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### City of Westminster

Adults, Health & Public Protection Policy & Scrutiny Committee

Rooms 3.6 and 3.7, 3<sup>rd</sup> Floor, 5 Strand, London, WC2 5HR

Meeting Date:

Monday 19th June, 2017

Time:

Title:

7.00 pm

Venue:

Members:

**Councillors:** Jonathan Glanz (Chairman) Barbara Arzymanow Susie Burbridge Patricia McAllister Gotz Mohindra Jan Prendergast Glenys Roberts Barrie Taylor

Members of the public are welcome to attend the meeting and listen to the discussion Part 1 of the Agenda

Admission to the public gallery is by ticket, issued from the ground floor reception at 5 Strand from 6.30pm. If you have a disability and require any special assistance please contact the Committee Officer (details listed below) in advance of the meeting.



An Induction loop operates to enhance sound for anyone wearing a hearing aid or using a transmitter. If you require any further information, please contact the Committee Officer, Andrew Palmer, Senior Committee and Governance Officer.

Tel: 7641 2802; Email: apalmer@westminster.gov.uk Corporate Website: <u>www.westminster.gov.uk</u> **Note for Members:** Members are reminded that Officer contacts are shown at the end of each report and Members are welcome to raise questions in advance of the meeting. With regard to item 2, guidance on declarations of interests is included in the Code of Governance; if Members and Officers have any particular questions they should contact the Director of Law in advance of the meeting please.

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### AGENDA

PAR	T 1 (IN PUBLIC)	
4.	CABINET MEMBER UPDATES	(Pages 1 - 6)
	The update on current and forthcoming issues within the portfolio of the Cabinet Member for Adult Social Services and Public Health which was marked "to follow" is now attached.	
5.	STANDING UPDATES:	(Pages 7 - 10)
	(III) CHANGES TO ARRANGEMENTS FOR SHARED SERVICES	
	A written briefing for progress is attached.	
6.	MOPAC POLICING AND CRIME PLAN IN WESTMINSTER	(Pages 11 - 16)
	The report which was marked "to follow" is now attached.	

Charlie Parker Chief Executive 16 June 2017



## Adults, Health & Public Protection Policy & Scrutiny Committee

Date:	19 <sup>th</sup> June 2017
Briefing of:	Councillor Heather Acton, Cabinet Member for Adult Social Services & Public Health
Briefing Author and Contact Details:	Madeleine Hale <u>mhale@westminster.gov.uk</u> 0207 641 2621

#### Actions requested by the Committee

The most recent KPI analysis of Adult Social Care (ASC) and Public Health programmes, has not yet been submitted to the Audit and Performance Committee. An end of year report will be attached to the next report.

#### <u>Adults</u>

#### 1. Better Care Fund (BCF) and Sustainability Transformation Plan (STP)

- 1.1. The BCF fourth quarter return has been signed off at the Health and Wellbeing Board. The seven national conditions were all met during 2016/17 through the thirteen schemes operated under the BCF.
- 1.2. There is new guidance for the 2017-2019 BCF. The two year BCF programme must align with NHS planning and there are now four national conditions to be met and other minor changes.
- 1.3. The first quarter finances have been agreed and work on planning the new BCF is underway, including developing a new performance framework.
- 1.4. The North West London Health and Care Transformation Group continues to meet and a Joint Working Agreement between five boroughs has been drawn up for a collaborative hospital discharge scheme in order to provide a consistent service for all patients and to maximise efficiency of shared resources.

#### 2. Home Care

- 2.1. The Adult Social Care (ASC) and Care Homes team is working with our homecare providers on several initiatives to improve upon the service offered to customers.
- 2.2. A group of 19 homecare customers are engaged with the Council to discuss what "outcomes based homecare" would mean to them. With the help of service users, we are thinking about ways in which we can focus on meeting the individual needs of customers rather than just delivering homecare outcomes.
- 2.3. The ASC team is also working on piloting an approach with NHS partners where homecare workers will be asked to help customers with some health related tasks traditionally carried out by District Nurses. For example, they may be asked to help someone with reminders about their medication or giving them eye or ear drops. This will have benefits for the customers in terms of joined-up services and for the health and social care workforce. This enhanced role for the homecare worker is being complemented by a new Trainee Nurse Associate role that is being piloted in NW London in partnership with the NHS and Bucks New University.
- 2.4. Twelve trainees from across three different teams, including homecare, are working towards a certificate as a Nursing Associate. They are part of a group of 55 NHS-led pilot programmes testing the new approach to workforce development.
- 2.5. The ASC team is working closely with the commissioned homecare providers in Westminster to resolve some of the long standing issues in the homecare market including recruitment, retention, and carer development opportunities. Links have been strengthened with Skills for Care, a national workforce development body and with the local employment agency Workzone.
- 2.6. The ASC team is working in partnership with Healthwatch and the commissioned homecare providers to develop a standard set of customer satisfaction measures. These will be used across Westminster to survey a sample of those using homecare on a regular basis. The results of the survey will be fed back to customers and their carers as well as to the providers. The intention is that this will help any problems to be addressed and encourage continuous improvement.

