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15 July 2015



South
Cambridgeshire
District Council

To: Councillor Mick Martin, Portfolio Holder

David Bard Scrutiny and Overview Committee

Anna Bradnam Opposition Spokesman

Janet Lockwood Opposition

Dear Sir / Madam

You are invited to attend the next meeting of **ENVIRONMENTAL SERVICES PORTFOLIO HOLDER'S MEETING**, which will be held in **MONKFIELD ROOM**, **FIRST FLOOR** at South Cambridgeshire Hall on **THURSDAY**, **23 JULY 2015** at **11.00 a.m**.

Yours faithfully **JEAN HUNTER** Chief Executive

Requests for a large print agenda must be received at least 48 hours before the meeting.

	AGENDA	DACEC
	PROCEDURAL ITEMS	PAGES
1.	Declarations of Interest	
2.	Minutes of Previous Meeting The Portfolio Holder is asked to sign the minutes of the meeting held on 25 February 2015 as a correct record.	1 - 4
	DECISION ITEMS	
3.	Out of Hours Service Review	5 - 12
4.	Food Safety Plan The Environmental Services Portfolio Holder is invited to adopt the attached Plan.	13 - 30
	INFORMATION ITEMS	
5.	Active and Healthy for Life	31 - 40
6.	Single Shared Waste Service Memorandum of Understanding	41 - 50
7.	Local Traffic & Dog Wardens This item has been deferred.	
8.	Mental Health Crisis Care Concordat	51 - 70

STANDING ITEMS

9. Forward Plan

The Portfolio Holder will maintain, for agreement at each meeting, a Forward Plan identifying all matters relevant to the Portfolio which it is believed are likely to be the subject of consideration and / or decision by the Portfolio Holder, or recommendation to, or referral by, the Portfolio Holder to Cabinet, Council, or any other constituent part of the Council. The plan will be updated as necessary. The Portfolio Holder will be responsible for the content and accuracy of the forward plan.

10. Date of Next Meeting

Members are asked to bring their diaries.

OUR LONG-TERM VISION

South Cambridgeshire will continue to be the best place to live, work and study in the country. Our district will demonstrate impressive and sustainable economic growth. Our residents will have a superb quality of life in an exceptionally beautiful, rural and green environment.

OUR VALUES

We will demonstrate our corporate values in all our actions. These are:

- Working Together
- Integrity
- Dynamism
- Innovation

GUIDANCE NOTES FOR VISITORS TO SOUTH CAMBRIDGESHIRE HALL

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You are not allowed to bring into, or display at, any public meeting any banner, placard, poster or other similar item. Failure to do so, will result in the Chairman suspending the meeting until such items are removed.

Disturbance by Public

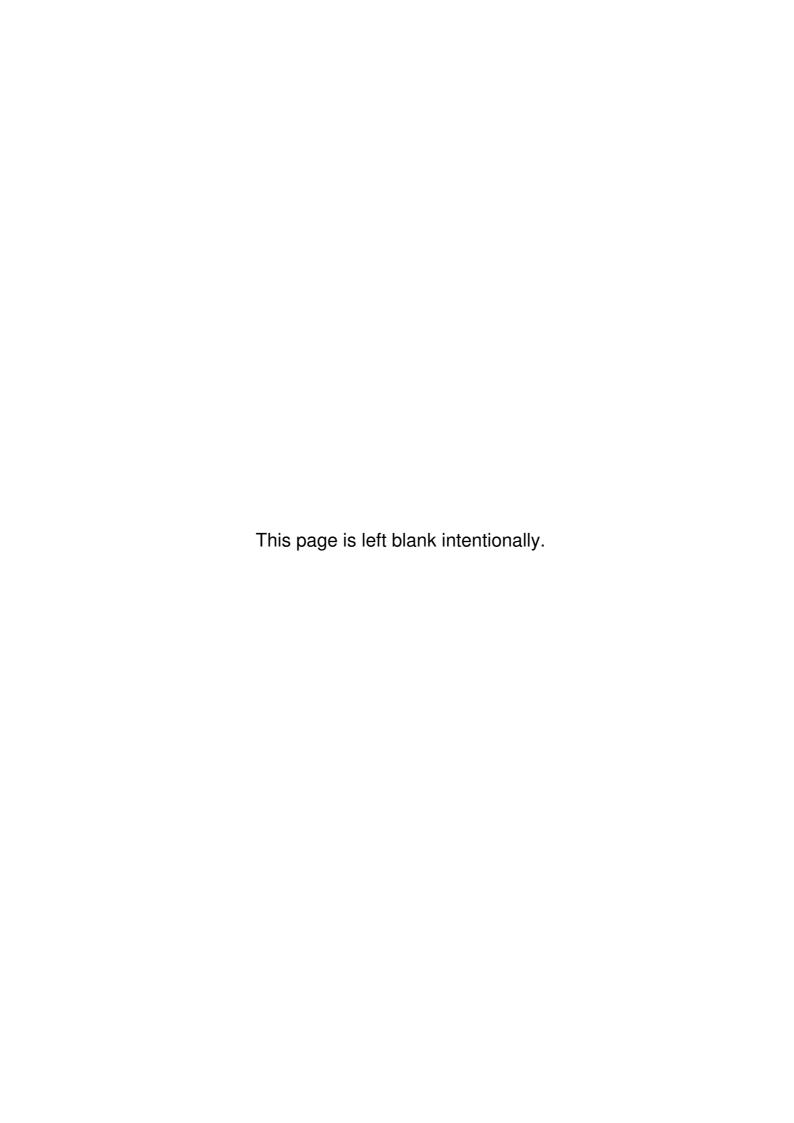
If a member of the public interrupts proceedings at a meeting, the Chairman will warn the person concerned. If they continue to interrupt, the Chairman will order their removal from the meeting room. If there is a general disturbance in any part of the meeting room open to the public, the Chairman may call for that part to be cleared. The meeting will be suspended until order has been restored.

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Agenda Item 2

SOUTH CAMBRIDGESHIRE DISTRICT COUNCIL

Minutes of the Environmental Services Portfolio Holder's Meeting held on Wednesday, 25 February 2015 at 2.00 p.m.

Portfolio Holder: Mick Martin

Councillors in attendance:

Scrutiny and Overview Committee monitors: David Bard

Opposition spokesmen: Anna Bradnam

Also in attendance: Kevin Cuffley

Officers:

Patrick Adams Senior Democratic Services Officer

Gemma Barron Sustainable Communities & Partnerships Manager

Mike Hill Health and Environmental Services Director

Paul Quigley Head of Environment Commissioning

1. DECLARATIONS OF INTEREST

None.

2. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting held on 12 December 2014 were agreed as a correct record.

3. WASTE AND RECYCLING TEEP ASSESSMENT

The Head of Service Environmental Commissioning presented this report, which recommended that the Environmental Services Portfolio Holder sign-off the Council's "TEEP" (Technically, Environmentally and Economically Practicable) Assessment to demonstrate compliance with the Waste (England and Wales) (Amended) Regulations 2012 (the Regulations).

It was noted that a RECAP (Recycling in Cambridgeshire and Peterborough) peer review had demonstrated that the Council's current collection scheme complied with the regulations as the separate collection of glass, metals and plastic was unnecessary and both environmentally and economically impractical. It was agreed that in response to recent concerns, the fact that the Council would not be introducing extra bins needed to be communicated to all the partnership committees currently discussing the building of new communities. It was understood that underground bin storage was being considered in areas of new build.

The Environmental Services Portfolio Holder

AGREED To sign-off South Cambridgeshire District Council's "TEEP" Assessment.

4. WASTE & RECYCLING SERVICE CHANGES - INTERIM UPDATE

The Head of Service Environmental Commissioning presented this report, which provided an interim update on the Business Improvement Efficiency Programme: Waste and Recycling service changes designed to achieve required efficiency savings that were agreed by Cabinet in February 2013. He explained that the £200,000 savings for 2014/15

would be achieved and he was confident that the target of £400,000 savings for 2015/16 would be met. It was understood that additional savings were expected from the Shared Service arrangements with Cambridge City Council.

It was noted that around 150 complaints had been received from residents about the service changes. It was understood that just over 50 of these complaints were received before the changes were introduced.

In response to concerns regarding the consequences for this authority should the County Council close any of its recycling centres, the Environmental Services Portfolio Holder explained that a mutual agreement existed with the County Council to ensure that neither authority made savings that would result in the other council incurring extra costs.

It was noted that a report on Waste Management was likely to go to Scrutiny and Overview Committee in April instead of March, to ensure that a full assessment could be made following the end of the financial year.

The Environmental Services Portfolio Holder thanked staff for their experience and expertise in implementing these changes and he

NOTED

- A) The progress and achievements of the project to date, in view of intended aims.
- B) That a full project end report will follow after financial year end, when a full assessment can be undertaken.

5. REVIEW OF THE ELITE ATHLETES AWARDS SCHEME

The Sustainable Communities and Partnerships Manager presented this report, which invited the Environmental Services Portfolio Holder to consider the future of the Elite Athletes Awards Scheme in light of the fact that £13,400 remained unspent in the budget for 2014/15 and a further £10,000 was budgeted for 2015/16.

In response to the suggestion that the unspent £13,400 be allocated to the Active and Healthy for Life GP Referral Scheme, the Environmental Services Portfolio Holder explained that that an update on this Scheme was expected in approximately six months time and he did not support awarding extra funds to the Scheme without proper costings.

The Environmental Services Portfolio Holder noted that the demand for grants from these schemes had declined nationally since the London Olympics and whilst he wanted the Scheme to continue he pledged to monitor its expenditure carefully. He understood that the Council's funding of Citizens Advice Bureaux had been reduced at a time when the District's residents' demand for its services had increased. He therefore supported the proposal to direct the £13,400 underspend in the Elite Athletes Awards Scheme to the Citizens Advice Bureaux budget, which came under the Leader's Portfolio.

The Environmental Services Portfolio Holder

AGREED

- a) To allocate £10,000 to the Elite Athlete Awards Scheme in 2015/16 as per the planned budget.
- b) To carry forward the outstanding total balance of £13,400 into 2015/16 on the

understanding that, with the Leader's agreement, it be reallocated to increase funding of Citizens Advice Bureaux by £13,400 in 2015/16.

6. FORWARD PLAN

Parking enforcement

The Environmental Services Portfolio Holder noted with concern that the Police did not consider enforcing parking restrictions in the District as a priority. However, he decided not to investigate the possibility of this authority appointing its own traffic wardens, as parking enforcement was not a District Council responsibility.

7. DATE OF NEXT MEETING

The Environmental Services Portfolio Holder agreed to schedule a meeting for	
Wednesday 15 April at 2pm, on the understanding that the meeting will be cancelled	l if
there is insufficient business.	

The Meeting ended at 3.35 p.m.

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Agenda Item 3



South
Cambridgeshire
District Council

Report To: Environmental Services Portfolio Holder 23 July 2015

Lead Officer: Mike Hill, Director, Health & Environmental Services.

Environmental Health & Licensing "Out of Hours" Service Review

Purpose

- 1. To seek the Environmental Services Portfolio Holder's agreement to proposed changes to the "Out of Hours" provision for Environmental Health & Licensing (EH&L).
- 2. This is not a key decision

Recommendations

3. It is recommended that the Environmental Services Portfolio Holder agree the proposed changes to the EH&L "Out of Hours" service to a risk-based approach, maintaining a 24/7 system to deal with significant emergencies such as fatalities, infectious disease outbreaks, and adopting a logging service with next-working-day response to all other enquiries.

