

Committee Agenda

Title:

Adults, Health & Public Protection Policy & Scrutiny Committee

Meeting Date:

Monday 19th June, 2017

Time:

7.00 pm

Venue:

Rooms 3.6 and 3.7, 3rd Floor, 5 Strand, London WC2 5HR

Members:

Councillors:

Jonathan Glanz (Chairman)
Barbara Arzymanow
Susie Burbridge
Jonathan Glanz
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 & Governance Officer.

Tel: 7641 2802; Email: apalmer@westminster.gov.uk Corporate Website: www.westminster.gov.uk

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 Head of Legal & Democratic Services in advance of the meeting please.

AGENDA

PART 1 (IN PUBLIC)

1. MEMBERSHIP

To note any changes to the membership.

2. DECLARATIONS OF INTEREST

To receive declarations by Members and Officers of the existence and nature of any personal or prejudicial interests in matters on this agenda, in addition to the standing declarations previously made.

3. MINUTES

(Pages 1 - 18)

To approve the minutes of the meetings held on 29 March and 8 May 2017.

4. CABINET MEMBER UPDATES

(Pages 19 - 24)

To receive an update on current and forthcoming issues within the portfolios of the Cabinet Member for Public Protection & Licensing and Adult Social Services & Public Health. The briefings also include responses to any written questions raised by Members in advance of the Committee meeting.

Report of the Cabinet Member for Adult Social Services & Public Health to follow.

5. STANDING UPDATES

(Pages 25 - 28)

I) TASK GROUPS

To receive a verbal update on any significant activity undertaken since the Committee's last meeting.

II) WESTMINSTER HEALTHWATCH

To introduce the Committee to Healthwatch Central West London's new Chief Executive Officer; and to receive an update on recent work undertaken in Westminster.

III) CHANGES TO ARRANGEMENTS FOR SHARED SERVICES

To receive an update on progress.

6. MOPAC POLICING AND CRIME PLAN IN WESTMINSTER

To provide an update on the Metropolitan Police implementation of the MOPAC Policing and Crime Plan in Westminster; the latest update on Borough Command Unit (BCU) mergers and any proposed changes to Neighbourhood Policing; and to highlight key issues.

Report to follow.

7. UPDATE ON PROPOSALS FOR A CRIME PREVENTION CO-COMMISSIONING FUND FOR LONDON

To consider the changes to the way the London Crime Prevention Fund is allocated and the impact it may have on Westminster's current commissioned services for community safety; and to consider the development of the co-commissioning fund as part of those changes.

8. SAFER WESTMINSTER PARTNERSHIP

To consider the objectives and plans for the year ahead, and to receive a progress report of performance.

9. COMMITTEE WORK PROGRAMME AND ACTION TRACKER

To consider the Committee's Work Programme, and to note progress in the Committee's Action Tracker.

10. ITEMS ISSUED FOR INFORMATION

To provide Committee Members with the opportunity to comment on items that may have been previously circulated for information.

11. ANY OTHER BUSINESS

To consider any other business which the Chairman considers urgent.

Charlie Parker Chief Executive 9 June 2017 (Pages 29 - 34)

(Pages 35 - 38)

(Pages 39 - 52)





MINUTES

Adults, Health & Public Protection Policy & Scrutiny Committee

MINUTES OF PROCEEDINGS

Minutes of a meeting of the Adults, Health & Public Protection Policy & Scrutiny Committee held on Wednesday 29 March 2017, Rooms 6 & 7, 17th Floor, City Hall, 64 Victoria Street, London SW1E 6QP

Members Present: Councillors Jonathan Glanz (Chairman), Barbara Arzymanow, Susie Burbridge, Patricia McAllister, Gotz Mohindra, Jan Prendergast and Barrie Taylor.

Also Present: Councillor Heather Acton.

1. MEMBERSHIP

1.1 Apologies were received from Councillor Glenys Roberts.

2. DECLARATIONS OF INTEREST

- 2.1 The Chairman sought any personal or prejudicial interests in respect of the items to be discussed from Members and officers, in addition to the standing declarations previously made.
- 2.2 Councillor Jan Prendergast declared a non-prejudicial interest in that she was an outpatient at St. Mary's Hospital, and a member of the Friends of St. Mary's Hospital.

3. MINUTES

- 3.1 RESOLVED: That the Minutes of the meeting held on 1 February 2017 be approved.
- 3.2 The Chairman reported that since the last meeting of the Committee, he had met with Tracey Batten (Chief Executive, Imperial Healthcare NHS Trust).

4. CABINET MEMBER UPDATES

- 4.1 Cabinet Member for Adult Social Services & Public Health
- 4.1.1 The Committee received a written update on key issues relating to Adult Social Care, Public Health, and the Westminster Health & Wellbeing Board.
- 4.1.2 Councillor Heather Acton attended the meeting as Cabinet Member, and expressed regret that that the London Borough of Hammersmith & Fulham would be withdrawing from Tri-borough working arrangements. The Cabinet Member emphasised that the City Council would work with partners to ensure that service users experienced no change in delivery, and that Westminster still had a strong bi-borough arrangement. Committee Members sought clarification of how the £43 million in savings from tri-borough working had been achieved, and what the costs would be moving forward. Members commented on the importance of maintaining the Community Independence Service as a bi-borough service; and highlighted the need to be kept updated on progress in the changes that would take place, and on the potential implications for the delivery of Adult Social Care in Westminster.
- 4.1.3 The Cabinet Member commented on the national policy framework and planning guidance for the 2017/18 Better Care Fund, and reported that correspondence had now been received from the Department of Communities & Local Government (DCLG) which set out the conditions of the additional funding that was to be used to help stabilise the market for social care.
- 4.1.4 Consultation with partners and service users on the proposed reconfiguration of Mental Health Day Services was ongoing, and the Cabinet Member confirmed that no discharges from current settings would be made until service users were happy with the alternatives that were being offered.
- 4.1.5 The Westminster Health & Wellbeing Board had met in closed session to discuss measures to improve partnership working, and an additional meeting had been scheduled for April to progress the work that had been done. Work on the Delivery Plan for the Westminster Health & Wellbeing Strategy published in December 2016 was ongoing, and the Cabinet Member confirmed that the implementation process would involve the voluntary sector, community organisations and CityWest Homes.
- 4.1.6 Other issues discussed by Committee Members included the advice offered by the City Council on mobility, and the Blue Badge scheme operated by Transport for London.