#### 3. Care Homes (Older People Residential and Nursing Care)

3.1. The team makes regular visits to inspect of care homes within Westminster and the homes are also inspected regularly by the Care Quality Commission (CQC). A recent inspection of Norton House (where we have a block contract for beds) rated the facility as "Good".

- 3.2. Officers are working closely with all providers to ensure standards are improved throughout care homes. It should be noted that improvements are being recorded in homes where there have been concerns.
- 3.3. As committee members know, I signed the Annual Price Review for Home Care Services. I am satisfied that careful consideration was given to the information from providers as well as comparable data in drawing up the recommended rates.

#### 4. Mental Health Day Services Consultation

- 4.1. There has been consultation and co-design work with customers of the Recovery Support Services (RSS) since April 2016 to seek RSS customer views in new services. Additional consultation meetings were held in mid May 2017 regarding the alternative services commissioned at the Abbey Centre and the Beethoven Centre from 31<sup>st</sup> May 2017.
- 4.2. These new services have replaced underused existing day centres. They provide more flexible and tailored support services with a greater focus on early intervention and recovery. The changes also give people increased choice and control of mental health services accessed through use of personal budgets.
- 4.3. At the consultation meetings RSS customers were introduced to SMART, an experienced mental health organisation, who will continue to work with customers to co-design the new services. SMART has been commissioned for six months from June 2017 to carry out additional transition and co-design work. This will ensure that each customer has access to their choice of therapeutic activity, drop in or safe space at suitable alternative venues.
- 4.4. SMART will work with customers to ensure that they have an input on the design of the mental health service centres, choice of name for each service and selection of launch events. They will also hold workshops on personal budgets to increase customers' knowledge and understanding, with the aim of reducing customers' anxiety.
- 4.5. A mental health providers network has been set up by ASC to increase the number and choice of personal budget offers available to customers at a range of suitable venues across Westminster.

#### Public Health

#### 5. 0-5 Health Visiting and Family Nurse Partnership (FNP)

5.1. The current contract with Central London Community Healthcare (CLCH) runs until 30<sup>th</sup> September 2017. Negotiations regarding the conditions of and arrangements for a contract extension to allow for continuity of service while redesigning and re-commissioning the service are nearing conclusion. This will entail monitoring clearer performance measures which will help provide more detailed information to inform the new operating model.

5.2. Public Health officers are also involved in the Family Hubs work, which is seeking to deliver seamless services through a virtual network of professionals working to a shared outcomes framework.

#### 6. Childhood Obesity

6.1 The Tackling Childhood Obesity Together Programme team (TCOT) is involving departments throughout the Council to target activity to reduce childhood obesity. Examples include establishing new food growing sites in schools and on estates, working with housing associations to increase opportunities for children and young people for active play, working with fast food businesses to increase the number of outlets and chains that sign up to and deliver on the Healthier Catering Commitment initiative.

#### 7. Oral Health Campaign

7.1 Public Health and Communications are preparing a campaign aimed at children and families to reduce consumption of sugary drinks and snacks as part of a **borough-wide Sugar Smart campaign to be delivered later this year. Additionally new** visual materials are being produced to increase awareness of and reduce the burden of tooth decay currently experienced by local children.

#### 8. Substance Misuse

8.1 The Shisha Working Group met on Monday 5<sup>th</sup> June and agreed an action plan for Shisha with clear timelines, outputs and outcomes. I am speaking at a Public Policy Exchange event on Reducing Smoking and Nicotine Dependency on 28<sup>th</sup> June, and shall talk about our work on tobacco, including shisha.