Reasons for Recommendations

4. These recommendations will maintain 24/7 out-of-hours contact service for the public whilst re-introducing a risk-based approach to responding to emergencies, reducing costs, and freeing-up the expert, but limited, resources of SCDC EH&L officers.

Background

- 5. The Environmental Health Department has for a number of years provided an out of hours service to address emergency Environmental Health issues, staffed by SCDC Environmental Health officers on a rota basis. Each officer is on duty for a seven day period.
- 6. The service is intended to respond to 'emergencies' only (although these are not clearly defined) and is not an attempt to provide a 24/7 general EH&L advice or complaints service. In principle, an emergency would be an incident or event where there is a clear and imminent risk to the public that requires an immediate response from a qualified officer e.g. an outbreak of infectious disease, a fatal workplace accident. All "out of hours" calls are directed to the contracted "First Call" contact centre in Blackpool which determines, based on a criteria set by SCDC, whether to contact the officer on the rota.
- 7. Appendix A identifies the number of calls passed to officers over an 18 month period since January 2013 along with the number of visits that have had to be made by officers. Where visits have not been deemed necessary they will have been logged and dealt with on the next working day. This shows that the out-of-hours service dealt with only 2 contacts that required an immediate response from an expert EHO. All other contacts resulted in the Blackpool call-centre simply passing calls through to the duty EHO who provided telephone advice to the caller. This was not what the

- emergency out-of-hours service was intended to do, and non-urgent advice can be provided during normal working hours.
- 8. The service cost £14,937.08 to run in 2013/4, and costs are expected to be similar for 2014/15 & 15/16 allowing for inflation. These costs are made up of £10,600 in payments to staff to run the service and £4300 to "First Call" in Blackpool through a contract which is due to expire in March 2015. Given the very small number of true emergency calls received, this is an expensive and inefficient use of limited EHO staff time.

Considerations

- 9. In considering alternative arrangements for the EH&L "out of hours" service, officers have looked at what other authorities offer, detailed in Appendix B. Based on this, it is proposed that SCDC changes the EH&L Out-of-Hours service to:
 - (a) Maintain a 24/7 out-of-hours telephone number for the public to call.
 - (b) Clearly define emergencies and incidents that require an immediate response on a risk-based approach.
 - (c) Introduce a call-logging system for non-emergencies and commit to review and action these on the next working day.
- 10. Noise generally is not considered to be an emergency and if considered as such, it is likely it would be linked to Anti-Social Behaviour which can be dealt with by the Police. It is proposed that out-of-hours inspections to assess noise complaints continue on a pre-planned basis, as is current practice.

Options

11. The Portfolio Holder can accept, reject or amend the proposed changes. Rejection of the proposed changes risks continuing with a costly "reception" service for non-urgent calls and inefficient use of valuable expert EHO time.

Implications

12. In the writing of this report, taking into account financial, legal, staffing, risk management, equality and diversity, climate change, community safety and any other key issues, the following implications have been considered: -

Financial

- 13. Subject to the final recommendation, there will be a financial saving of around £10k arising from reduced standby payments to EH&L staff. It is proposed to vire this money to the overtime budget to provide a contingency for pre-planned out-of-hours work.
- 14. It is intended to re-tender the out-of-hours call handling contract and seek opportunities to share this service across SCDC and potentially with other local authorities. This may deliver further savings, subject to any procurement process.

Legal

15. The proposed changes mirror arrangements already in place to provide emergency responses under the Civil Contingencies Act.

Staffing

16. This review is being conducted in agreement with EH&L staff as any changes would require formal changes to existing job descriptions.

Risk Management

17. The proposed changes to the system re-introduce a risk-based approach to responding to out-of-hours service requests and ensures staff can be ready to respond to true emergencies.

Consultation responses (including from the Youth Council)

18. EH&L staff have been involved in re-working the out-of-hours service.

Effect on Strategic Aims

- Aim 1 Engage with residents, parishes and businesses to ensure we deliver first-class services and value-for-money.
- 19. Improve efficiency and value-for-money within a viable financial strategy.

Background Papers

Where the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 require documents to be open to inspection by members of the public, they must be available for inspection: -

- (a) at all reasonable hours at the offices of South Cambridgeshire District Council;
- (b) on the Council's website; and
- in the case of documents to be available for inspection pursuant to regulation 15, on payment of a reasonable fee required by the Council by the person seeking to inspect the documents at the offices of South Cambridgeshire District Council.

Report Author: Myles Bebbington – Head of Service, Environmental Health &

Licensing

Telephone: (01954) 712922

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APPENDIX A

SCDC Out of Hours Service Statistics

	No of calls responded to	Number of visits made	Number of enforcement actions
01/01/2013- 31/12/2013	177	7	2 (2 noise abatement notices were served on SCDC tenants, these cases are no longer dealt with by EH)
01/01/2014- 30/09/2014	60	4 (2 for wind farm)	0

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APPENDIX B

OUT OF HOURS SERVICE - COMPARISON WITH NEIGHBOURING AUTHORITIES

HUNTS DC

No out of hours service offered – Snr management numbers held in case of emergency

EAST CAMBS

No structured service, 3 people hold an emergency phone $\underline{\textbf{FENLAND}}$

No out of hours service

CAMBS CITY

Dedicated out of hours service, staff employed to work a rota covering 24/7 as part of normal working hours.

PETERBOROUGH

No service – emergencies are dealt with using the emergency planning/resilience number.

All authorities offer Housing as an emergency service

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Agenda Item 4



South Cambridgeshire District Council Environmental Health & Licensing Service

Food Safety Service Plan 20015/16

This Plan links to the Corporate Aims and Approaches and also the service objectives, which are provided in the Health & Environmental Services Plan

Head of Service, Environmental Health & Licensing: Mr Myles Bebbington

Portfolio Holder/s: Cllr Mr M Martin

Approved:



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7.0	Equality and Diversity	17

Introduction

South Cambridgeshire food businesses are amongst the best in the country. The high levels of food hygiene and safety and commitment to maintaining standards by local businesses contributes to the high standards of health for people and communities of our District. This Service Plan sets out how South Cambridgeshire District Council (SCDC) will work with local food businesses over the next year to maintain these high standards and high levels of public confidence. Maintaining and improving standards of hygiene at food businesses is a local and national priority because of the potential high impact in terms of ill health caused by unhygienic food businesses and the high costs of treatment and care to the economy.

This Service Plan sets out the food safety and hygiene law enforcement activities to be delivered by SCDC under the Food Safety Act 1990 and associated EU Directives. We work closely with Cambridgeshire County Council Trading Standards Service who are responsible for food standards and descriptions, and controls on animal feedstuffs and are also beginning to explore opportunities of working closer with neighbouring authorities to develop resilience and pool expertise where necessary.

This Service Plan is a comprehensive document covering the entire food hygiene enforcement function set out in accordance with the requirements contained in the Framework Agreement on Local Authority Food Law Enforcement, published by the Food Standards Agency.

All businesses are treated in an equal manner in line with Council's guidance, policies and procedures.

In all our activities, account is taken of the ability of proprietors to understand written and spoken English. Where appropriate, written and verbal translations are provided. Contraventions and recommendations are always phrased in a clear manner.

The Authority recognises that the Food Law Code of Practice has been reissued and that may affect certain statements or assumptions in this service plan. SCDC will endeavour to be aware of any changes during the life of this plan and amend our actions as appropriate. It is noted that there are some changes which have 12 months compliance.

Background

1.0 Profile of the Authority

The area served by SCDC is approximately 350 square miles, much of which is farmland given to primary production of food, mainly cereals and vegetables. Villages range from small rural settlements to suburban and new village settlements such as Bar Hill and Cambourne. There are no large towns within the district, the largest village currently having a population of approx 7,100.

There are increasing opportunities in the District from economic development, particularly research and high technology industries and new housing, and the population of approximately 152,000 is rapidly expanding. New build and new villages will take the population to an estimated 188,000 by 2031, a 26% increase. The village of Cambourne is continuing to develop and will have a growing population currently of 7,600. Work has commenced on the proposed development of Northstowe and it is currently estimated that when completed, its population will be about 15,000. A revised Local Plan for the period 2011 – 2031 has been submitted for independent examination to the

Secretary of State for Communities and Local Government via the Planning Inspectorate and a response is likely by late 2015 the plan includes options for the further expansion of Cambourne and possibly new developments at Bourn Airfield and Waterbeach and the Cambridge city fringes.

With this projected growth it is anticipated that there will be a steady increase in the number of food businesses in the District. This increase has already started, with the SCDC Environmental Health & Licensing Service (EH&L) receiving an average of 18 requests for advice from prospective or new businesses each month.

2.0 Service Overview

2.1 The service aims and approaches and actions are included in the overarching Health and Environmental Services Plan 2015/16.

2.2 Profile of the Service

The Environmental Health and Licensing Service reports into the Health & Environment Services directorate led by Mr Mike Hill who in turn reports directly to the Chief Executive Mr Jean Hunter The team contributes to the health and wellbeing of South Cambridgeshire's people and communities by ensuring that risks to human health from food are properly controlled via education, advice and enforcement. It is the aim of the Service to ensure that food produced, prepared or sold in South Cambridgeshire is safe and without risks to health and meets appropriate quality standards.

- **2.3** The key tasks to deliver these objectives are:
 - To maintain a register of all premises where the service enforces food safety legislation.
 - To take the most appropriate action to ensure safe food following inspection of relevant food premises including the use of advice, informal correspondence, improvement and prohibition notices, formal cautions and the institution of legal proceedings.
 - To educate proprietors of food businesses in food safety matters and their legal responsibilities in relation to their business by the provision of advice, information and training courses.
 - To advise on the design of relevant food business premises prior to and during alterations and construction.
 - to seek feedback from food businesses on the service provided via our business customer surveys.
 - To promote and maintain the "FHRS" system or any future manifestation of the system

2.4 Service Delivery

Service is mainly delivered during office hours from the main Council offices situated at South Cambridgeshire Hall, Cambourne Business Park, Cambourne. The service is delivered proactively through programmed inspections and reactively by responding to complaints, intelligence or requests received by the Service. Service delivery can take place at any food business or at people's homes or place of work.

Businesses which trade out of hours, at weekends or during evenings only are inspected accordingly. An "Out of Hours" 24x7 emergency service exists for dealing with food hazard alerts and warnings and emergency food related issues.

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3.0 National and Local Drivers which shape the service

National Regulators code

- 3.1 The code was laid before Parliament in accordance with Section 23 of the legislative and Regulatory Reform Act 2007. South Cambridgeshire District Council acknowledges that it performs functions specified by the order and will develop an enforcement and inspection policy that is compliant with the Act. South Cambridgeshire District Council will approach its enforcement activities in the following ways:-
 - To carry out our activities in a way that supports business to comply with regulation and grow.
 - Provide business with simple and straight forward ways to engage with ourselves
 - Base our regiulatory activities on risk
 - Work with other agencies to share information relating to compliance and risk
 - Ensure that information, guidance and advice is available to those we regulate in order for them to meet their responsibilities of compliance.
 - Our approach to regulation shall be undertaken in an open, graduated, proportionate and transparent manner

3.2 Home Authority Principle and Primary Authority Scheme:

The Authority endorses and supports the Home Authority Principle as promoted by BRDO (Better Regulation Delivery Office). Officers give advice to companies and other food authorities on either a 'Home Authority' (see section 3.4.2 below) or 'Originating Authority' basis. The Service will liaise with the Home and or Originating Authority of a company whose premises have been inspected to pass information and if necessary, take enforcement action. The EH&L Service currently has no Home Authority arrangement but is an Originating Authority for one large manufacturer and as such receives requests for information and advice from other Local Authorities investigating complaints or wishing to find out details on processes and refer food complaints for investigation and comment.