4.2 Cabinet Member for Public Protection & Licensing

- 4.2.1 The Committee received a written briefing on key issues within the Public Protection & Licensing portfolio, which included the Mayor of London's Police & Crime Plan; the night time economy and Licensing Charter; and the operation to tackle spice and associated anti-social behaviour.
- 4.2.2 The Committee discussed shisha smoking, and highlighted ongoing problems relating to shisha in Harrow Road. Several countries had banned the smoking of shisha in public, and shisha providers would need to comply with new tobacco regulations that would come into effect in May 2017. Members suggested that the City Council needed to be clear on its position on shisha smoking, which should be licensed, and also suggested that the dangers of shisha should be publicised in Westminster's schools. The Committee also discussed the findings and statistics of the World Health Organisation, and asked to receive details of Westminster's Shisha Strategy.
- 4.2.3 Following the last meeting, Westminster's response to the draft Police & Crime Plan for London 2017-2021 had been sent to the Mayor of London, and had included the Committee's opposition to the proposals for merging Borough Command Units (BCU's). Members asked to receive the findings of a pilot for the new BCU's that had taken place in Barking & Dagenham, and suggested that the Deputy Mayor of London could be invited to attend the Committee to discuss the proposed changes.
- 4.2.4 The Committee requested an update on the reconfiguration of CCTV in Westminster, and sought clarification on whether a report or update would be available following the 2017 Hackathon staged by the Imperial NHS Trust. Members also requested an update on Fixed Odds Betting Terminals; together with details of the powers available to address the rise in rough sleepers using tents, and whether they were in the control of the City Council, the Police, or Transport for London.

5. STANDING UPDATES

5.1 Air Quality Task Group

5.1.1 Muge Dindjer (Policy & Scrutiny Manager) provided an update on the work of the Air Quality Task Group which had met for the last time on 30 March, and outlined the draft recommendations within the report that related to health. The Task Group now fell within the remit of the Children, Environment & Leisure Policy & Scrutiny Committee, and the sets of recommendations for health, and seeking to deal with emissions from transport and buildings were to be considered for adoption on 15 May 2017, prior to publication. The Committee noted that 80% of the City breached EU air pollution limits at any one time.

- 5.1.2 The Greater London Authority (GLA) had suggested that Public Health England took the Mayor's air quality messages into schools, care homes and nursing homes; and the Task Group had highlighted the need to ensure that front line staff were trained to advise residents and vulnerable people on self-care when pollution was particularly bad. It was also suggested that the Westminster Health & Wellbeing Board could work more closely with stakeholders on issues relating to air quality.
- 5.1.3 Committee Members acknowledged the importance of preventative work in improving air quality, and highlighted the important role of schools in engaging with children and parents. The Cabinet Member for Adult Social Services & Public Health confirmed that all of Westminster's schools now had sustainable travel plans, and that Public Health was already working with schools on air quality. Members noted that safer routes to school had been established in Marylebone, and that new playgrounds were being sited away from areas of particularly poor air quality.
- 5.1.4 The Committee commented on the ability of Ward Members to have greater involvement in local measures to improve air quality, and highlighted the role of the planning process to avoid grouping high buildings which could concentrate pollution; and of the licensing service in seeking a commitment to use low emission taxis.
- 5.2 Health & Wellbeing Centres Task Group
- 5.2.1 Councillor Barrie Taylor updated the Committee on progress in the development of the Health & Wellbeing Centres Task Group. Members noted that preliminary informal discussions were taking place with the Mental Health Trust, Public Health and Westminster's Clinical Commissioning Groups; and that clarification would be sought of the contribution being made to health and wellbeing by Sport and Leisure. Councillor Taylor suggested that advice could also be sought from an all-party group on Art and Health, which had held a workshop at a Public Health conference he had recently attended. All Members of the Committee were encouraged to take part in the Task Group.
- 5.2.2 Councillor Heather Acton (Cabinet Member for Adult Social Services & Public Health) informed the Committee that the Health & Wellbeing Board had commissioned the Communications Department to work with Public Health and Adult Social Care, to provide a map of all existing hubs and community centres in Westminster as a blueprint for the City Council and its partners.
- 5.2.3 The Committee endorsed the proposed Terms of Reference for the Health & Wellbeing Centres Scrutiny Task Group.

5.3 Healthwatch Westminster

- 5.3.1 Helen Mann (Healthwatch Programme Manager) updated the Committee on Westminster Healthwatch activity between January and March 2017, and provided details of the 2016-18 Work Plan priorities which sought economies of scale through tri-borough working.
- 5.3.2 An ongoing survey of residents in Westminster had shown a lack of awareness and engagement in the Sustainability & Transformation Plan, and in response Healthwatch were pressing for the changes to health and wellbeing to be more explicit for service users. Other ongoing areas of work included Homecare; signposting for information and services; and working with commissioners in the reconfiguration of Mental Health Day Services.
- 5.3.3 The Committee commented on the work of the Healthwatch dignity champions, who were volunteers that sought to improve people's experiences of health and social care, and noted that they would be speaking informally to patients in urgent care services in St. Mary's Hospital.

6. ST MARY'S HOSPITAL URGENT CARE CENTRE

- In response to a request from the Committee, Professor Tim Orchard (Divisional Director of Medicine & Integrated Care, Imperial NHS Trust) and Claire Braithwaite (Divisional Director of Operations, Imperial NHS Trust) presented a joint report with the Central London Clinical Commissioning Group on the delivery and performance of the Urgent Care Centre (UCC) at St Mary's Hospital. Committee Members also heard from Jules Martin (Managing Director, NHS Central London CCG). Data provided in the report included A&E monthly performance from April 2016 to February 2017; complaints and patient feedback; and the number of patients attending A&E that had required input from mental health services. The Committee was informed that Central London CCG's responsibility for the operation of the UCC at St. Mary's had been assumed by Vocare Ltd in April 2016, and that a new service model had been put into place which had led to difficulties in managing waiting times, particularly overnight.
- The Emergency Department at St. Mary's was under considerable pressure with Type 1 attendances having increased by over 9%, and although designed to see 80,000 people per year, over the past 12 months the Hospital had seen 111,000 attendances. While the physical constraints at St. Mary's remained a considerable challenge, the medical quality of the care remained high. A £3.2m refurbishment of the Emergency Department would soon be completed, and would enable the patient flow to become more logical and efficient, and supported by early triage