#### Health & Wellbeing Board

9.1 The Health & Wellbeing Board met on 25<sup>th</sup> May. The Board received an update on the Better Care Fund and discussed where the Board needed to focus its attention to deliver the Health and Wellbeing Strategy. A detailed implementation plan is being prepared with CCG colleagues and will be agreed by the autumn.

#### Assistive Technology

10.1 The Committee raised questions on assistive technology at the last meeting and I am pleased to report that work is underway to develop a Standard Operating Procedure for Assistive Technology (telecare) solutions. A strategic review is being carried out to look at products, installation and call handling. Westminster's Learning Disability Partnership is also using "Just Checking" assistive technology and this will be piloted within supported housing.

#### If you have any queries about this report or wish to inspect any of the background papers please contact Madeleine Hale x2621 mhale@westminster.gov.uk

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# Agenda Item 5a



Adults, Health & Public Protection Policy & Scrutiny Committee

Date:	19 June 2017		
Classification:	General Release		
Title:	Update on Changes to Arrangements for Shared Services		
Report of:	Chief Executive		
Cabinet Member Portfolio	Leader of the City Council		
Wards Involved:	All		
Report Author and Contact Details:	Siobhan Coldwell, Chief of Staff Ext. 6596 <u>scoldwell@westminster.gov.uk</u>		

- 1. At the last meeting members were updated on the decision of Westminster City Council and RBKC to terminate the shared services arrangements currently in place with Hammersmith and Fulham and of our intention to establish bi-borough arrangements with RBKC. According to the s113 agreement, the exit process must be complete within 12 months, so effectively by the end of this financial year..
- 2. Since the last update there has been some significant activity:
  - Governance/programme arrangements have been established at Member and officer level to progress the termination of the current arrangement and the transition to new arrangement. Joint programme governance is also being established with RBKC. A programme team is now in place, resourced principally through Westminster, although joint funded by both WCC and RBKC. Dedicated HR resources have also been identified to ensure that there are robust arrangements in place to transition staff to new structures where necessary. Draft timelines have been established and once new structures have been agreed, timelines will be shared with staff.

- The analysis of 'as-is' organisational structures in the three affected services is now complete and HR colleagues have undertaken a detailed scenario planning exercise to understand how the transition will be managed. The exercise has highlighted the complexity of the organisations and the differences between them in terms of team structures and the balance of employees from the three boroughs across each of the services.
- From this exercise it is clear that a one-size-fits-all approach to all employees will not work. HR colleagues have established a number of scenarios which will be applied to the vast majority of staff which identify two things – what people processes will apply to determine what will happen to teams and individuals (e.g. TUPE or reversal of s113 agreement and employee returning to employing borough) and where the individual team will reside post transition.
- Current analysis suggests most staff (two-thirds) will default to their employing borough and a small number will be affected by TUPE. Every effort is being made to ensure that there are no redundancies.
- RBKC and WCC have progressed the appointment process for the biborough ED ASC, the appointment sub-committee is on 4<sup>th</sup> July 2017.
- Work continues to understand the financial and contractual consequences of unpicking the current arrangements so that plans can be put in place to minimise the impact. A particular focus is the ASC Transformation programme and any impact it may have.
- Sue Redmond is working with colleagues to propose new structures. A first draft has been produced which has been shared with the relevant Cabinet Members as well as the two chief executives. A further iteration is being produced, based on the feedback that has been received. A potential model for public health is also being developed.
- 3. A number of programme risks have been identified. These are attached below for information. They are monitored regularly as part of the programme and governance arrangements.

#	Risk	Mitigation
1	Risk to quality of BAU of key front line services – Children, Adult and Public Health Services	Timeline of events to reassure staff. Comms plan to address key areas of concern. Service areas to develop plans for delivery until new arrangements in place, monitoring risks and issues
2	Loss of staff due to uncertainty	Timeline of events to reassure staff. Comms plan to address key areas of concern. Identify contingency budget and resources

3	Financial implications – Risk to budgets due to the move to Bi- Borough Service for Children, Adult and Public Health Services	Finance to identify financial implications and budget required. Secure contingency budget as appropriate
4	Risk to realised non cashable transformation benefits – service efficiencies and improvements	Service areas to develop plans for delivery until new arrangements in place, monitoring risks and issues. Contingency plans developed
5	Smaller shared services may not be able to separate out easily, e.g. Adoption services, Education Services, Youth Offending Services	Design new target operating model for these areas
6	Shared functions may need to change e.g. Back office, IT, training, complaints	Review and if required, design new target operating model subject to discussions with LBHF
7	Establishment of bi-borough leadership with appointment of new Executive Director roles risks creating a Tri-borough leadership vacuum	Alignment of timeline and decisions with LBHF