3.3 BRDO also oversee the regulatory requirement that all Local Authorities should act as a 'Primary Authority' for any locally based businesses operating across more than one LA boundary, if so requested by that business. A Primary Authority agreement provides a much higher level of advice (assured advice) and support to businesses and liaises on their behalf with other Local Authorities on any policy and enforcement issues. At present SCDC does not hold any Primary Authority agreements, but, is working with partners in CCC Trading Standards to offer such partnerships during the year 2015/16

Local Drivers

3.4 Health and Environmental Services Service Plan 2014/15

The Council has now adopted a corporate Enforcement & Inspection policy that has been through a consultation with a number of businesses within the district covering a wide range of activities. The council supports the new Regulators Compliance code (policy attached as Appendix)

3.5 Liaison with Other Organisations

The established County Officer Food Liaison Group collaborates well. Departmental procedures are shared Countywide to promote consistency and ensure that any "national" changes are reported and acted upon accordingly. A Chief Environmental Health Officers Group (Now renamed "Public Protection Steering Group") functions at a strategic and management level. It approves the work of the Food Liaison Group and monitors its activities.

Liaison with the FSA, CQC, HPA, and CCC Trading Standards exists through the County Food Liaison Group and ensures regular updates of food premises registration information is provided to our Trading Standards and HSE colleagues.

Other partnerships with a food safety agenda include:

- The Cambridgeshire Health & Wellbeing Board and South Cambridgeshire Local Health Partnership.
- Both the Cambridgeshire Obesity Group and the South Cambridgeshire and Cambridge City Locality Obesity Group.
- The Cambridgeshire Food and Health Group.

Close liaison exists with SCDC colleagues in Building Control, Planning and Business Rates with regard to food businesses

Quality Drivers

3.6 Performance Measures

The role of EH&L Officers when undertaking food duties is to provide advice to businesses to get it right, and to identify and remedy matters that might pose a risk to food safety. The EH&L Service has identified its key performance measure as the percentage of major non-compliant businesses brought to compliance. Additionally, the Service monitors intelligence received from partners and members of the public, as well as key management information, including:

- The percentage of food safety inspections carried out for high risk premises and the percentage of other risk food businesses carried out including alternative intervention strategies.
- The percentage of complaints and requests for service, which are responded to within 3 working days.
- Monthly 1:2:1 meetings with officers to monitor workload, and assess quality of inspection records
- Regular team meetings to ensure cross team consistency in respect of inspections & enforcement

3.7 Access to Quality Services

South Cambridgeshire has introduced a set of service standards that aim to put customers first, deliver outstanding services and provide easy access to services and information. They place the customer at the centre of its service delivery and the EH&L Service shares these standards.

The SCDC Contact Centre acts as a first point of contact for food safety enquiries. The staff are trained to answer questions on food and hygiene issues. The service is available 8.00 am to 5.30 pm, Monday to Friday.

Customer feedback is encouraged and welcomed. The EH&L Service carries out a Business Satisfaction Survey, the results of which are considered and acted upon to improve customer service, results for the period 2014/15

indicate that approximately 86% of business customers were satisfied with the service provided.

3.8 Quality Assessment

Regular team meetings and 1:2:1's of the specialist food officers take place to share learning and information and internal quality monitoring is undertaken in accordance with:

- The Internal Procedure Monitoring Note.
- Food Premises Inspections Quality Control.
- Checking of correspondence.
- Checking of drafted notices.
- Consistency exercises

4.0 <u>Service Delivery</u>

4.1 The Food Service, Organisational Structure

- Qualified and competent officers undertake a range of duties including food hygiene, food fitness standards and the investigation of food borne illness.
- The Consultant in Communicable Disease Control (CCDC) is currently Dr Bernadette Nazareth based at Thetford Healthy Living Centre, Croxton Road, Thetford, IP24 1JD.
- South Cambridgeshire District Council deals with food safety issues whilst Cambridgeshire Trading Standards deal with food standards work. All Services work closely together on issues, for example dealing with food alerts from FSA and imported food matters. The Memorandum of Understanding between the two services was refreshed in 2014.
- Eurofin UK provides Services of the Public Analyst.
- The Food Examiners are the Health Laboratory service at Addenbrooke's Hospital 6th Floor. The HPA laboratories at Collingdale process food samples that we provide from the sampling programme.
- The Product Contamination Liaison Officer who is based at Huntingdonshire Police Headquarters, will investigate any criminal food adulteration.
- Due to the rural nature of the area. Inspections are issued monthly on a
 month in advance basis considering intelligence and risk profiles and
 officers may inspect premises or carry out other duties in another officer's
 district. This helps to ensure that our limited resources are flexible and
 where possible the inspection programme can be planned intelligently to
 reduce mileage and travelling time.

4.2 Scope of the Food Service.

For food safety and inspections the Environmental Health & Licensing Service provides the following services and key functions:

- Programmed food hygiene inspections of food premises within the District.
- Health and safety inspections and accident investigations in food premises.
- Responding to food alerts.
- Dealing with food and food related complaints and other service requests.
- Carrying out our annual food sampling programme.
- Registering and licensing food premises and mobile vehicles.
- Dealing with imported food and its origin.

- Website information, including the national Food Hygiene Rating System
- Investigating cases of food related illness and other infectious diseases.
- Food Safety awareness campaigns e.g. FSA campaigns and awareness projects.
- Securing compliance with the requirements of the Health Act 2006.

To facilitate maximum efficiency, external contractors are used, when necessary, to deliver low and medium risk food hygiene inspections, alternative enforcement work and food safety training courses. In order to maintain the best quality of service, SCDC retains the inspection of high risk premises by its own officers to ensure that resources are targeted on the appropriate categories of premises where risks have been identified. This allows for a greater degree of control over these premises and ensures continuity of enforcement activities.

Qualified and competent SCDC Officers also undertake dual food safety and health & safety inspections of Local Authority enforced premises, based on an intelligence-led, risk-focused inspection programme.

Emergency food safety issues are currently directed initially to a 24-hour out of hour's officer via a Contact Centre. In addition the Council's fully revised website is used to provide information about food safety services for consumers and business and also provides a direct email address for service requests duty.hes@scambs.gov.uk

Demands on the Food Service

4.3 Profile of food premises – April 2015.

There are 1,335 local food businesses mainly of retail or catering nature. There are few large food manufacturers located in the District.

Risk Category	Α	В	С	D	E	Other	Total
Number of	0	14	282	317	508	214	1335
premises							

4.4 National Food Risk Category Descriptions.

The visit frequency is the minimum we are required to carry out.

Α	High Risk visit at least every 6 months	D	Low Risk visit at least every 24 months
В	High Risk visit at least every 12 months	ш	Very Low risk visit every 60 months or use alternative enforcement strategy
С	Medium Risk visit at least every 18 months		

The profile of the district is updated continuously. The growth and development of the district results in continuous assessment of how the service is developed, this can be shown by the fact that the registered premises in 2009/10 numbered 1085 and has now risen to 1335

Currently there is one seasonal food business authorised under the vertical directive food legislation. Additionally, the following specialist businesses are located in the District:

- a) A production plant for Histon Sweetspreads producing preserves and jellies for national and international export. They also produce dried potato products and peanut butter.
- b) A bottled-water Plant

4.5 Food Safety Incidents

Officers will, on receipt of any food alerts relating to national food scare and issues, respond appropriately and in accordance with:

- The departmental standard operating procedure
- Code of Practice issued under the Food Safety Act 1990
- Instructions issued by the FSA

The majority of alerts issued by the FSA are for information only. The number of allergy-alerts are increasing but are primarily dealt with by CCC Trading Standards Officers. "Food Alerts For Action", whilst requiring immediate action, are not significant in number but can have an impact upon programmed inspections. Given the nature of food alerts, it is impossible to predict with any accuracy the likely work demand and resources required. each incident will require different levels of action, however if a food safety incident originates from an activity or business operating within the District then additional resources will be required in terms of officer hours.

4.6 Food Safety Promotion

Food safety promotion work is undertaken by the following methods:

 Activities are undertaken to promote food safety where possible including leaflet drops and magazine articles etc during Food Safety Week and at Council organised events such as Parklife.

5.0 Service Delivery

5.1 Food Safety and Hygiene.

Food Premises – Hygiene Inspections. The Authority currently follows the priority rating system identified in the Food Safety Code of Practice and aims to inspect 100% of high risk premises within one month of becoming due each and every year. Inspections consist of questioning the food business operator to discover their knowledge of food hazards and an inspection of the premises and food prepared there by observing food handling practices and procedures.

Category A premises are those with the highest risk, whether by the nature of the activities carried on there, or because of poor operating conditions. A special database software package for logging and tracking inspections and other activities is used, however this will be under review during 2015/16 as part of a corporate ICT review. Revisions in the FSA Code of Practice have provided the opportunity to deal with low risk premises by means other than an inspection; The Food service has and continues, under guidance from the FSA to develop a strategy for these premises through the year in consultation with local businesses and partners.

Revisits are made where there are concerns about food safety, using a structured risk-based criteria to enable revisits to be prioritised. It is anticipated that 10% of premises inspected will be revisited.

In line with the Enforcement Policy, Hygiene Improvement Notices are issued if work detailed on a previous inspection report has not been completed or if there are serious concerns about food safety during a current visit. These legal notices ensure that improvements are made within a reasonable timescale.

Hygiene Emergency Prohibition Notices are used where there is an imminent risk to health. This will normally involve the immediate closure of the premises. The reasons for closing premises include, for example, the discovery of pest infestations (mice, cockroaches), the absence of water / hot water; or very poor control over food hazards and / or cleaning.

5.2 Food Complaints

We investigate all complaints concerning food produced, stored, distributed, handled and / or intended for human consumption within the District to ensure that it is without risk to the health or safety of the public. Complaints regarding labelling etc. are forwarded to CCC Trading Standards in accordance with a county-wide documented protocol.

The scope of the EH&L Food Complaints procedure currently covers:

- Receiving food complaints.
- Investigation of food complaints.
- Action to be taken on completion of the investigation.
- Transfer of food complaints.

Most of the complaints received about food relate to food produced outside of the District, although others relate to more freshly made local foods from establishments such as restaurants, takeaways etc. Service standards are set for response times to complaints. Performance against these targets is regularly monitored. In general, complaints will be responded to within 3 working days, however the more urgent the matter, the speedier the response.

5.3 Advice to Businesses

It is a Council priority to support the local economy, targeting residents' problems whilst effectively supporting local business success. The Council is open for business in that it will provide business advice, diagnostics and workshops to enable the local economy to thrive. The recent Business Improvement and Efficiency Programme identified several projects to support business friendly approach, including a business register, regular newsletters, engagement with sectors which are in need of support, key account management and a stronger approach to dealing with enquiries. The service is looking to make stronger links with trading standards over the following year and is seeking to draft a business case for the creation of a business hub to provide consistency of approach and assured advice to business..

While the Authority will utilise its powers to enforce food legislation if needed, it is recognised that providing early advice and support to businesses is the best way to achieve compliance, protect public health, and increase business success whilst reducing costs. As a consequence it is the Authority's policy to provide advice to businesses in a number of different ways:

- During programmed or other inspections.
- The provision of advice to any food business proprietor on how to comply with the law and on best practice. This may be prompted by Licensing, Planning or Building Control applications.
- The provision of free advice leaflets.

- The production of Food Safety News newsletters which are sent to all food businesses in the district.
- Information on our website.
- Business links –articles in business newsletters.

In support of the departmental and Council aims, the Environmental Health & Licensing team offers advice and information when required or when requested. Officers respond positively to requests for advice from proprietors of food businesses within 10 working days.