- 6.3 Although national urgent care standards required that 95% of all patients presenting for urgent care were assessed within 20 minutes of arrival, from April to November 2016 only 43% of patients been assessed within that time. The Committee noted that the increase in Emergency Department attendances had led to most hospitals in London falling short of the 95% target. Although some improvement had been seen in late 2016 and early 2017, it had not been sufficient to meet the contract standards, and in January 2017 the CCG had developed an improvement plan with Vocare.
- 6.4 A number of schemes were being implemented in addition to the refurbishment, which included the opening of a Surgical Assessment Unit to reduce delays; the continued expansion of the Emergency Ambulatory Care Centres; streaming and avoiding unnecessary hospital admissions; and improving ward and discharge processes. Since the plan had been implemented, performance had risen to 96% of patients being seen within 20 minutes of arrival. Imperial had also developed an on-going and extensive programme to improve the urgent and emergency care pathway with the aim of reducing waits, improve patient flow, and manage increased demand.
- 6.5 The Committee sought clarification of comparative performance in patients being seen within the 4 hour target between St. Mary's and other hospitals, and noted that the number of breaches through inappropriate attendances at St. Mary's was low, due to general practice at the front door steering people to primary care when appropriate. Members also commented on the implementation of the improvement plan, and on the effect of other influences on performance such as winter sickness, staff retention, and unexpected major incidents. Professor Orchard confirmed that staffing levels did not have a particular impact on breaches at St. Mary's, which had started its own programme for training Extended Nursing Practitioners and had improved recruitment and retention.
- 6.6 Committee Members commented that patients who were ready to be discharged should have the opportunity to receive a cross-service assessment of their needs, which could form the basis of any necessary care plan. Professor Orchard acknowledged that the only way to improve the situation was for all of the people involved to actively work together, and for one person to make an effective assessment of the patient's health needs. Problems in down-stream beds could also cause delays in discharge, and robust systems had been put in place to deal with what was an ongoing issue.
- 6.7 Professor Orchard expressed concern over an ongoing increase in Mental Health cases being brought into Emergency Services over the past 18 months. Although a recent change to the law had led to medical centres being considered places of safety, busy service and medical wards were not a good environment for people experiencing a mental health crisis. Professor Orchard recognised that although St. Mary's had employed registered mental health nurses, who could provide support, and had access to psychiatric services provided by the CCG, services

needed to be further improved. St Mary's also continued to have difficulty in finding placements for patients with mental health issues.

- 6.8 A substantial rise in the number of older patients had attended the hospital during the winter, which was increasing annually. Professor Orchard agreed that the providers of acute primary, community and secondary care needed to work together more closely to address issues arising from the ageing population. A more preventative strategy also needed to be adopted, that would help people receive care in their own homes and reduce the need for expensive hospital beds.
- 6.9 The Committee acknowledged the improvements to urgent care services and waiting times that were being made, and commended St. Mary's Hospital for providing a good service during the on-going reconfiguration.

7. END OF LIFE CARE

- 7.1 Colin Brodie (Senior Engagement & Corporate Affairs Manager), Jules Martin (Managing Director, NHS Central London CCG) and Chris Neill (Interim Assistant Managing Director, NHS Central London CCG) presented a report which summarised the work and findings of the Joint Strategic Needs Assessment (JSNA) on End of Life Care. The Committee also received the report of the London Assembly Health Committee on End of Life Care in London.
- 7.2 The JSNA represented a summary and pulling together of work, which had taken into account available data, including current policy and strategy, and included five recommendations for key partners:
 - To maximise choice, comfort and control through high quality effective care planning and co-ordination;
 - To promote end of life care as 'everybody's business' and develop communities which could help support people;
 - To identify clear strategic leadership for end of life care across both social care, health and the independent sector;
 - To establish a coordinated education and training program for practitioners, the person dying, carers and for family/friends (if they wish); and
 - That everyone should have easy access to evidence and information.

The JSNA also summarised the local direction of travel for End of Life Care in Westminster, and continuing progress made against the recommendations since publication. Although good palliative care services were available in the UK, an increasing number of reports were highlighting the same issues and themes as were identified in the JSNA. Members noted that the data given in the JSNA was now over a year old, and that more recent information was available online.

- 7.3 The Committee acknowledged that people were living longer, and that the end of life following illness could not always be accurately projected. Colin Brodie reported that care was seeking to focus more on the last phase of life rather than the final few weeks, with people who were able to return home being supported with care planning by multi-disciplinary teams. Colin Brodie also highlighted the need for a change in culture regarding attitudes towards death and dying, which would assist in appropriate care being obtained for people who were approaching the end of life. Committee Members commented on the value of the Patient Contract for supporting care, when people who were nearing the end of life were discharged from hospital.
- 7.4 Other issues discussed included the benefits of consultations with GP's and care professionals through telemedicine; the introduction of a more innovative social finance model in care homes; and the availability of assistance in meeting the cost of funeral arrangements.
- 7.5 The Committee endorsed the JSNA report and recommendations, which had receive initial approval by the Westminster Health & Wellbeing Board.

8. COMMITTEE WORK PROGRAMME AND ACTION TRACKER

- 8.1 Muge Dindjer (Policy & Scrutiny Manager) presented the Committee's Work Programme for the remainder of the current municipal year, together with the Committee's Action Tracker.
- 8.2 The Committee discussed Agenda items for future meetings, and asked to receive regular updates on the forthcoming changes to Tri-borough working. Members also agreed that consideration should be given to including a review of Westminster's Shisha Strategy, together with further discussion on the London Policing Plan and proposals for Borough Command Units. Other issues for consideration included rough sleeping; serious youth violence; and anti-social behaviour and the evening and night-time economy.
- 8.3 It was also agreed that the Committee would receive a presentation on the reconfiguration of primary care services from the Central London CCG at the next scheduled meeting on 8 May, or at a separate Special Meeting.

9 ITEMS ISSUED FOR INFORMATION

9.1 The Committee noted that a briefing note which provided an update on Tackling Childhood Obesity had been circulated for information separately from the printed Agenda.

10	ANY OTHER BUSINESS	
10.1	No further business was reported.	
The N	leeting ended at 9.12pm.	
CHAI	RMAN:	DATE:





DRAFT MINUTES

Adults, Health & Public Protection Policy & Scrutiny Committee

MINUTES OF PROCEEDINGS

Minutes of a meeting of the Adults, Health & Public Protection Policy & Scrutiny Committee held on Monday 8 May 2017, Rooms 6 & 7, 17th Floor, City Hall, 64 Victoria Street, London SW1E 6QP

Members Present: Councillors Jonathan Glanz (Chairman), Barbara Arzymanow, Susie Burbridge, Patricia McAllister, Gotz Mohindra and Barrie Taylor.

Also Present: Councillors Heather Acton and Antonia Cox.

1. MEMBERSHIP

1.1 Apologies were received from Councillors Jan Prendergast and Glenys Roberts.

2. DECLARATIONS OF INTEREST

- 2.1 The Chairman sought any personal or prejudicial interests in respect of the items to be discussed from Members and officers, in addition to the standing declarations previously made.
- 2.2 Councillor Barrie Taylor declared a non-prejudicial interest in that he was an outpatient at St. Mary's Hospital.

3. MINUTES

- 3.1 The Committee received the draft Minutes of the meeting held on 29 March 2017, and asked that the following issues be taken into account:
- 3.1.1 St. Mary's Urgent Care Centre Minute 6.3 Committee Members noted that only 43% of all patients who presented for urgent care between April and November had been assessed within 20 minutes. Although there were reasons for this shortfall, the Committee wished to highlight that this was significantly below the National Urgent Care standard of 95%.

3.1.2 St. Mary's Urgent Care Centre - Minute 6.6 It was agreed that the wording of the recorded Minute would be expanded to include reference to Members' comments that patients who were ready to be discharged should have the opportunity to be assessed formally, and that this should form the basis of any necessary care plan.