If you have any queries about this report please contact the report author, Siobhan Coldwell, Chief of Staff, on Ext. 6596, or by email at <u>scoldwell@westminster.gov.uk</u> This page is intentionally left blank

# Agenda Item 6a



Adults, Health & Public Protection Policy & Scrutiny Committee

Date:	19 June 2017
Classification	Public
Title:	Metropolitan Police Service Update – and Mayor's Policing & Crime Plan 2017-2021
Briefing of:	Peter Ayling: Police Borough Commander
Cabinet Member Portfolio	Public Protection & Licensing
Ward Involved	All
Policy Context	Community Safety
Contact Details:	Sara Sutton x 6916 ssutton@westminster.gov.uk

#### 1. Executive Summary

- 1.1 This paper seeks to provide a detailed update on key issues currently within the Metropolitan Police Service alongside implementation of the Mayor's Policing & Crime Plan.
- 1.2 A specific update is provided covering the potential MPS reorganisation and BCU (Basic Command Unit) model, potential changes to the neighbourhood policing structure and implementation of the Mayor's Policing and Crime Plan 2017-2021.

#### 2. MPS Reorganisation

2.1 There are two principal elements to the reorganisation of local policing; delayering of management structures, and a reduction in number of operational commands (Boroughs to BCUs).

2.2 BCU Management Model (Delayering):

In addition to the test that is ongoing at Westminster, the East Pathfinder BCU is now operating without Chief Inspectors. There is a nominal saving to be made by reducing the number of ranks. It is yet to be confirmed by the new Commissioner if the BCU initiative will go ahead.

2.3 BCU Implementation:

There are now two BCU's in operation in 2017. Islington and Camden merged to form the 'Central North BCU' and Redbridge, Barking and Havering formed the 'East BCU'. In line with the proposal the BCU's are operating with four distinct functions: Response; Neighbourhood Policing; Investigations; Protecting Vulnerable People. These have presented some challenges which we are in the process of reviewing and using the learning to inform the next stage of the BCU process. These are a mixture of operational, people management and geographical issues.

- 2.4 The actual configuration of the BCU's is still under consideration and is impacted by a number of factors which includes further conversations with Local Authorities, infrastructure that influences deployment such as notable physical boundaries (the river and major transport routes) and operational factors. There are still ongoing discussions about the viability of any single borough commands and the optimum scale for a BCU.
- 2.5 There are a number of recognised cross-border policing issues both within the MPS and with Home Counties. Much of this will be business as usual through already established links, however the BCU model would mean a streamlined area tasking process at a command level, allowing focus on any specific cross-border issues such as moped-enabled crime, which can be cascaded back down within BCU's. The proposed Partnership and Prevention Hubs will also provide a direct link for other boroughs to liaise with each other and raise any cross border issues at a central partnership level

#### 3. Changes to Neighbourhood Policing

- 3.1 The Mayor's Police and Crime Plan supports the commitment to neighbourhood policing with at least two DWO's (Dedicated Ward Officers) and one PCSO (Police Community Support Officer) for each of London's 629 wards. This is the minimum and not the maximum as there are additional DWOs being allocated across the busiest wards and town centres.
- 3.2 There is a proposed substantial investment in our Youth and Schools officers in an attempt to divert more young people away from crime and harm. This will see an increase in PCs (Police Constables) allocated to Pupil Referral Units and named points of contacts for all schools, including primary schools, secondary schools, colleges, universities and children's homes designated as

priority establishments. There will also be 32 PCs in the VPC (Voluntary Police Cadet) coordinator role across London, a role we have already been committed to at Westminster for over two years. Keeping young people safe is an important part of our control strategy and schools will remain an important part of neighbourhood policing in both Westminster and the wider MPS.

3.3 The exact numbers of officers allocated to roles has is remaining flexible at this stage whilst we review current learning from the Pathfinder BCU's but hopefully this gives you some confidence in the continued commitment to effective neighbourhood policing. This enhanced focus on partnership work and neighbourhood policing will allow us to respond more effectively to antisocial behaviour which is a key priority within the Mayor's Policing and Crime Plan.