5.4 Food Sampling

Microbiological food sampling is carried out to meet 5 main objectives:

- To determine the current state of food safety in the District as part of a structured sampling programme
- To improve the effectiveness of food hygiene inspections.
- To investigate suspected cases of food poisoning where a link with a local business or food is suspected
- To investigate complaints about food.
- To contribute to the recent online food sampling system (introduced 2013) known as STARLIMS, run by Public Health England

The formal food sampling plan links with Cambridgeshire Food Liaison Group, co-ordinated by Peterborough City Council as well as taking account of local trends and needs.

Staffing levels have precluded proactive sampling in recent years however this year we will contribute to Study 57 sandwich and potato fillings organised by PHE.

5.5 Control & Investigation of Outbreaks, Disease & Food Related Infectious

GP's across the District report suspected cases of food poisoning to the Consultant for Communicable Disease Control (CCDC) at the Health Protection Agency. The Local Medical Microbiology Laboratory at Addenbrookes Hospital also advises the CCDC of positive results for food poisoning and food/water related illness. The Food Safety Team are then advised and carry out investigations to discover, if possible, the source of the infection and also to minimise the likelihood of secondary cases.

The Authority has a documented procedure for the investigation of incidents of reported or suspected cases of food poisoning and a formal plan to cover the management of the investigation of outbreaks of food borne infectious disease. These documented policies have been developed in conjunction with the Consultant for Communicable Disease Control at the Health Protection Agency, Dr Bernadette Nazareth.

Information and guidance relating to infectious diseases and enteric disorders, are available and are distributed to all infectious diseases / food poisoning cases within the district

6.0 Review of Previous Year's Performance against Service Plan

The FSA Framework Agreement requires every local authority to review its previous years performance against its service plan. The review must identify where the authority was at variance from the service plan and, where appropriate, the reasons for that variance. This review details the performance of the food service for the financial year 20115/16 and must outline any significant issues that impacted on the delivery of the service.

At the end of this financial year, the intended actions as specified in the Health and Environmental Services Plan will be compared with what was achieved in the areas relating to food safety. The reasons for any variance identified will be stated and next year's plan will take these into account as lessons to be learnt from the previous year.

PERFORMANCE 2015/16	2014/15	ACTUAL
Number of Food Safety Inspections to High Risk	81%	96%
premises carried out as a percentage of those planned		
Number of Food Safety inspections carried out as a	61.4%	75.3%
percentage of those planned		
Number of food safety and hygiene complaints and	87.5%	88.9%
requests for service, responded to within the target		
Number of Food Premises inspected which are '	84.5%	83%
Broadly Compliant' with food safety legislation		

6.1 Food Premises Inspections

In 2014/15 a total of 239 food business premises were considered for an intervention (programmed inspection only) of which 110 were classed as risk group A, B, or C and 71 were risk group D. 58 interventions were planned at category E premises via a "low risk questionaire".

180 planned interventions were achieved, with 59 outstanding, of these 13 were A-D. In total of the 1335 premises within the district it was only neccesary to issue 4 improvement notices relating to food matters. There were 2 formal intervention notices served to premsies in the A or B categories

These figures reflect a a significant restructuring of Health & Environmental Services following the H&ES Directorate reorganisation, However it is anticipated that following advice from the FSA and the delayed recruitment of a specialist food officer that improvements will be continual through 2015/16. During 2014/15 the planned inspections were as follows:-

In addition there were a number of outstanding inspections as follows:-

During 2015/16 the planned inspections are as follows:-

In addition there are a number of outstanding inspections as follows:-

In order to assess the staffing requirement to ensure that the intervention programme is delivered a time recording project was undertaken in the final quarter of 2014/15. Analysis of the data is presented below:

Risk Category	Average Time
Α	180
В	130
С	105
D	95
E	55
Alternative intervention	15
New Business	120

The time allocation required to undertake the 2015/16 intervention programme plus outstanding work can therefore be estimated as -

Risk Category	Number of interventions	Time (minutes)		
Α	1	180		
В	14	1820		
С	201	21105		
D	105	9975		
E	46	2530		
Alternative intervention	64	960		
New Businesses	75	9000		
Total Time (Hours) 760 hours				

Category	Number of interventions	Time (hours)
Food related Infectious	173	346
diseases		
Food Complaints	88	176
New Business Advice	202	101
Food Sampling		37
	Total time (Hours)	660 hours

Accounting for travel and administrative time the total time comitment of the programme as a whole requires an allocation of 292 days (203 for planned work and 89 days for complaints, sampling etc). This is against a current allocation of 463 working days (based on an average officer working 185 days per annum, this factors in Holiday, sickness provision and continuing professional development) based on 1.5 fte Environmental Health Practitioners supplemented by a full time contractor undertaking food hygiene inspections. This indicates a potential over capacity of 174 days. This will allow for any promotions, project work or unforeseen food related issues that may arise.

6.2 Advice to Businesses

Officers have continued to give free advice and assistance to both the trade and public throughout the year on food safety and hygiene matters. In addition to advice given during the inspection process various advisory leaflets were produced and distributed to existing and new businesses. The way in which advice is given to new businesses is changing following the Health & Environment restructure that has created a new "working with business team". The team, now in its second year focuses on streamlining the process of both how we advise business and how we regulate businesses. One of the key aspects of the new team during 2015/16 is to create a single point of contact for new and existing business covering all regulatory aspects including, Food, Licensing, Planning and Health & Safety. In addition SCDC is creating a "Business Hub" which will expand on this theme to include other regulatory partners such as Trading Standards & Fire service.

6.3 Food-related Infectious Diseases

A total of 173 notified cases of food poisoning and suspected food poisoning were received up to 31 March 2015. No conclusive evidence was found to confirm that any registered premises were the source of the illness, reflecting the high-level of compliance achieved by South Cambridgeshire businesses.

6.4 Liaison with Other Organisations

All existing liaison arrangements have worked successfully throughout the year and there are no planned changes to these systems. However further liaisons with new organisations may be formed as the Primary authority status takes shape.

6.5 Staff Development

All staff have a personal development review annually where training needs are identified, Continuing Professional Development is encouraged at all levels and every member of staff has a personal development plan outlining their objectives for the year. All officers secured the necessary amount of CPD as required by the FSA in 2014/15.

7.0 Summary of service delivery actions for 2015/16

The requirement of the Service Plan is to improve yearly the achieved percentage of identified targets and identify where possible any improvements of a qualitative nature. Key service delivery actions for 20115/16 are outlined as follows:

Objectives	Actions	Target	Suggested Time Scale
Ensuring food is safe, businesses are successful and consumer confidence is high.	To embed an intelligence-led, risk-based approach to food work and undertake a range of interventions at food businesses targeting poor performers and giving 'light touch' inspection to better businesses.	To inspect all "High Risk" (Category A and B) premises / operations To identify and remedy any major non-compliances across any food business.	review due in April 2015
Ensuring consistency	Standardisation	All officers to	Ongoing

during food safety inspections	exercise/peer review to demonstrate consistency of enforcing officers Review existing processes and introduce I.T related tools to assist in consistency of inspection data.	continue monitored visit and peer review of scoring and take part in consistency exercises Officers to trial a remote working method to streamline the	
To continue to respond promptly and effectively to customer service requests, infectious disease notification, new business registrations and advise	To respond in the set response time for the service request	inspection process and ensure consistency of data 89% of the service requests responded to within the stated response time	Quarterly monitoring
To develop improved contacts and partnership working with other statutory bodies within the food safety field by developing a business friendly approach.	Membership of: Cambridgeshire and Peterborough Food Liaison group.	Attend meetings and participate in joint working	On going
To continue to monitor the safety of food and water in the district	To develop and implement a food-sampling programme to establish the microbiological safety of food sold in the District. To align the programme with Local and National sampling priorities	To carry out a full range of activities specified in the sampling programme	On going
Raise awareness of the requirements of legislation and promote good practice	To provide written information to businesses as part of all visits and to produce and distribute information through a wide range of media	To publish information and advice on the website this is helpful, accurate, and up to date.	On going
Ensure compliance with E coli guidance from the FSA	Work with Food Liaison Group to develop a	To access compliance on delivery of food	On going

	countywide approach. To take a graded approach with business to gain compliance.	hygiene inspection programme	
To achieve Primary Authority status with 2 or more partners	To work with Trading Standards	To Develop a minimum of 2 primary authority partnerships	August 2015

8.0 Resources & Workforce overview

8.1 Legal action is pursued within service budgets but with access to consultancy and contingency funds if required. If and when the Courts award costs, these monies are transferred back to the Service budget headings.

8.2 Staffing Allocation

There are currently 2.5 FTE Environmental Health Practitioners competent to carry out Food Conrol and Health and Safety inspections across all risk categories. A summary of anticipated workload compared to officer FTE is as follows:-

	Hours	Days
Officer Capacity (based on an annual availability of 1390hrs)	3475	463
Total Estimated Workload (incl travel & admin time)	2190	292
Difference	1285	171

8.3 Staff Development Plan

All staff have an annual personal and development review which results in a performance agreement and personal development plan these are reviewed at monthly one to ones and at a six monthly interim progress review. This framework aims to identify and track training and development needs. Food safety training needs are prioritised in the context of wider Environmental Health requirements identified within the service wide training plan. During 2014/15 all staff have started using the BRDO RDNA tool to assist their development and training needs as part of the authorities wider appraisal scheme. The training budget allocation for 2015/16 is adequate to fund the identified training needs for this year.

All staff complete a training record log to further assist in identifying development and training needs and for monitoring the competency of individual officers. The officers undertaking specific duties, such as dealing with approved premises, are identified and the training requirements assessed accordingly.

Whilst training is monitored and reviewed at monthly 1-2-1's, a new initiative for 2015 is flash training, a less formal one hour cascade presentation to encourage shared learning and expertise across the team.

9.0 Equality and Diversity

9.1 SCDC values people from all backgrounds and supports their right to respect and equality of opportunity. The Council is working to eliminate discrimination and prejudice from all it does and ensure that equalities becomes a central and essential element of our service planning and delivery, both as an employer and provider of services. Our Comprehensive Equalities Policy sets out specific principles and aims that we will follow in order to achieve our Commitment to Equality and the equality dimension of our Corporate Objectives and Values. Our enforcement policy adopts the ethos set out in the Regulators Compliance Code and each business is treated fairly in accordance with their individual needs.

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Agenda Item 5



South
Cambridgeshire
District Council

23 July 2015

REPORT TO: Environmental Services Portfolio

Holder's Meeting

LEAD OFFICER: Director, Health and Environmental Services

ACTIVE AND HEALTHY FOR LIFE (EXERCISE REFERRAL) SCHEME

Purpose

1. To update on the operation of the South Cambridgeshire Active and Healthy for Life scheme over the past six-months, as per the decision of the Environmental Services Portfolio Holder's meeting of 12 December 2014.

Recommendations

- 2. It is recommended that the Environmental Services Portfolio Holder:
 - (a) Notes the progress and achievements made since December 2014.
 - (b) Notes and comment on the action plan at Appendix 1.
 - (c) Agrees to a further update of the scheme in approximately six months time.