3.2 Matters arising

3.2.1 The Committee noted that the Central London CCG had requested that the presentation and discussion on local plans and priorities for service development and service improvement in the local NHS, which was to be considered at this meeting, be deferred. This request had been made following legal advice, which had considered that the discussion would be potentially in breach of the convention of pre-election "purdah", which applied heightened sensitivity to policy issues which were significant or which may be politically contentious. As it was important that Members still had the opportunity to discuss the proposals, rescheduling the presentation after the election would be considered later in the meeting as part of the Committee's Work Programme. The Committee wished to record its disappointment that the presentation had been withdrawn, and requested that copies of the presentation and supporting report be made available as soon as possible after 8 June.

4. CABINET MEMBER UPDATES

4.1 Cabinet Member for Adult Social Services & Public Health

- 4.1.1 Councillor Heather Acton provided a briefing on key issues relating to her portfolio, which included Adult Social Care, Public Health, and the Westminster Health & Wellbeing Board. The Committee also heard from Rachel Wigley (Director of Finance & Resources Adult Social Care & Health), and John Forde (Deputy Director of Public Health).
- 4.1.2 The Health & Wellbeing Board (HWB) had held two meetings in closed session to discuss how collaborative working could be further improved, with the second session being supported by a facilitator experienced in working with the health sector. A number of decisions on how the HWB could move forward had been made, which included increasing its membership to include acute and mental health providers. The closed sessions had also considered how the HWB could liaise with the other smaller providers.
- 4.1.3 The Committee discussed the Homecare service, and highlighted the benefits to healthcare that could be achieved through the increasing use of technology that would enable GPs to talk to patients by email or Skype. Members requested details of the IT that was available for Homecare: and asked that the next

Cabinet Member update include information on the Homecare contract, with details of hourly rates and whether an allowance was made for travel time. Details of the outcomes and recommendations that may have followed Care Quality Commission inspections of Homecare and care homes in Westminster were also requested.

- 4.1.4 The Committee discussed the issue of shisha in Westminster, and sought clarification of how it was currently monitored, and how enforcement could be effected by forthcoming changes in legislation. Members also commented on smoking, and discussed whether the places where smoking was not permitted could be further extended to include Council housing. Although it was acknowledged that this could be difficult to enforce, the benefits to children's health through avoiding secondary smoke were recognised, and it was agreed that whether similar measures had been taken by other local authorities should be investigated. Members also highlighted the importance of smoking deterrents for schoolchildren, and John Forde (Deputy Director of Public Health) agreed to provide the Committee with a link to the video being offered by the 'Kick-it' campaign.
- 4.1.6 Councillor Acton commented on progress in the Sustainability & Transformation Plan (STP), and the Committee requested details of the feedback received from NHS England to the submission made by North West London; together with the minutes from North West London STP meetings.
- 4.1.7 The Committee discussed air quality in Westminster, and sought clarification of the influence that the City Council could have through planning decisions which improved public health by reducing the pollution caused by buildings.
- 4.1.8 Members also requested an update on the effectiveness of Mental Health Day Services and safe spaces; together with up to date figures on the number of families in the Troubled Families Programme, and clarification of whether Westminster's Troubled Families were linked with the Family Information Service and Employment Support.
- 4.2 Cabinet Member for Public Protection & Licensing
- 4.2.1 The Committee received an update from Councillor Antonia Cox on key issues within her portfolio, which included the findings of the House of Lords Select Committee on the Licensing function; gangs and knife crime; and rough sleeping and anti-social behavior. Members also heard from Sara Sutton (Director Public Protection & Licensing).
- 4.2.2 Councillor Cox commented on the findings of the Select Committee, and considered that the recommendation that the Licensing function should merge with Planning would not be practical, particularly in Westminster which was the largest Licensing authority in the country. The report of the Select Committee was to be debated in the House of Lords in October.

- 4.2.3 The City Council would be drawing up a Licensing Charter which would seek voluntary co-operation and best practice from Westminster's businesses, and set out the standards expected from operators. Committee Members suggested that health and wellbeing should become the fifth Licensing Objective; and that a greater certainty of outcomes could be gained if the licensing process were to become more streamlined.
- 4.2.4 The Committee discussed the ongoing measures being taken to address gangs and knife crime; and commended the excellent work that had been carried out in Westminster through the Integrated Gangs Unit (IGU), which had steered young people away from gangs. Members noted that Head Teachers were being included in an information sharing protocol which sought to deal with gangs and knife crime; and agreed that funding for the IGU needed to continue.
- 4.2.5 Committee Members also commented on work that was being undertaken in connection with rough sleeping, anti-social behaviour, and the synthetic drug Spice; and Sara Sutton (Director Public Protection & Licensing) agreed to provide details of the work of Street Based Anti-Social Behaviour Task & Finish Group.
- 4.2.6 The Committee commended the police response to the increase in moped enabled robbery, and agreed that a joint letter would be sent to the Borough Commander from the Committee and Cabinet Member highlighting their concerns.
- 4.2.7 It was noted that the Borough Commander would be invited to update the Committee on proposals for Borough Command Units when he attended the next meeting in June.
- 4.2.8 Other issues discussed included progress in the update of CCTV in Westminster; trends and policies for shop-lifting in Oxford Street; and the continuing review of security following the recent Westminster terror attack.

5. STANDING UPDATES

5.1 Committee Task Groups

- 5.1.1 Councillor Patricia McAllister provided an update on the work of the Community Independence Service Single Member Study, which was to undertake visits to Westminster's site of operation at Lisson Grove and to the virtual ward that had been set up in Hammersmith. The Committee noted that the Task Group was experiencing difficulty in obtaining clear and concise information; and that details of the proposed visits would be circulated when available.
- 5.1.2 Councillor Barbara Arzymanow updated the Committee on the work of the Joint Health Overview & Scrutiny Committee, which was reviewing the pressure being

- experienced by the London Ambulance Service. Members asked to receive more detail on ambulance response rates, which were falling short of target.
- 5.1.3 Councillor Barrie Taylor provided an update on progress in the Health & Wellbeing Centres Task Group, which had held initial, informal meetings with the managers of Westminster's Clinical Commissioning Groups. The draft work programme for the Task Group would be submitted to Committee Members when available. Details of a conference on health and wellbeing in the context of sport and leisure had also been circulated.
- 5.2 Changes to Arrangements for Shared Services:
- 5.2.1 Siobhan Coldwell (Chief of Staff Chief Executive's Department) updated the Committee on the initial steps that had been taken to terminate the current arrangements for shared services, and to establish bi-borough arrangements between the City Council and RB Kensington & Chelsea. Although still in the early stages, work was being undertaken to identify priority areas pressure points in each of the shared services that could be affected; and to understand the consequences that the changes may have across the three boroughs, which currently employed at least 2000 staff.
- 5.2.2 The City Council acknowledged the need for measures to be put in place that would seek to minimize the impact that the changes could have on staff and on services for Adult Social Care. Sue Redmond (Interim Executive Director of Adult Social Care) was working with colleagues to propose alternative structures for the bi-borough and for LB Hammersmith & Fulham, which would be shared with the Committee in due course. Some services such as fostering and adoption had worked well across the three boroughs, and Hammersmith & Fulham had indicated that this may continue. The City Council also considered that sharing services had been a success in both delivery and costs, and Siobhan Coldwell confirmed that Westminster was looking to share other services with other boroughs.
- 5.2.3 Committee Members highlighted the need to focus on Westminster when ensuring that services were protected; and noted that details of the financial implications of the changes and anticipated costs would be circulated when available.
- 5.2.4 A further update on changes to arrangements for shared services would be submitted at the next meeting.