#### 4. Implementation of the Mayor's Policing and Crime Plan in Westminster

- 4.1 The Mayor's Policing and Crime plan was discussed locally with Westminster City Council, the Metropolitan Police Service and MOPAC (Mayor's Office for Policing and Crime). Prior to the release of the plan, we agreed upon the local prioritisation of Non-Domestic Violence with Injury (VWI) and Personal Robbery. In addition, alongside other Boroughs in the MPS, we were also asked to focus on mandatory high harm crime and anti-social behaviour.
- 4.2 Mandatory High Harm Crime is defined by MOPAC as sexual violence, domestic abuse, child sexual exploitation, weapon based crime and hate crime. At this point we have not received information as to the baseline for performance and performance ambition.
- 4.3 Westminster's Control Strategy 2017;

As part of the implementation process we have developed a Control Strategy to ensure an enhanced focus on priority areas identified by the Policing and Crime Plan and local analysis. Whilst we must deliver a number of key services, some things must be given more emphasis in order to develop meaningful intelligence, use our resources effectively and ultimately protect the public and bring offenders to justice. This control strategy aligns precisely with that of the Safer Westminster Partnership.

4.4 Our priority strands and their key objectives and focus are as follows;

CW Control Strategy 2017		
Keeping Young People Safe	Foreign National Offenders	
Night Time Economy	Drugs and vulnerability	

Keeping Young People Safe will have a particular focus on;

- Missing Children
- Child Sexual Exploitation
- Under 18 victims of VWI and knife crime
- Children exposed to and experiencing domestic abuse

Foreign National Offenders will have a particular focus on;

- Working in partnership to bring offenders to justice
- Responding to safeguarding issues presented by vulnerable foreign nationals involved in crime and ASB in Westminster.
- Building a community impact evidence base to influence national policy and procedures.
- **Developing intelligence** regarding offending by foreign nationals to detect, disrupt and deter to make Londoners safer.

Night Time Economy will have a particular focus on;

• Reducing mandatory high harm crime in the West End and our two local priority crimes, non-domestic VWI and Robbery.

Drugs and Vulnerability will have a particular focus on;

- Gangs
- The West End
- Improved intelligence, resourcing and tasking
- Enhanced diversion from drugs, gangs and rough sleeping.

Many of the strands overlap and are intertwined which ensures limited gaps and encourages cross-portfolio working. All four of our priority areas are only achievable in partnership.

4.5 Responding to Robbery and Weapon Based Crime

We have developed a Knife Crime Strategy for 2017 which outlines those leading within their portfolio and our strategic aims and objectives. We are aware of the challenges and MOPAC data for knife crime and robbery in Westminster.

4.6 Our Knife Crime Strategy is aimed at four key strands based on a model developed in Lewisham; **Protect, Prevent, Prepare** and **Pursue**. This is by no means exhaustive but our strategy is aimed at preventing knife crime through education, awareness and local weapon sweeps, protecting vulnerable locations, targeting high harm individuals and pursing offenders.

#### 4.7 Baseline and Performance;

Key performance indicators will be released shortly. ook like and how we ensure tangible outcomes. From there we can identify a baseline and begin to scrutinise our own performance in more detail.

- 4.8 However, it is possible to review the original MOPAC 7 series of offences from 2011/12 base line and see the improvements we have made in broader terms and identify where challenges still exist. Violence against the person (VAP) and sexual offences have shown a notable increase since 2011/12 and are very much at the top of the agenda for the MPS and locally for Westminster, with a specific focus on non-domestic violence with injury in Westminster as part of the Mayor's Policing and Crime Plan.
- 4.9 In terms of the last 12 months against this baseline we have also seen a significant increase in for Robbery, another Westminster specific priority under the Mayors P&C Plan. Issues are typically concentrated within the Night Time Economy footprint, particularly around Soho and the West End.

		25 May 2016		25 May 2017	
Major Crime Type	2011/12 Baseline	Rolling total	Variation from Base	Rolling total	Variation from Base
Burglary	3,473	3,214	-7.5%	3,193	-8.1%
Robbery	2,067	1,643	-20.5%	2,018	-2.4%
Criminal Damage	2,430	2,114	-13.0%	2,230	-8.2%
Theft and Handling	39,878	27,951	-29.9%	29,311	-26.5%
Sexual Offences	611	819	34.0%	937	53.4%
VAP	8,310	10,380	24.9%	11,968	44.0%
Drugs	6,680	2,175	-67.4%	2,142	-67.9%

Source: *MPS Performance Pages*)

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