Background

- 3. The Council has supported an exercise referral scheme since 1995, run along the guidelines laid down in the NHS National Quality Assurance Framework on Exercise Referral.
- 4. The scheme is designed to initiate long-term lifestyle changes by encouraging an increase in patients' physical activity levels. Depending on the reason for referral to the programme, the scheme aims to achieve the following outcomes:
 - (a) Reduce the risk of coronary heart disease, coronary artery disease, and osteoporosis.
 - (b) Increase joint flexibility, muscle strength, and bone density.
 - (c) Help to control Type 2 diabetes through effective weight loss, and certain disabilities.
 - (d) Improve self-esteem.
 - (e) Lower blood pressure, total cholesterol levels, and help control stress.
 - (f) Increase independence.
 - (g) Promote sustained active lifestyles.
 - (h) Reduce the cost of inactivity across South Cambridgeshire.
 - (i) Be value for money for the Council.
- 5. The scheme currently operates in ten centres including eight village colleges, Cambourne Sports Centre and Prime Time Fitness, Girton. Registered health professionals (GPs, Practice Nurses etc) make the referrals and the classes are delivered by instructors at a minimum Level 3 on the Register of Exercise Professionals (REPS).

- 6. The scheme provides referred patients a 12-week supervised course of exercise with initial and final assessments. During the final assessment participants are encouraged to join suitable regular activities provided by the village college sports centre.
- 7. Following the Portfolio Holder's meeting on 12 December 2014 the management of the scheme was brought in house and a number of changes have been made.

Considerations

8. Review of the Scheme

During September to December 2014 we visited all nine centres delivering the scheme to re-establish a relationship and understand their working practices. This highlighted the lack of communication, direction and support the centres had received over the previous twelve months.

9. From these initial meetings the action plan at Appendix 1 was written to address issues we had uncovered.

10. Achievements over the past six months

- (a) Established a new data collection process in order to accurately monitor the scheme
- (b) Updated the Referral information leaflet and distributed these to all sports centres.
- (c) Arranged for sports centre staff to deliver referral leaflets to their local Health Professionals and GPs in order to develop a relationship with them.
- (d) Held meetings with all sports centres and instructors in October 2014, January 2015, March 2015 and June 2015. These are now regular quarterly meetings.
- (e) A programme of visits to referring agencies has commenced. Five GP surgeries in the North of the district have been visited so far.
- (f) Training on a new electronic database was held in March 2015.
- (g) A revised Service Level Agreement (SLA) and ICT user agreement were produced and issued to all centres.
- (h) From 1 April 2015 nine of the ten centres received new hardware on which to digitally record client referral information. There have been early teething problems but the majority of centres are using the system successfully.
- (i) Launched with a successful open day on 16 March 2015 a new centre at Prime Time Fitness in Girton; the tenth centre in the district to offer the scheme.
- (j) Material has been developed to promote the scheme including a new patient leaflet, improved webpage on the council site, and centre specific pop up banners and leaflets. Sports centres are being encouraged to take an active role in promoting the scheme.
- (k) In response to feedback from health professionals, changes have been made to the referral form to make it easier to complete. Information for health professionals about the scheme is being revised to make the benefits to patients and to GP practices clearer

11. Data Analysis

During 2014/15 218 clients accessed the scheme. This is a reduction of 17% on the figures presented for 2013-14. Please see Appendix 2 for more analysis.

Figures were lower in every centre except Linton, where a fitness instructor worked especially hard to promote the scheme locally, and Cambourne, where the previous year's figures were unusually low because staffing issues had prevented the scheme operating in the second half of the year.

The decline is consistent with an annual downwards trend in scheme numbers averaging around 10% a year since 2008/9, with the exception of 2013-14 where figures increased slightly.

Possible reasons for this decline could be attributed to:

- (a) The reduction in referrals from Health Professionals
- (b) An increase in options for supporting increased physical activity
- (c) The CHIP (Community Health Improvement Programme) due to early referrals by GPs for weight management
- (d) The healthy walks programmes
- (e) Figures from 2013-14 were artificially high, perhaps because some patients attending repeat sessions, i.e. not new referrals, were included or that 2014-15 included
- (f) The period of change from managing the scheme via a contractor to in-house
- (g) The fact we charge clients as opposed to other schemes in the County which are now free

12. Referrals

Referrals to the scheme came from 22 health agencies in the year 2014-15. Referring agencies include GP practices, hospital departments, health professionals, physiotherapies etc. 86% of referrals came from 14 GP practices in South Cambridgeshire, with three practices (Monkfield in Cambourne, Linton and Melbourn) accounting for 57% of referrals.

13. Reasons for referrals

Data has been collected showing reasons for referrals for 144 of the 218 appointments. These show the main reasons for referral as high blood pressure, joint/bone problems, obesity, risk of coronary heart disease and muscular skeletal problems.

Implications

14. In the writing of this report, taking into account financial, legal, staffing, risk management, equality and diversity, climate change, community safety and any other key issues, the following implications have been considered: -

Financial

15. The cost of running the scheme is currently being operated within budget and the end of year forecast is also within budget.

Legal

16. The scheme is run in compliance with the National Quality Assurance Framework (2001) and current best practice.

Staffing

17. Carrying out the coordination of the scheme in-house has meant re-prioritising the workload of existing staff. This is currently sufficient to enable the scheme to be managed in in compliance with the National Quality Assurance Framework (2001).

Risk Management

18. Each centre is required to sign a Service Level Agreement with the Council. The agreement clearly sets out the responsibilities of each partner. A further agreement is also in place regarding the IT hardware (tablets).

Effect on Strategic Aims

Aim 1 - Wellbeing

19. The Active and Healthy for Life scheme contributes to the Council's objective of working with GPs and partners to link health services and improve the health of our communities. The scheme is effective for medium and low risk populations for specific health conditions plus develops social networks of like-minded people.

Background Papers

Where the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 require documents to be open to inspection by members of the public, they must be available for inspection: -

- (a) at all reasonable hours at the offices of South Cambridgeshire District Council;
- (b) on the Council's website; and
- in the case of documents to be available for inspection pursuant to regulation 15, on payment of a reasonable fee required by the Council by the person seeking to inspect the documents at the offices of South Cambridgeshire District Council.

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Active and Healthy 4 Life Action Plan

	Objective	Action	By When	Responsible Officer
1	Increase the number of health professionals	Increase communication with health professionals	Ongoing	SM
	referring clients to the scheme	Email documentation	Sept 15]
	-	Face to face meetings	Ongoing	
		Attendance at practice meetings	Ongoing	
		Discussion at Local Health Partnership meetings	Ongoing	
2	Increase the number of referrals at each centre	Investigate how System 1 (NHS) can link with the electronic database so that health professionals can refer directly to the centres	Long term goal	Project team
		Work with GPs to link referrals with Health Checks	Ongoing	SM
3	Increase the number of clients completing the scheme	Review how the centres monitor the non- attendance of clients	Nov 15	HS
4	Maintain and develop the number of clients continuing to access the centre facilities on a regular basis after the 12–week programme	Encourage the centres to promote and advertise on going classes, memberships and activities Explore with sports centres alternative exit routes including SCDC supported projects like R4F, W4F	Visit centres twice per year	HS/Sports Centres
5	Improve the operation of the scheme within the centres	rove the operation of the scheme within Develop operating standards and guides for the Sep		HS
		Ensuring standards are maintained through regular visits and contact with centres	Ongoing	
		Support instructors and centres in the running of the scheme	Ongoing	
		Quarterly meetings with all centres and instructors	Next one October 15	_
6	Improve relationships and communication between health professionals and sports centres	Introducing sports centre managers and instructors to their local GP and health professionals	Ongoing as meetings arranged	SM
		Encourage sports centre staff to maintain promotional material in GP reception areas	Ongoing	HS
7	Launch the new online database to sports centres in order to digitalise referrals	Training with Sports centres and instructors on the new database	March 15	NR
		Purchase and distribute tablets to use in the sports centres	Jan 15	

		Produce an IT agreement	Feb 15	
		Monitor the use of the system	Ongoing	-
8 Use the electronic database to best m the needs of the programme		Updating and developing the health professional database across South Cambs and City	July 15	NR
		Review the reports function	Sept 15	
		Developing the system to iron out issues raised by instructors whilst inputting information to streamline the process	Ongoing	
9	Promote the scheme	Update the referral form and leaflet	Done Jan 15 Review Sept 15	HS/SM
		Produce sports centre specific pop ups for each sports centre	July 15	HS
		Produce sports centre specific posters and flyers for each sports centre	July 15	HS
		Take photos of centres and clients to include on centre specific material	July 15	Graphics/HS
		Gaining case study information to promote the scheme through the South Cambs Magazine and other publications	Dec 15	HS/SM
		Press releases and social media where appropriate	Ongoing	HS/SM
10	Streamline administration of the scheme	Review of Service Level Agreement	Nov 15	HS/SM
		Review the budget and where efficiencies can be made	Aug 15	HS/SM
		Review invoicing and payment process	Aug 15	HS/SM
		Develop the reporting and monitoring function	Dec 15	Project team
		Logging of all SLAs, instructor qualifications etc. IT agreement etc.	Ongoing	HS

1. Uptake of the scheme

Initial Appointments				
	2013-14*	2014-15		
CENTRES			Trend	
Cambourne	12	20	Up 67%	
Comberton	48	10	Down 79	
Cottenham	15	13	Down 13%	
Gamlingay	19	10	Down 47%	
Impington	29	21	Down 28%	
Linton	19	37	Up 95%	
Melbourn	50	46	Down 8%	
Sawston	49	47	Down 4%	
Swavesey	22	14	Down 36%	
TOTAL	263	218	Down 17%	

*2013-14 figures from Lynne Potter's 2013-14 Annual Report.

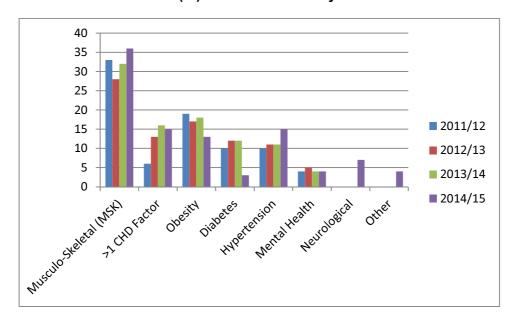
2. Origin of referrals

GP Surgeries and other referring agencies		% of total referrals
Sth Cambs GP surgeries		
Bassingbourn	2	2%
Cambourne (Monkfield)	11	11%
Cottenham	3	3%
Girton (Huntingdon Rd)	1	1%
Gt Shelford	6	6%
Harston	4	4%
Histon (Firs House)	5	5%
Linton	22	21%
Melbourn	26	25%
Milton	1	1%
Sawston	1	1%
Over	5	5%
Waterbeach	1	1%
Willingham	1	1%
Other referring agencies	1	
Royston (Part of CATCH area)	6	6%
Newnham Walk	1	1%
Fen House Ely	1	1%
Chesterton	2	2%
Papworth hospital	1	1%
Addenbrookes	1	1%
Physio	1	1%
Queen Edith	1	1%

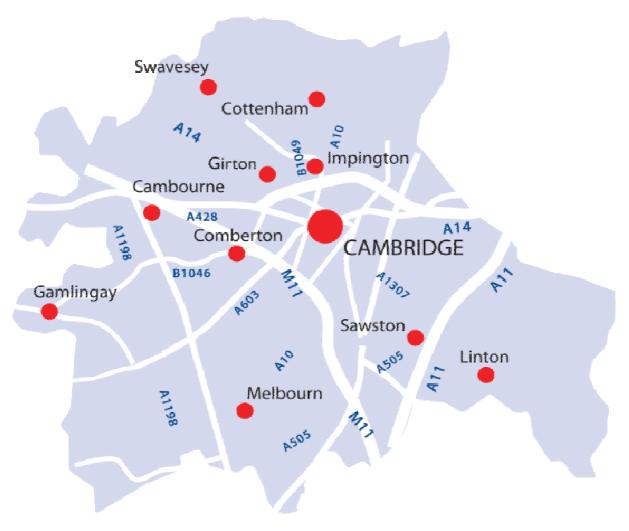
3. Reasons for referral

Referral reasons	Numbers	% of all referrals
Disability (MSK)	6	4%
Epilepsy (Neurological)	1	1%
Blood Pressure (Hypertension)	20	14%
Cholesterol	2	1%
Joint/bone problem (MSK)	30	21%
Asthma (Other)	3	2%
Diabetes (Diabetes)	5	3%
Chest pain/angina (>1 CHD)	5	3%
Cardiac (>1 CHD)	5	3%
Brain injury (Neurological)	1	1%
Obesity/weight loss (Obesity)	19	13%
Depression (Mental Health)	2	1%
Tendonopathy (MSK)	1	1%
Parkinsons (Neurological)	1	1%
Stroke (Neurological)	2	1%
Psychological (Mental Health)	5	3%
1 CHD risk (>1 CHD)	13	9%
Muscular/Skeletal (MSK)	15	10%
Neurological ((Neurological)	5	3%
Respiratory (Other)	2	1%
Crohns (Other)	1	1%
Total	144	100%

4. Reasons for Referral (%) over the last four years



5. Location of Centres



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Agenda Item 6



South
Cambridgeshire
District Council

Report To: Environmental Services Portfolio Holder 23 July 2015

Lead Officer: Mike Hill, Director, Health & Environmental Services

Single Shared Waste Service Draft Memorandum of Understanding

Purpose

- 1. To seek the Environmental Services Portfolio Holder's comments on the Single, Shared Waste Service draft Memorandum of Understanding (MoU) Appendix 1.
- 2. This not a key decision.