6. ST MARY'S HOSPITAL

6.1 The Committee received a briefing from Graham King (Head of West End Partnership Place Programme), on access and transport issues concerning the proposed redevelopment and improvement of the St. Mary's Hospital site. St

- Mary's continued to be a district, general and teaching hospital, which had become unified with Imperial Hospital NHS Trust.
- 6.2 It was intended that the western area would be offered for separate development, which would release money and space for the building of a new hospital facility on the eastern area which was to be retained. A number of proposals had been received, and planning permission for the extensive redevelopment of the western site had been granted in December 2016. The Committee noted that permission had been granted subject to planning conditions, and to the completion of a Legal Agreement between the developer, Network Rail and TfL to cover a range of obligations and works that were central to the scheme. Members noted that the Legal Agreement was still under negotiation, and that concerns to the proposed re-arrangement of the road layout and vehicular access were being shared and maintained by St. Mary's Hospital, the London Ambulance Service, and other health bodies.
- 6.3 The granting of planning permission had included a condition for the creation of a Steering Group, which would oversee the arrangements for the implementation of any scheme and provide assurance that everyone interests have been taken into account. The Steering Group would be brought into operation upon the completion of the Legal Agreement, and was to include representatives from St. Mary's Hospital, local residents and businesses.
- 6.4 Members commented on the asset value of the Samaritan and Western Eye sites; and suggested that the City Council could provide support St. Mary's by lobbying NHS England to provide capital that would assist the redevelopment
- 6.5 The Committee acknowledged that the proposals had significant implications, and asked to receive regular updates on the continuing negotiations.

7. ANNUAL WORK PROGRAMME 2017-18

- 7.1 Muge Dindjer (Policy & Scrutiny Manager) presented the draft Annual Work Programme for Members' consideration.
- 7.2 The Committee agreed that issues relating to Adult Social Care & Health and Public Protection should be considered at alternate meetings, with the appropriate Cabinet Member being invited to attend. It was also agreed that the agenda for the next meeting in June would focus on implementation of the Policing Plan and Borough Command Units; MOPAC Funding; and the Safer Westminster Partnership.
- 7.3 Committee Members discussed the need to reschedule the presentation by Westminster's Clinical Commissioning Groups on local plans, priorities and key issues for service development and improvement, which had been deferred from the current meeting due to the restrictions of purdah. It was agreed that the

presentation would be received at a meeting of the Health Urgency Sub-Committee, which would be arranged as soon as possible after the General Election on 8 June. As part of the presentation, the Committee would also be able take a more in-depth look at the Primary Care Strategy over the forthcoming year.

7.4 Committee Members commented on the statutory duty the City Council had for Health, and highlighted the importance of the City Council's consultative role in the Health Service.

8 ANY OTHER BUSINESS

8.1	No further	business	was	reported	I.
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The	Meeting	ended	at	9.1	2pm	١.
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CHAIRMAN:	DATE:





Adults, Health & Public City of Westminster Protection Policy & Scrutiny Committee

19 June 2017 Date:

Briefing of: Councillor Antonia Cox, Cabinet Member for

Public Protection and Chairman of Licensing

Contact Details: Joe Penny x 5772

jpenny@westminster.gov.uk

1 **Evening and Night Time Economy Vision and Plan**

- 1.1 Work has commenced on developing the Council's future vision for the Evening and Night Time Economy and we remain engaged with the Mayor of London as he develops his own thinking on the subject.
- 1.2 The Licensing Committee considered this issue at its March meeting and made a number of initial observations. Not only licensing but economic development, culture, planning policy, street cleansing and parking are part of the picture. We have to take all these matters into account.
- 1.3 The views of key external stakeholders will also be sought to inform our vision, and the structure of the Westminster Entertainment Forum is currently being reviewed, with a view to providing a forum for key industry representatives to come together and help contribute to the development of the vision.
- 1.4 The Licensing Charter will also provide a testbed for some of our proposed innovations, which we may include in the Evening and Night Time Economy Plan. This will, of course, be trialed in collaboration with our partners.

2 **Licensing Charter**

The Licensing Charter and Westminster's Best Bar None scheme are 2.1 scheduled to be launched in July 2017, subject to availability of our key partners. The pilot area, Leicester Square and Piccadilly Circus, will be overseen by a partnership steering group consisting of representatives from the

- City Council, the Metropolitan Police Service, the Heart of London Business Alliance, local businesses and Best Bar None.
- 2.2 The Charter will contain a range of measures designed to manage the impact of licensed premises' operations on their surroundings during the evening and night time. Central to this will be the introduction of a Best Bar None scheme in the trial areas, complemented by a shift in how the council and police engage with licensed premises during the evening and night time hours.
- 2.3 The programme will also be part of the Home Office Local Alcohol Action Area (LAAA) scheme.

3 MOPAC London Crime Prevention Co-Commissioning Fund

- 3.1 Westminster's community safety representatives have been appointed along with those of three other authorities to a working group to develop the funding prospectus for the MOPAC LCPF Co-commissioning Fund.
- 3.2 There have been two preliminary meetings of the working group, with the first being a general discussion on the fund's aims and objectives, initial timescales, and an outline of the process to be followed. The second meeting looked at an early draft of the funding prospectus and the proposed priorities for the first round of funding, which is expected to be announced at the end of 2017 for projects starting in April 2018.
- 3.3 The final prospectus is due to be launched at the end of June and final proposals are being developed for late Summer / early Autumn. All proposals must be agreed by a minimum of three boroughs and three partner agencies, to ensure effective collaboration.

4 Westminster Cathedral Piazza and South Street-Based ASB

- 4.1 We are continuing to see improvements around the Cathedral Piazza area, as daytime ASB continues to fall, particularly when compared to the last 6 months. Any new rough sleepers utilising the site are swiftly engaged by the outreach team and along with social care interventions, they are advised of the Piazza's hotspot status and encouraged to find alternative sites to sleep. Furthermore, proposals for the colonnades next to McDonald's are currently being looked at by the managing agents for the area.
- 4.2 As a result of our operations, there has been some displacement of activity to Vauxhall Bridge Road. To remedy this, officers have worked with local landowners to implement various measures in the area to reduce the likelihood

of anti-social behaviour at popular locations, such as remodelling the frontage of the affected buildings.

