp increase in self-harm reported to GPs among teenage girls. It also found self-harming to be more common among young people living in deprived areas, with such youngsters being less likely to be referred to mental health services within 12 months of their first incident than those in more affluent areas.

I understand that half way through that year there was a significant drop in performance in respect of young people being referred to mental health support within 28 days. The drop in performance was attributed to a temporary reduction in performance by the service provider. At that time officers were meeting with the provider bi-monthly to discuss ongoing performance which included investigations of each breach of performance on a case by case basis, looking at reasons, actions and lessons learnt to inform service improvement.

Can the Cabinet Member, please:

- (a) Let me have figures in respect of the number of people referred to mental health services for each of the last 12 months (or for a period of 12 months, as up-to-date as possible);
- (b) How many of those young people were seen within 28 days; and
- (c) Whether there has been a sharp increase in West Sussex of self-harm among young girls over the last three years?

**Answer**

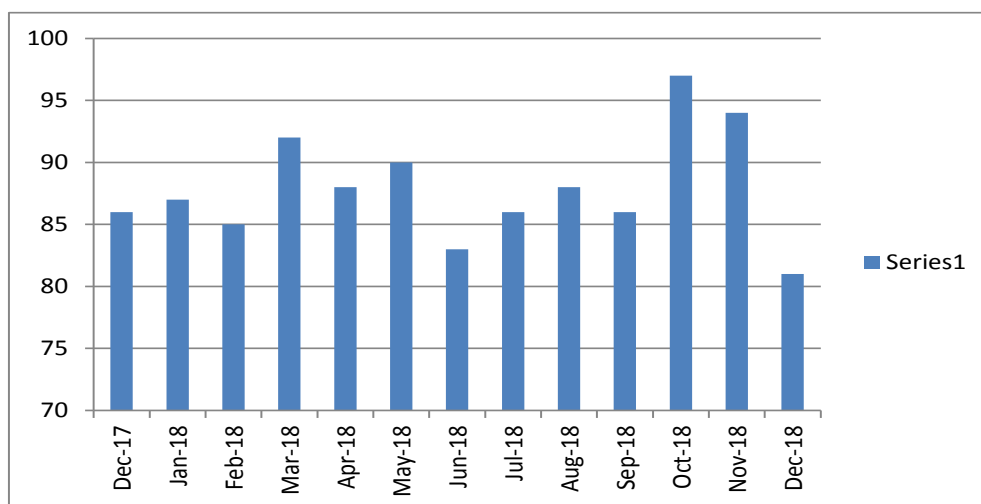
- (a) The numbers of children and young people referred to the specialist CAMHS

service (delivered by Sussex Partnership NHS Foundation Trust) in West Sussex in the last 12 months is:

December 2017	287
January 2018	314
February 2018	363
March 2018	297
April 2018	351
May 2018	334
June 2018	340
July 2018	212
August 2018	292
September 2018	292
October 2018	367
November 2018	433
December 2018	276
<b>Total</b>	<b>4,158</b>

It should be noted that a referral does not always translate into an acceptance to the service.

- (b) The percentage of accepted referrals for routine assessments which were seen within four weeks:



December 17	86
January 2018	87
February 2018	85
March 2018	92

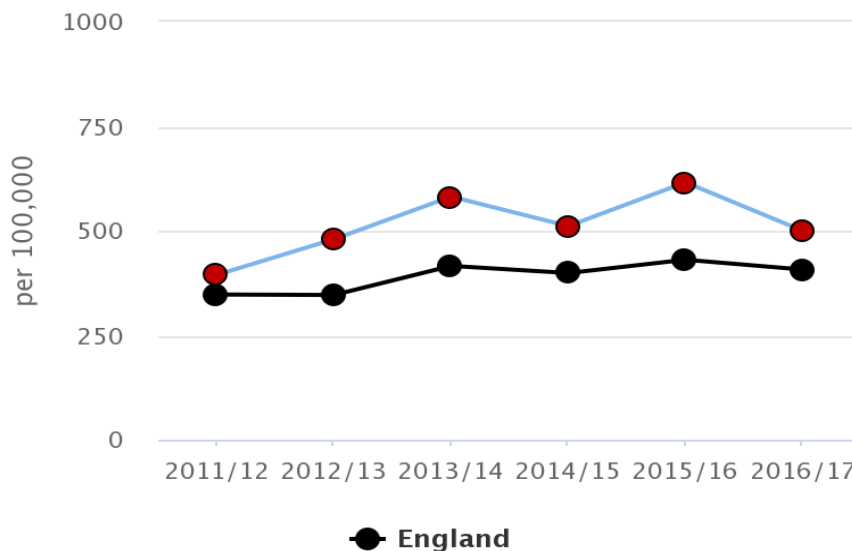
April 2018	88
May 2018	90
June 2018	83
July 2018	86
August 2018	88
September 2018	86
October 2018	97
November 2018	94
December 2018	81

- (c) Given the fact that self-harm is often a hidden and undisclosed behaviour data to answer this specific question is not available.

The data regarding admissions to hospital for intentional self-harm or self-injury is set out below.

This is recorded on the Public Health England dashboard and whilst West Sussex admissions remain slightly higher than the England average they have decreased since 2015/16. This is non gender specific and includes all children and young people up to the age of 24 years.

Hospital admissions as a result of self-harm (10-24 years) – West Sussex



National evidence would suggest that there is an increased incidence of self harm and that more girls are admitted to hospital than boys. There is no reason to assume West Sussex is any different in this regard though it should be noted that overall self harm admissions have reduced in West Sussex.