Recommendations

3. It is recommended that the Environmental Services Portfolio Holder comments on the draft Memorandum of Understanding to help shape development of the final version prior to discussion and agreement with Cambridge City Council.

Reasons for Recommendations

4. In October 2014, SCDC Cabinet delegated authority to implement the creation of the Single, Shared Waste Service and Single Shared Waste Board to the SCDC Director of Health & Environmental Services in consultation with the SCDC Portfolio Holder for Environmental Services and equivalents at Cambridge City Council. Seeking comments on this draft MoU forms part of that consultation and implementation process.

Background

- 5. In October 2014, SCDC Cabinet and Cambridge City Executive Member agreed to create a "Single Shared Waste Service, wholly owned and run by the local authorities, with a single management structure and workforce, located at the Waterbeach Depot using a single pool of vehicles for Cambridge City and South Cambridgeshire District Council."
- 6. Much practical work has been undertaken to implement this agreement. To support this work, a draft Memorandum of Understanding (Appendix 1) has been drawn up to set out the principles to which South Cambridgeshire District Council and Cambridge City Council will work in progressing the creation of the Single, Shared Waste Service.

Considerations

7. The purpose of the MoU is to set out the principles which the two Councils will apply in working to implement the Single Shared Waste Service. It is not intended to be legally binding, but to provide high-level guidance and agreement on the approach to this work while a more formal, legal agreement to support the Single Shared Waste Service is drawn-up. Once that legal agreement is signed, then the MoU will become redundant.

- 8. The MoU draws heavily on the RECAP Waste Partnership guiding principles previously agreed by SCDC Cabinet. These principles have been a very useful reference point in resolving complex partnership issues. The MoU also reflects the principles agreed as part of other shared-service initiatives.
- 9. While a full legal agreement is being developed to underpin the Single Shared Service, the MoU sets out the principles to support SCDC and Cambridge City Council entering into a joint lease for the Waterbeach Depot, and the development of a detailed budget for the Single, Shared Waste Service for financial years 2016-17 onwards.
- 10. The intention is to review and refine the MoU principles to ensure they remain suitable and relevant as detailed implementation work progresses and learning is identified. Major amendments to the MoU will be brought back to the Portfolio Holder for comment.

Options

- 11. The Portfolio Holder is asked to comment on the MoU and in particular, consider
 - (a) Are these the right "principles"?
 - (b) Are there any unintended consequences arising from the MoU?
 - (c) What amendments, additions or changes could be suggested for the MoU?

Implications

12. In the writing of this report, taking into account financial, legal, staffing, risk management, equality and diversity, climate change, community safety and any other key issues, the following implications have been considered: -

Financial

13. The MoU will help shape the development of a detailed budget for the Single, Shared Waste Service and associated benefits and cost-sharing mechanisms. The detailed budget will be agreed as part of the SCDC Corporate and Medium Term Financial Planning process.

Legal

14. The MoU in itself is not intended to be legally-binding on the two Councils. However, the principles will inform future legal agreements.

Risk Management

15. Agreeing an MoU will help reduce, manage and mitigate risks by setting out the principles by which the two Councils will implement the Single, Shared Waste Service.

Consultation responses (including from the Youth Council)

16. Development of this draft MoU has taken place in consultation with waste, finance and legal officers of both SCDC and Cambridge City Council.

Effect on Strategic Aims

Aim 2 – Work with Partners to create opportunities for employment, enterprise, education and world-leading innovation.

17. Lead the implementation of a single, shared waste service with Cambridge City Council.

Background Papers

Where the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 require documents to be open to inspection by members of the public, they must be available for inspection: -

- (a) at all reasonable hours at the offices of South Cambridgeshire District Council;
- (b) on the Council's website; and
- (c) in the case of documents to be available for inspection pursuant to regulation 15, on payment of a reasonable fee required by the Council by the person seeking to inspect the documents at the offices of South Cambridgeshire District Council.
 - 1. SCDC Cabinet, 16th October 2014, Item 9 Cambridge City & South Cambridgeshire DC Joint Waste Working.

Report Author: Mike Hill – Director, Health & Environmental Services

Telephone: (01954) 713229

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Appendix 1

Single Shared Waste Service - Draft Memorandum of Understanding

DATED SEPTEMBER 2015 MEMORANDUM OF UNDERSTANDING BETWEEN CAMBRIDGE CITY COUNCIL AND

SOUTH CAMBRIDGESHIRE DISTRICT COUNCIL SINGLE SHARED WASTE SERVICE

THIS MEMORANDUM is dated [DATE] 2015 BETWEEN

CAMBRIDGE CITY COUNCIL of The Guildhall, Market Square, Cambridge CB2 3QJ ("City Council")

SOUTH CAMBRIDGESHIRE DISTRICT COUNCIL of South Cambridgeshire Hall Cambourne Business Park, Cambourne, Cambridge CB23 6EA ("SCDC").

1. BACKGROUND AND PRINCIPLES

- 1.1. The Parties are the statutory waste collection authorities for the City of Cambridge and South Cambridgeshire respectively.
- 1.2. In October 2014 both parties "agreed to the creation of a single shared waste service (the Service), wholly owned and run by the local authorities, with a single management structure and workforce, located at the W resolved in Depot using a single pool of vehicles for Cambridge City and South Cambridgeshire District Council's.
- 1.3. The purpose of this Memorandum is to record the in principle agreement of the Parties to the creation of that Single Shared Waste Service
- 1.4. The key objectives of the parties are as follows:
 - 1.4.1. lower operational costs, particularly in the areas of premises, management, administration, fleet and equipment costs;
 - 1.4.2. maintaining and improving service quality that residents can see and appreciate;
 - 1.4.3. increased opportunities to market and compete for additional business, for instance in relation to trade waste;
 - 1.4.4. new opportunities to reduce net costs in relation to fleet procurement and maintenance;
 - 1.4.5. achievement of service improvements, greater resilience and better performance, through shared knowledge and experience; and

- 1.4.6. enhanced opportunities to work with other Cambridgeshire local authorities via the RECAP Waste Partnership to reduce waste collection and disposal costs, improve income and secure service improvements.
- 1.5. The Principles of collaboration are as follows:
 - 1.5.1. A 'Whole System' approach will be adopted to minimise costs to the public purse and avoid 'cost shunting' to any other public body.
 - 1.5.2. Neither party will knowingly do anything to the detriment of the other party
 - 1.5.3. Both parties commit to:
 - Building and maintaining trust and good relationships
 - Willingness to collaborate, co-operate and compromise
 - Transparency and openness
 - Strong leadership and clear governance
 - Good communication and continuous dialogue
 - Sharing best practice and information
 - Seeking out improvements and further efficiencies for residents and the
 Service and where possible securing these for the future
 - Equality of approach, recognising and respecting differences and acting in good faith
 - Fair and where appropriate equal contributions of resources to the creation of the Service to the benefit and mutual advantage of each Party
- 1.6. In this Memorandum any reference to the Service shall include:
 - 1.6.1. Domestic refuse operations, policy and management activities
 - 1.6.2. Trade waste operations (but, subject to any future agreements, initially not the two Councils' "commercial accounts")
 - 1.6.3. South Cambridgeshire DC Street Cleansing service.
- 1.7. Nothing in this Memorandum is intended to, or shall be deemed to, establish any partnership or joint venture between the parties, constitute either party as the agent of the other party, nor authorise either of the parties to make or enter into any commitments for or on behalf of the other party.
- 1.8. This Memorandum shall take effect on the date of signature by both parties

2. CO-LOCATION

- 2.1. The Service for SCDC currently operates from premises in Waterbeach ('the Waterbeach Depot) shown edged red on the attached plan and the Service for the City Council operates from premises in Mill Road
- 2.2. It is the intention of both parties that their individual waste collection services should co-locate at the Waterbeach Depot from November 2015. *An Agreement for Lease was completed to enable this on DATE.* This secures occupation of the

- Waterbeach Depot by both parties on a joint and several basis for a term of 25 years.
- 2.3. From the date of colocation the City Council and SCDC will share premises and in the first instance they will continue to run two separate waste collection services as they transition to the delivery of the single, shared waste service.

3. FINANCIAL PRINCIPLES

- 3.1. The fairest, simplest and most pragmatic way of sharing costs is on a proportionate hasis
- 3.2. Any costs and saving shall be calculated on the basis of "actual" costs and savings.
- 3.3. At the commencement of the Service the City Council and SCDC will each invest their Net service budget (their Initial Investment), based on 'Actual Outturn' for the financial year 2015/16.
- 3.4. In subsequent years, The City Council and SCDC will each pay the original Net cost of the Service, plus any inflationary uplift agreed as part of each Council's MTFS, minus any savings delivered in the preceding financial year.
- 3.5. Additional reductions or increases in the Net cost of the Service resulting from a decision made by either the City Council or SCDC acting as individual authorities shall be attributable to the particular authority implementing the decision.
- 3.6. Where additional savings or costs are delivered only as a result of working together as the single, shared service and arising from changes to the Service agreed by both parties, these shall be shared equally, unless this is manifestly unfair or inequitable, in which case savings shall be divided such that each Council receives the an equal percentage saving against base cost.
- 3.7. The relevant officers from SCDC and the City Council shall meet no less than quarterly to assess the distribution of costs and shall report to the Board with their findings before those costs distributions are made
- 3.8. The financial principles will be reviewed no less than 2 years from the date of this agreement

4. GOVERNANCE & MANAGEMENT

- 4.1. Decisions in relation to the creation and operation of the Service will be taken by the relevant Committees and Executive Members/Portfolio Holders for the two authorities or by officers within the terms of their delegated powers but will be informed by any representations made by the Shared Waste Board
- 4.2. The Shared Waste Board shall be formed to co-ordinate and provide joined-up direction to the Single Shared Waste Service. Each Council will nominate a senior Councillor and officer to sit on the Shared Waste Board. In addition, the Single, Shared Service Head of Waste Resources shall be a member of the Shared Waste Board.