5 Soho Drug Related Issues and ASB

- 5.1 The Council and Metropolitan Police Service are aware of the scale of concern over drug dealing and use in Soho. This continues to remain a high priority for the Council's partnership with the police, as we work together in tackling those who are responsible for the sale of drugs. In addition, the Council is also working with landlords to help 'design out' some of the more problematic locations in Soho.
- 5.2 In the last six months, as a partnership we have issued 18 community protection notices and 72 warnings. Furthermore, 4 high profile individuals have been issued with criminal behaviour orders.
- 5.3 In order to support police efforts, a dedicated team of City Inspectors will be focusing on associated environmental issues such as defecation, urination and abandoned tents. We have increased our street flushing schedule to ensure the area remains clean and clear.
- 5.4 The Council is also aware that telephone boxes in the Soho area are being subjected to abuse, including waste dumping, drug taking and drug dealing. As a result, we are working closely with BT to highlight this issue and a number of unused phone boxes have been locked, stopping individuals using these for drug taking and urination in the meantime.
- 5.5 As part of our community reassurance responsibilities, the Council and the Police have conducted regular walkabouts with Soho residents and held monthly Walk-In surgeries for residents. Both Council and Police representatives have been attending Soho Ward Panel meetings and meetings with Camden authorities to ensure cross-border measures are employed. Over the last few weeks, we have received more positive feedback from the community, who are starting to see the impact partnership interventions. There is still much to be done and this area remains a key focus for the Police and Council resources.

A focus on the residential Service – work to protect and support the vulnerable in our community

Westminster's Home Improvement Agency (HIA)

6.1 The HIA works within the homes of our more vulnerable, older and disabled residents. The Council arranges for funding, via grants, to those on benefits so

they can adapt their homes as they move into older age. The alternative to this is a residential care home or more expensive care packages from Adult Social Care. Residential Services work with Adult Social Care to install level access showers, stair lifts, ramps and any other works identified by the Occupational Therapist that will make their home more accessible, given the residents health challenges.

- 6.2 Residential Services also provide: security measures for residents who have been burgled, emergency heating and support for residents at risk of domestic abuse.
- 6.3 The team has worked within over 300 private sector homes; funding £1.1 million of work this year across the City, ensuring the quality and professionalism of our contractors and works are completed on time and to an excellent standard.
- 6.4 The budget for adaptations remains healthy for residents to stay in their own home and we are continuing the work to extend the engagement with our partners in Adult Social care and Health.

Westminster's Handyperson service

- 6.5 Westminster's Handyperson service provides low-level, low-cost interventions that are considered extremely helpful, if not vital, by our residents. The service is essential to keeping vulnerable people safe and independent in their own home, and can be used to identify other issues in the resident's life, or home environment, which may be having a detrimental impact on their quality of life, safety or health.
- 6.6 Early identification of such issues can significantly impact on the likelihood of such a resident entering a crisis situation at a later date and the consequential costs that can occur in the Health Service and Adult Social Care as a result. The works by our handyperson service therefore also contributes to the wider prevention agenda.
- 6.7 We operate 2 Handypersons providing a free service to all residents over 60 or disabled in the borough. They carry out those small jobs around the home that elderly or disabled people struggle to carry out. We change light bulbs, put up shelves, add grab rails, secure carpets, in fact almost any small improvement or repair around the home.
- 6.8 During the 2016/17 financial year the service achieved 1123 visits, significantly above the 800 target (40% above target). The impact of this service on its clients' well-being is immeasurable to the individual resident.

Warm Homes Healthy People scheme

- 6.9 The Residential Environmental Health team are currently operating the Warm Homes Healthy People scheme, which specifically aims to check the homes of those aged over 65 and those with children under 5. We have now incorporated this work into our regular service, so residents can self-refer for a Healthy Homes Check, or be referred on behalf of someone else, such as healthcare worker or a doctor.
- 6.10 The Healthy Homes Check covers all aspects of hazards in the home environment, with a particular focus on: fuel poverty, energy efficiency, insulation, heating and whether any financial savings can be made. Onward referrals are frequently made for home adaptation needs, the Handyperson Service, the Safe and Secure grant scheme and for further energy or benefits advice. The support on offer varies depending on tenure. Private rented properties can be improved more easily via enforcement action and various grants can be utilised where owner occupiers are on a low income.
- 6.11 186 Healthy Homes Checks have taken place this financial year, which has resulted in 58 significant Category 1 hazards identified and removed.
- 6.12 Supporting cohesion within our communities and taking a lead on preventing extremism.
- 6.13 Prevent is one of the four elements of CONTEST, the government's counterterrorism strategy which works with the Home Office and community organisations to stop people becoming terrorists or supporting terrorism. Although there have criticisms of Prevent, the former chief executive of the Association of Police and Crime Commissioners, Nazir Afzal, has endorsed the programme's value in preventing around 150 individuals travelling to Syria, 50 of them children. It continues to be supported here in Westminster.
- 6.14 During 2016/17, the Council's Prevent Team has achieved the following:
 - Delivered 45 'Workshop Raising Awareness of Prevent' (WRAP) sessions to over 1300 front line workers across Westminster.
 - Over 100 individuals have attended our Prevent Parenting Programme a
 13 week parenting programme based on the Race Equality Foundation's
 'Strengthening Families, Strengthening Communities', but adapted in order to address the risks of radicalisation and extremism.
 - Launched a pilot programme to engage with young people about the risks and threats they face from both gangs and radicalisation.

7 External Funding Success (Community Safety)

- 7.1 Community Safety has successfully leveraged a range of external funding in order to maintain and improve commissioned services across crime reduction and Prevent. Securing this funding has involved developing detailed proposals with multiple partner agencies:
 - Over £200k funding for Prevent staff, increasing capacity from 3 to 5 staff
 - Over £185k funding secured for Prevent projects, a £40k increase from 2016/17.
 - c£500k from the DCLG Domestic Abuse Fund for accommodation based support for victims of violence and abuse, including women's only emergency accommodation to support female rough sleepers
 - Continuation of Home Office Sexual Violence support funding, as well as match funding from the CCG for mental health support linked to the IGU.

8 CCTV

8.1 We remain in discussion with the Metropolitan Police Service with regards to the provision of CCTV in Westminster. The Metropolitan Police Service wishes to install a CCTV network in Westminster, which will mainly be used during large scale events in the city. The current proposal is for the Council to grant fund the purchase and installation of the cameras and the police would then monitor and maintain them in the future. The MPS will therefore own the network and will be required to provide necessary revenue expenditure to support the maintenance of the cameras



Adults Health & Public Protection Policy & Scrutiny Committee

Date: 19 June 2017

Classification: General Release

Title: Update Report from Healthwatch Westminster

Report of: Christine Vigars-Chair of Healthwatch CWL

Cabinet Member Portfolio Cabinet Member for Adults Social Services & Health

Wards Involved: All

Policy Context: City for Choice

Report Author and Carena Rogers - Healthwatch

Contact Details: Carena.Rogers@healthwatchcentralwestlondon.org

1. Executive Summary

1.1 This report is to introduce the Committee to Healthwatch Central West London's new Chief Executive Officer and to provide an update on recent work undertaken in Westminster.