- 4.3. Management of the officers employed by the respective authorities prior to and after creation of the Service will be through a single shared management structure, initially employed by SCDC as the Lead Authority.
- 4.4. The Parties agree to share all information necessary on an "open book" basis for the successful provision of the Service, including development and delivery of joint communications and publicity
- 4.5. The Parties shall comply with any notification requirements under the DPA and will duly observe all their respective obligations under the DPA, which arise in connection with this Agreement.
- 4.6. The Parties acknowledge that they are each subject to the requirements of FOIA and EIR and shall assist and co-operate with each other (at their own expense) to enable each Party to comply with the Information disclosure requirements of FOIA and EIR and acknowledge that Confidential Information may be disclosed to comply with FOIA and/or EIR obligations.
- 4.7. Each Party shall use its best endeavours to keep in strict confidence, and shall ensure that its employees and agents keep in strict confidence, all and any Confidential Information acquired by it (whether directly or indirectly), concerning the other Party in consequence of this Agreement.
- 4.8. To the extent that each party has ownership of any Intellectual Property, to the extent that such Intellectual Property exists at the Commencement Date, ownership of it shall remain with the Party which owns it at that date.
- 4.9. All press or other public announcements concerning the Service shall be:
 - 4.9.1. made only by the person or persons authorised from time to time by the City Council and the District Council to make such announcements
 - 4.9.2. notified to the other party at least 24 hours in advance where possible.
 - 4.9.3. agreed with the other party before being issued;
- 4.10. Each party will maintain its own individual statutory duties as waste collection authorities for their respective areas.

5. DURATION VARIATION AND TERMINATION

- 5.1. The arrangements set out in this Memorandum of Understanding will remain in operation until a Shared Service Agreement is completed and signed by all parties.
- 5.2. The terms of this Memorandum of Understanding may be varied with agreement of both parties such variation to be recorded in writing and annexed hereto.
- 5.3. The parties may terminate this agreement by mutual consent and through a signed written endorsement to that effect on this document
- 5.4. If either party wishes to resile from any or all of the terms of this Memorandum without the agreement of the other party they must serve a Notice to Terminate of no less than 18 months

- 5.5. The other party may within six months of receipt of such a Notice to Terminate serve on the originating party a Financial Implications Notice specifying the full implications of the Notice to Terminate for that Authority
- 5.6. Both parties agree that the SSA will
 - 5.6.1. Provide for service of a Notice to Terminate and a Financial Implications notice on the basis as set out in clauses 5.2 and 5.3
 - 5.6.2. Provide for indemnification of each party by the other against the financial implications of the Notice to Terminate as specified in the Financial Implications Notice.
- 5.7. All and any notices which are required to be given under this Memorandum shall be in writing and served on the relevant Director through personal delivery, post or electronic mail attached as a pdf
- 5.8. This Memorandum may only be varied by written agreement of the Parties. It is not intended to be legally binding, and no legal obligations or legal rights shall arise between the parties from this Memorandum.

Signed for and on behalf of the City	
Council	
Signature:	
Name:	
Position:	
Date:	
Signed for and on behalf of SCDC	
Signature:	
Name:	
Position:	
Date:	

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Agenda Item 8



South
Cambridgeshire
District Council

Report To: Environmental Service Portfolio Holder 23 July 2015

Lead Officer: Mike Hill, Director, Health & Environmental Services

SCDC Health & Wellbeing Plan - Mental Health Crisis Care Concordat

Purpose

- 1. To seek the Portfolio Holder's agreement to SCDC signing-up to the Cambridgeshire & Peterborough Mental Health Crisis Care Concordat as a contribution to the delivery of the SCDC Health & Wellbeing Plan.
- 2. This not a key decision.

Recommendations

3. It is recommended that the Portfolio Holder agrees to SCDC signing up to the Cambridgeshire & Peterborough Mental Health Crisis Care Concordat Declaration and Action Plan (Appendix 1 and 2).

Reasons for Recommendations

4. The SCDC Health & Wellbeing and Children, Young People and Families priorities agreed by Cabinet in October 2014 include focusing on the health of vulnerable people to prevent future crises, working with partners to improve the local "health system", and improving information sharing to with Partners. The Mental Health Crisis Care Concordat Declaration and Action Plan will support delivery of these priorities.

Background

- 5. The SCDC Health & Wellbeing, and Children, Young People and Families priorities agreed by Cabinet in October 2014 include focusing on the health of vulnerable people to prevent future crises, working with partners to improve the local "health system", and improving information sharing to with Partners. These priorities were developed by a Joint Portfolio Holder Task & Finish Group.
- 6. SCDC Homelessness, Housing Teams, Sustainable Communities, and Environmental Health & Licensing Services all regularly support residents with a range of emotional and mental wellbeing conditions. SCDC's work includes sustaining tenancies, improving access to health & wellbeing services (via the Active & Healthy 4 Life scheme), tackling hoarding and occasional anti-social behaviour.
- 7. In November 2014, a range of Cambridgeshire public sector agencies were invited to sign-up to the national Mental Health Crisis Care Concordat (Appendix 1) as part of work to deliver Priority 4 of the Cambridgeshire Health & Wellbeing Strategy. These agencies include Cambridgeshire Police, the Clinical Commissioning Group, MIND, local hospitals, and local authorities. South Cambridgeshire DC has the opportunity to be the first District Council in Cambridgeshire to formally sign-up to the Concordat.

8. As part of this partnership approach, SCDC has already committed £6k towards the joint-funding of a fixed term Crisis Concordat Delivery Manager (Lynn Mars) employed by the Police & Crime Commissioner's Office. The Delivery Manager has developed an Action Plan to support delivery of the Mental Health Concordat partnership priorities (Appendix 2).

Considerations

- 9. It is clear that no one, single agencies has all the solutions to preventing mental health crises and improving outcomes for residents with mental health conditions. Working with partner organisations is therefore crucial and committing to the Mental Health Concordat shows SCDC's support for residents and a partnership-approach.
- 10. While the Concordat includes improving how partners respond to mental health crises, there is also recognition that prevention and early intervention to avoid crises is hugely important. This is SCDC's preferred, agreed approach and is reflected in the Concordat.

Options

11. The Portfolio Holder could refuse to sign-up to the Mental Health Crisis Concordat and Action Plan and simply continue current work with partners and the Delivery Manager to deliver improved outcomes for residents. However, SCDC would then lose an opportunity to further enhance its reputation with both residents and partners.

Implications

12. In the writing of this report, taking into account financial, legal, staffing, risk management, equality and diversity, climate change, community safety and any other key issues, the following implications have been considered: -

Financial

13. SCDC has already committed £6k from existing H&ES budgets towards the funding of the joint Crisis Concordat Delivery Manager. At this time, no other financial implications have been identified from signing up to the Concordat.

Equality and Diversity

14. Signing-up to the Concordat enables SCDC to publicly demonstrate its commitment to providing and improving services suitable for those residents with mental and emotional wellbeing conditions.

Consultation responses (including from the Youth Council)

15. SCDC frontline staff are supportive of the opportunities to build better partnership working relationships that signing-up to the Concordat will deliver.

Effect on Strategic Aims

Aim 3 – Ensure that South Cambridgeshire continues to offer an outstanding quality of life for our residents.

16. SCDC will work with GPs and partners to link health services and to improve the health of our communities and to begin implementation of the SCDC Health & Wellbeing Plan and Children, Young People & Families Plan.

Background Papers

Where the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 require documents to be open to inspection by members of the public, they must be available for inspection: -

- (a) at all reasonable hours at the offices of South Cambridgeshire District Council;
- (b) on the Council's website; and
- (c) in the case of documents to be available for inspection pursuant to regulation 15, on payment of a reasonable fee required by the Council by the person seeking to inspect the documents at the offices of South Cambridgeshire District Council.

N/A

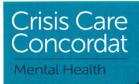
Report Author: Mike Hill – Director, Health & Environmental Services

Telephone: (01954) 713229

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Appendix 1

Mental Health Crisis Care Concordat



Cambridgeshire & Peterborough Declaration Statement

Cambridgeshire & Peterborough joint declaration on improving outcomes for people experiencing mental health crisis November 3, 2014

"We, as partner organisations in Cambridgeshire & Peterborough, will work together to implement the principles of the Mental Health Crisis Care Concordat to improve the system of care and support so people of any age in crisis, because of a mental health condition, are kept safe and helped to find the support they need – whatever the circumstances in which they first need help – and from whichever of our services they turn to first.

We will work together to prevent mental health crises happening whenever possible through prevention and early intervention.

We will make sure we meet the needs of vulnerable people in mental health crisis providing them with the right care at the right time and from the right service.

We will strive to ensure that all relevant public services, voluntary and private sector partners support people with a mental health problem to move towards recovery.

We will develop ways of sharing information, where appropriate, to enable front line staff to provide co-ordinated support to people in mental health crisis.

We are responsible for delivering this commitment to the people of Cambridgeshire & Peterborough by putting in place, reviewing and regularly updating our local Mental Health Crisis Care Concordat action plan.

This declaration supports parity of esteem, where mental health is valued equally with physical health. It does so in the following ways:

- Through everyone agreeing a shared care pathway to safely support, assess and
 manage anyone who asks any of our services for help in a mental health crisis. This
 will result in people with suspected serious mental illness, and their carers, being
 provided with advice and support and will ensure that services work together safely
 and effectively.
- Through agencies working together to improve individuals' experience, whether they are professionals, people who use mental health crisis care services, and/or carers, and to reduce the likelihood of harm to the health and wellbeing of these people.
- By making sure services for people of all ages in mental health crisis are safe and
 effective, with clear policies and procedures in place, and that organisations can
 access appropriate services and refer people to them in the same way as they would
 for physical health and social care services.
- By all organisations who sign this declaration working together and accepting our responsibilities to reduce the likelihood of future harm to staff, carers, patients, service users and the wider community, and to support people's recovery and wellbeing.
- By all organisations who sign this declaration working together and accepting our responsibilities to reduce the incidence of suicide."

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Appendix 2 – Mental Health Crisis Care Concordat Action Plan

	1. Commissioning to allow earlier intervention and responsive crisis services					
No.	Action	Timescale	Led By	Outcomes		
	Ma	atching local need with a	suitable range of s	services		
Governance of Crisis Concordat Group	Commissioning Grou Delivery Group is co-	•	very Group described Constabulary and Min	nd.		
1.	New emergency initiatives such as addressing Section 136 capacity, street triage and crisis houses. • Street Triage is part of a bid to CCG and Cambridgeshire Constabulary • PCC in negotiation with RSL to explore crisis house provision	1 Year project April 2015 – 2016 to be led by the Project Manager.	Sarah Hughes, John Ellis, Kevin Vanterpool & CPFT	 Reduction in the use of police cells as s136 as Places of Safety Reduction in the number of repeat s136 detentions Development of a co-ordinated menu of alternatives to hospital admission Provision of crisis house places across the county The development of an improved system of care and support so people of any age in crisis, because of a mental health condition, are kept safe and helped to find 		



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				the support they need – whatever the circumstances in which they first need help – and from whichever service they turn to first. Reduction in s136 sections which do not translate into access/admission to mental health services. Post s.136 discharge support and follow up.
		Improving mental h		
2.	Ensuring that the concordat is embedded into these strategies and action plans. • Adult and Older Peoples Social Care Mental Health Strategy (inc the Transforming Lives Model). • Public Mental Health Strategy — Cambridgeshire County Council	March 2015 – June 2015	Crisis Concordat Delivery Group	 Managing crisis features in all local strategy and policy. Organisational agreements about service expectations and response.