2. Healthwatch Central West London Chief Executive Officer

- 2.1 Olivia Clymer joined Healthwatch Central West London as the new Chief Executive Officer on 24th April 2017.
- 2.2 Olivia's early career was spent with the Environment Agency, which subsequently led to roles in related areas in both the public and private sector. Her experience of the voluntary and community sector and local authority helped to develop her focus on regeneration and the challenges of social and economic disadvantage.
- Olivia has served as a member for the Consumer Council for Water, and was a housing association board member for nine years. Olivia gained NHS experience as a non-executive director for Dudley and Walsall Mental Health Trust and for Northampton General Hospital where she currently chairs the Quality and Safety Committee. Her experience in social care and systems transformation has informed her interest in the challenging area of sustainable healthcare provision.

3. Update on Healthwatch Central West London (HWCWL) work activity in Westminster

- 3.1 HWCWL has two work priorities in Westminster, identified through consultation with local people how well care coordination is working for people with long-term health conditions in the borough, including how user experience is informing evaluation of the service; and ensuring that service users are fully included in planned changes to mental health day provision in Westminster.
- 3.2. Care coordination for people with long-term health conditions
- 3.2.1 This work is being coproduced with through a project group established with members from the Advocacy Project's Older Adults Group. We meet every two weeks.
- 3.2.2 In May, Care Navigators were invited to a project group meeting to outline their role and clarify some questions that members of the project group had on how care coordination was managed across the borough. Following on from this, a decision was made by the project group to take the following actions:
 - issue a survey to GP practices to ascertain the level of knowledge about the Care Coordination Service, whether referrals were being made into the service, and to ask about satisfaction with the service. This survey will be sent out week beginning 12th June and will run for two weeks.
 - Hold focus groups with people with long-term health conditions living in Westminster to get greater detail on their experiences of managing their condition and support available through their GP practice. These will take place in late June to early July.
 - Gather examples of best practice in support for people for long-term health conditions through primary care provision and patient involvement to inform local commissioners of different options.

3.3 Mental health day provision

- 3.3.1 HWCWL attended the mental health day services transition steering group and continued to advocate for better coproduction with service users and improved communication with both current service users and more widely. The day provision has now entered a new phase that is no longer offered through dedicated buildings to a community based model.
- 3.3.2 HWCWL has compiled a log of actions taken and reflections on how well service users felt that they were included in the planned changes. This will inform further discussions with Westminster City Council on lessons learned from this process that can lead to improved working practices to support coproduction in the future.
- 3.3.3 HWCWL is also working with service users to design and present a workshop on coproduction for commissioners within the Council to assist them in working to these principles at all levels of service change or procurement. The

workshop will be delivered in mid-July and is being championed within the Council by the Commissioner responsible for the mental health day services.

3.4 Written reports

3.4.1 HWCWL asked people in Westminster at a number of engagement events and through an online survey whether they knew about plans for changes to health and care in the local area. Over three quarters were not aware of any plans; 82% had not heard of Sustainability and Transformation Plans; and nearly 90% wanted to know more.

3.5. Other engagement activity

- Engaged in CLCCG engagement review of how well they work with the voluntary and community sector
- Engaged with CLCCG engagement review of how well they work with patients and user panel. Advocated strongly for more support for Patient Participation Groups at GP practices.
- Attended One Westminster's Older People's Service Providers Network
- Attend CLCCG Primary Care Commissioning Committee
- Participated in Westminster Community Network meeting investigating the state of the third sector in Westminster.
- Attended South Westminster health and wellbeing network
- Attended CLCCG Quality and Safety Committee meeting
- Met with in-patient pharmacist at Chelsea and Westminster hospital to advise on patient involvement in changes to medication on discharge
- Held an information stall at a Look After Your Brain event at Paddington library
- Held an information stall at Global Heritage Café event at WECH community café
- Held an information stall at Westminster volunteer event at Westminster Boating Base

3.6 Written responses

- 3.6.1 Provided written statements on Quality Accounts for:
 - Imperial College Healthcare
 - Central London Community Health
 - Central North West London
 - Chelsea and Westminster Hospital
- 3.6.2 Provided written evidence for the CQC's peer led review into Central North West London health provision





Adults, Health & Public Protection Policy & Scrutiny Committee

Date: 19 June 2017

Classification: General Release

Title: Update on Proposals for a Crime Prevention Co-

commissioning Fund for London

Report of: Mick Smith, Head of Community Safety

Cabinet Member Portfolio Public Protection and Licensing

Wards Involved: All

Policy Context: City for Choice / Heritage / Aspiration

Report Author and Adam Taylor x4513

Contact Details: (ataylor3@westminster.gov.uk)

1. Executive Summary

1.1. Following the Deputy Mayor for Policing & Crime (DMPC) decision in November 2016 to award crime and disorder reduction grants for 2017-19 through the London Crime Prevention Fund (LCPF), and the allocation of 30% of what was previously borough funding to a new co-commissioning funding pot from 2018/19 onwards, this report gives a summary of discussions to date on the development of that fund and the potential implications for Westminster.

2. Key Matters for the Committee's Consideration

Committee is asked to:

- 2.1. Note changes to the way LCPF is allocated over the next Police & Crime Plan period and the impact on Westminster's current commissioned services for community safety.
- 2.2. Note the development of the co-commissioning fund as part of these changes and the potential for this to meet Westminster's funding gap in 2018/19 and beyond.

2.3. Determine how the Committee wishes to be kept up to date on the development of co-commissioning proposals given the timescales outlined in section 3 below.

3. Background

- 3.1. In November 2016, the DMPC agreed to continue allocating LCPF to Boroughs through a continuation of the budget for four years from 2017/18 to 2020/21, but to apportion that budget between direct borough funding (70%) and funding for co-commissioned services (30%) starting in year 2 of the fund.
- 3.2. In allocating borough funding, MOPAC redistributed funds based on a new formula to take into account need and demand. This has resulted in a shift in funds from inner to outer London boroughs and the overall impact of both of these decisions has seen Westminster's allocation reduce by 56% between 2017/18 and 2018/19 (see table 1 below)

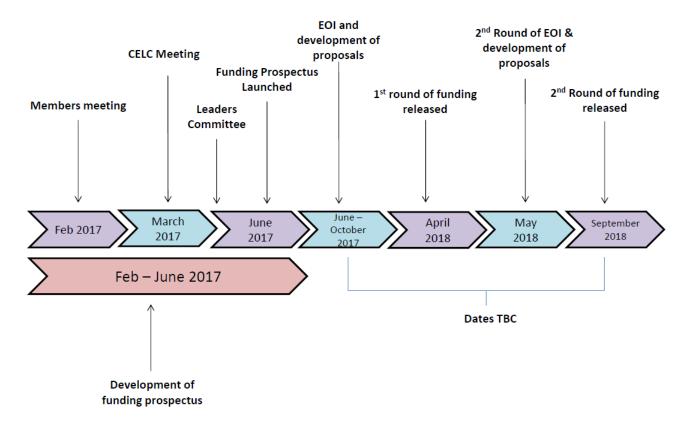
Table 1 Change in direct borough funding from MOPAC