Crisis Care Concordat Mental Health

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 Local Healthcare redesign specifically the Mental Health pathway – Cambridge and
Peterborough CCG • Adult Mental Health Social Care Strategy — Cambridgeshire County Council
 Childrens and Young People Emotional Wellbeing Strategy
 Adult Mental Health Social Care Transformation – Peterborough County Council
 Suicide Prevention Strategy – Cambridgeshire County Council & Peterborough

 Impleing the Control of the Control of	mentation of are Act 2014 Children and les Act 2014 on 75 ments			
• Childres people suppo • Estable links Emotion being Healthe Group	en and young e's access to ort. lish formal to the CYP onal Well- and Mental	1 Year project April 2015 – 2016 to be led by the Project Manager	Juliet Snell – Centre 33	 Make sure services for people of all ages in mental health crisis are safe and effective, with clear policies and procedures in place, and that organisations can access appropriate services and refer people to them in the same way as they would for physical health and social care services. Improved support for people of any age in crisis because of a mental health condition. Cambridgeshire and Peterborough will have effectively commissioned services to support children and young people (CYP) and their families around mental health. Mapping and access report undertaken by C33. Link made to CCG Transformation Programme – Children's programme stream.

4.	People with multiple and complex needs access to services	1 Year project April 2015 – 2016 to be led by the Project Manager.	Vickie Crompton	 Equality of access to services by all. Shared professional understanding of service thresholds. Links to be made to Cambridgeshire's Making Every Adult Matter (Tom Tallon).
5.	Enhancement of current work such as liaison psychiatric services and suicide prevention.	1 Year project April 2015 – 2016 to be led by the Project Manager.	Acute Trust to lead Dr Adrian Boyle	 Implementation of psychiatric liaison with full evaluation Continuation of Cambridgeshire and Peterborough Stop Suicide Campaign.
		Ensuring the right num	bers of high quality	staff
6.	Hold a workshop to map all support pathways across the mental health system. This will dovetail with the work already being carried out by the CCG to review urgent care services (both 111 and out of hours).	March – May 2015	Juliet Snell Terry Prior Kim Dodd Sarah Hughes CPFT	 Clearer understanding by all agencies of the services available across the whole county to support people at the right time. Development of ways of sharing information, where appropriate, to enable front line staff to provide co-ordinated support to people in mental health crisis. Through everyone agreeing a shared care pathway to safely support, assess and manage anyone who asks any of our services for help in a mental health crisis. This will result in people with suspected serious mental illness, and their carers, being provided with advice and support



				and will ensure that services work together safely and effectively.
		Improved part	nership working	together safety and effectively.
7.	Identify and appoint a senior Project Manager to develop, implement and co-ordinate the work between agencies to progress the action plan. It is proposed that this post would be jointly funded by the Concordat signatories and will work on behalf of, and be accountable to, the Roundtable Group. This 12-month post (secondment or fixed term contract), would need to be of sufficient seniority to drive forward transformational change.	February – March 2015	Sarah Hughes MIND	 We will work together to prevent mental health crises happening whenever possible through prevention and early intervention. Partners are supported to ensure they are adhering to the commitments they made within the MHCCD through delivery of their areas of the Action Plan; Monitoring of mental health partnership issues which impact on the delivery of the MHCCD. This will create a champion for the delivery of the MHCCD ensuring its strategic principles influence future commissioning and partnership working.
8.	Information sharing and systems We will agree how all agencies can share information around	June - October	Dr Chess Denham CPFT Third Sector Representatives Amanda Smith to supply Chess with	Build and improve current information sharing protocols and communication between partner agencies to come into contact with people in mental health crisis



Crisis Care Concordat Mental Health

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	individuals through Information Sharing Agreements which enable those in crisis to receive the best outcomes. This will include looking at whether ECINS is the best conduit for this.		MOUs	
9.	Increased involvement of the third sector and service users at both the delivery group and roundtable.	April – July 2015	Project Manager	 Development of a multi-agency and service user led approach to prevention and early intervention. Develop a system for service user and carer feedback on experience of using mental health crisis services, for evaluation of mental health crisis response and to inform commissioning and progress in achievement of concordat declaration.
10.	1 year review event.	March – July 2015	Sarah Hughes & Nicky Phillipson	1 st July event to review progress to date and to celebrate achievements of the Crisis Concordat partners.
		2. Access to sup	port before crisis po	•

No.	Action	Timescale	Led By	Outcomes		
		Improve acc	ess to support via p			
11.	Increased geographical equity of IAPT and Counselling Services.	June – Dec 2015	Mind & CCG & other providers	Increase in the counselling capacity in north of county.		
12.	Building Community Resilience and Knowledge	2015 - 2018	Mind & Cambridgeshire County Council	 Community engagement programmes looking at emotional resilience and self care. Increased knowledge about how to access the right help at the right time. 		
13.	Stop Suicide Campaign	Ongoing	Mind, CCC, CCG and mental health partners	 Reduction in numbers of people dying in Cambridgeshire and Peterborough as a result of suicide. 		
	Imp	rove access to a	nd experience of mo	ental health services		
14.	Improve service user feedback and engagement. Sharing of good practice from client/patient perspective.	March 2015 – December 2015	SUN Jenny Swain	 Clear identifiable systems for service user engagement across all mental health providers and Cambridgeshire Constabulary, Accident and Emergency providers and commissioning teams. 		
15.	Crisis Concordat Delivery Group	November 2014 – March 2016	Mark Hopkins, Kevin Vanterpool, Sarah Hughes, Emily Gray (Chairs)	Continued review and direction of Crisis Concordat Action Plan.		
	3. Urgent and emergency access to crisis care					
No.	Action	Timescale	Led By	Outcomes		
		prove NHS emerg	ency response to n	nental health crisis		
16.	CCG to bolster crisis care	March 2015 –	CCG Dr Emma	Increased capacity within the crisis teams to provide		

	teams using resilience care funding.	June 2015	Tiffin	 support to those people who are in crisis especially in the North of the area. People in crisis to be supported to access GPs to secure ongoing help (people to get right support, at right time but he right people)
17.	STOP suicide campaign		MIND – Sarah Hughes Emily Gray Lifecraft	 right time by the right people) All organisations working together and accepting their responsibilities to reduce the incidence of suicide. Reduction in the number of suicides in the county. Better information for members of the public about how to help someone who is having suicidal thoughts. Clear pathway for individuals to get help – development of the Suicide Prevention pathway from community to secondary care.
18.	Increased use and publication of the Crisis Card App	March 2015 – October 2015	Sun Network	 Increased take up in individuals using the Crisis Card app which will improve access to help.
		ial services' cont	ribution to mental	health crisis services
19.	Development of the Adult Mental Health Social Care Strategy	March 2015 – June 2015	Kim Dodd	 Clarity about the role of social services for those in a mental health crisis. Refer to section 2.
20.	Transforming Lives Strategy.	2015	Cambridgeshire County Council	 Increased knowledge within all Tier 1 services about mental health needs. Prevention of mental health crisis. Refer to section 2.

Improved quality of response when people are detained under Section 135 and 136 of the Mental Health Act 1983



21.	See Action point 1 – priority to improve S135/6			
	Improved information and	d advice available	e to front line sta	aff to enable better response to individuals
22.	Continued mental health awareness training for front line professionals who are not mental health experts. All officers to continue to receive mental health awareness training via NCLAT package. Public Health are considering this training, alongside the multi-agency Mental Health First Aid training, to ensure that these programmes do not duplicate and meet training needs'.	Ongoing	Emma DeZoete Beth Goldsbrough, Public Health Steve Underwood Cambridgeshire Constabulary	 Training approximately 300 people a year across multiple professions and agencies to equip them to recognise and help people with mental health problems. Training select groups of front-line workers from professional and third sector organisations in recognising the signs and symptoms of mental health problems and suicidal behaviour in people encountered as a result of the work they do. To equip people who are most likely to encounter people with mental health issues or suicidal thoughts with the skills and confidence to support them and to enable them to seek professional help To increase mental health awareness in the population To improve mental health outcomes and reduce the risk of suicide in the population To help the development and planning of services, encourage multi-agency working and information-sharing between agencies Officers become more aware of mental health issues

23.	Stop Suicide Training Programme	Ongoing	Stop Suicide Team	 and are better able to identify, and provide immediate support to people suffering from a mental health crisis. ASIST training for mental health professionals and those who come into contact with someone having suicidal thoughts. Community training package to enable members of the public to increase knowledge and skills.
		Improved trai	ning and guidance fo	
24.	Blue light project to run programmes on emotional resilience and wellbeing for Blue Light personnel. This will be provided by MIND on the back of a successful consultation exercise supported by Cambridgeshire Constabulary	June 2015 – October 2015	MIND – Sarah Hughes & Emily Gray	 Improved resilience interventions for Police, Fire, Search and Rescue personnel. Improved response to trauma Six Resilience programmes across Cambridgeshire and Peterborough
25.	Mental health pathfinders (supporting victims and offenders) will continue to support colleagues to develop greater awareness of mental health issues.	January 2015 – March 2016	CPFT commissioned by OPCC to deliver this service	Colleagues from partner agencies working alongside the Mental Health Pathfinder Case Workers will increase their knowledge about how they can identify mental health issues. This will enable a general awareness raising of the wider mental health issue.



	Improved services for	or those with c	o-existing mental	health and substance misuse issues
26.	Service User engagement.	2015/2016	SUN – Jenny Swain	 Link with DAAT commissioned service engagement project. Developing a shared understanding of the obstacles faced by service users.
		4. Quality of t	reatment and care	e when in crisis
No.	Action	Timescale	Led By	Outcomes
	Review police use of places	of safety unde	er the Mental Heal	th Act 1983 and results of local monitoring
27.	Rapid Response Team to be created to provide support post crisis. MIND and CPFT working up a model. Pre and post section 136.	February 2015 - April 2015	Sarah Hughes and Dr Chess Denham	 Relevant public services, voluntary and private sector partners will support people with a mental health problem to move towards recovery. Improved response for those discharged in order to avoid 'revolving doors' or 'frequent attenders'.
28.	Workshop to identify experiences of those in crisis. Walk through individual's experience.	June – July 2015	Crisis Concordat Project Manager	 Solution focused event to identify further actions for partners about how to improve patient/service user experience Co-produced crisis planning.
29.	CCG Led Mental Health Redesign – Systems Transformation Programme	2015 - 2016	Emma Tiffin and John Ellis - CCG	 Improved service geographical equity. Increased capacity of the third sector to support with individuals in crisis.
		Service User	/Patient safety an	d safeguarding
30.	See action point 19-20 Training			
31.	See action point 11 & 23			



	Service User Engagement						
	Staff safety						
32.	See action point 24, Blue	June 2015 –	Sarah Hughes &				
	Light Resilience	October 2015	Emily Grey				
	Programme						
		F	rimary care respor	nse			
33.	Improved pathways and increased capacity in North of county.	2015 - 2016	Adele Mc Cormack CCG	 Geographical equity for both primary and secondary services. 			
34.	Mental Health Redesign	April 2015 – March 2016	CCG	 Improved CRHT teams. Identification of crisis access points and gaps. The evaluation of urgent crisis team appointments (to improve access/support to specialist MH) Development of enhanced primary care service models (we have just heard that we have been successful in a bid to the SCN for funding to support this work which is great news) Increased mental health post discharge support from our voluntary organisations 			

	!	5. Recovery and	d staying well /	preventing future crisis
No.	Action	Timescale	Led By	Outcomes
		Joint p	planning for prev	ention of crises
35.	Service user feedback, develop good practice tools.	May – October 2015	Crisis Concordat Project Manager & Sun Jenny Swain	 Best practice narratives for providers. Co –produced crisis plans to be used across organisations. Increased take up of the Crisis Card phone App.
36.	See action 21 & 17.			