Borough	2013/14	2017/18	2018/19
Westminster	£1,119,006	£1,071,006	£473,766
London	£17,865,840	£19,682,137	£12,725,764

- 3.3. The loss of direct borough funding over the next two years forces us to review funded provision across the Safer Westminster Partnership including services to tackle gang and youth violence, violence against women and girls, and to support and manage our most prolific offenders.
- 3.4. We are therefore left with a significant funding gap for 2018/19 and 2019/20. In order to avoid significant cuts to provision, we must identify alternative sources of funding over the next 12-months and one such source could be the co-commissioning fund.
- 3.5. Figure 1 below sets out a draft an ambitious timetable for the development of and delivery of an approach to co-commissioning community safety services which would see newly co-commissioned services operating in two tranches starting in April 2018 and late 2018 respectively.
- 3.6. To support the development of the co-commissioning fund and the resulting prospectus, a working group made up of representatives from Local Authority Heads of Community Safety (including Westminster), Association of Directors of Children's Services, National Probation Service, London Community Rehabilitation Company, NHS England, MOPAC and others

- 3.7. At this point there have been very few, if any formal decisions made on the specifics of the co-commissioning funding prospectus but a few consistent themes have emerged in the two working group meetings held to date:
 - Projects must be based in London and/or be of benefit solely to London
 - Only 5-8 projects are expected to receive funding
 - Sub-regional projects must cover a minimum of 3 boroughs
 - Projects must involve a minimum of 3 partner agencies
 - Local Authorities in which the proposal will be delivered must be core supporting partners
 - Funding priorities will be identified and set-out in the prospectus and projects must meet one or more of these priority themes
 - There must be a clearly identified lead agency who can demonstrate the necessary leadership at a regional and/or sub-regional level

Figure 1 Draft timeline for the development and release of co-commissioning funds



3.8. Beyond this a number of concerns or areas for discussion remain to be resolved at the next working group meeting in mid-June before the Leader's Committee meets to sign-off proposals

- Timescales there is still a degree of concern over how tight the timescales are given the degree of collaboration required to develop proposals
- Commissioning linked to timescales and given the level of funding involved, local procurement processes would not be responsive enough to commission services within the timescales set-out. MOPAC are looking at ways in which they may be able to support this process to ensure timescales are adhered to
- Feedback truly collaborative co-commissioning bids require a significant amount of investment from lead agencies and supporting partners to discuss, develop and draft proposals. Consequently it is felt that the process should minimise the amount of wasted effort and if only 8 projects are to be funded, as close to 8 proposals as is practical should be encouraged while ensuring the process is fair, and transparent
- Criteria although there is general support for the draft criteria that have been set out thus far, the process for delivering and assessing some of these needs to be resolved. For example, it is not practical for pan-London proposals to obtain individual sign-off from 32 London Boroughs
- Priorities a long list of potential priorities for funding has been circulated for consultation, as well as a short list of four priorities that have been recommended for tranche 1 projects. Boroughs were asked to comment on these ahead of the next working group meeting on 12 June
- Market Development MOPAC are proposing to hold market development workshops for each priority area in early July to bring together partners to discuss needs in more detail and to influence organisations to come together to submit expressions of interest.
- 3.9. Taking all of the above into account there are five key decision points over the next 12-months which will determine the likelihood for Westminster to meet some or all of its current funding gap for community safety services through the co-commissioning fund.
 - Funding prospectus 29 June 2017 the launch of the funding prospectus set-out the funding priorities and enable us to review this against current provision to determine whether there are any opportunities to shift borough spend into co-commissioning
 - Market development sessions w/c 10 July 2017 assuming there
 are opportunities to co-commission sovereign and/or shared services
 provision, the market development events in early July will bring partners
 together and allow us to gather support for an approach to cocommissioning which supports a shift in spend from borough allocations

- Expression of interest August 2017 once EOIs are submitted in August 2017, initial feedback from MOPAC will indicate whether we are likely to be successful were we to continue to develop these into proposals
- Funding decision November/December 2017 a final decision on which projects will be support in tranche 1 is expected towards the end of the calendar year. If unsuccessful we will either have to identify other sources of funding, or look to cut services
- Tranche 2 –April 2018 between now and the end of the financial year, further decisions are expected on the shape and the priorities for tranche 2 of the co-commissioning fund; if funding priorities in tranche 1 do not support a shift from borough to co-commissioning there may be scope to do so as part of tranche 2; furthermore, tranche 1 priority areas that require more development could also come into tranche 2.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact Report Author:

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Adults, Health & Public Protection Policy & Scrutiny Committee

Date: 19 June 2017

Classification: General Release

Title: Update on progress of the Safer Westminster

Partnership

Report of: Mick Smith: Head of Community Safety

Cabinet Member Portfolio Public Protection and Licensing

Wards Involved: All

Policy Context: Community Safety

Report Author and Report Author Angela Lambillion x5753

Contact Details: <u>alambillion@westminster.gov.uk</u>

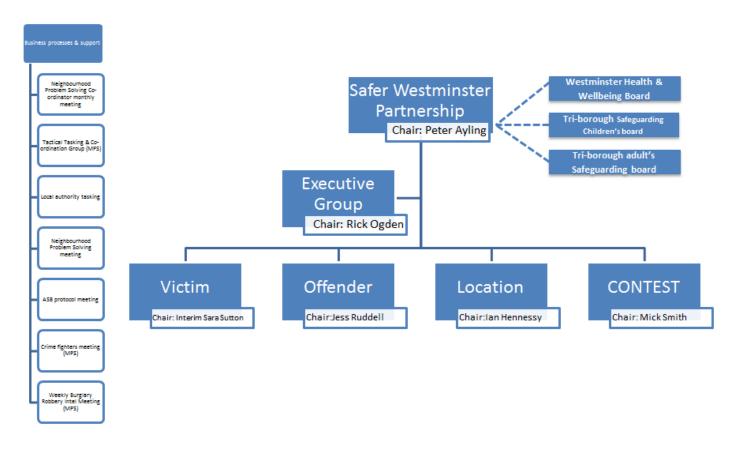
Angela Lambillion- Community Safety

Commissioning Manager

1. Safer Westminster Partnership Structure

- 1.1 The Safer Westminster Partnership (SWP) has refreshed its governance arrangements to move to a more problem oriented approach. Part of this revamp saw the introduction of an Executive Group to ensure delivery against the SWP Strategy and agreed priorities. The new structure can be seen overleaf.
- 1.2 The new structure has now been implemented and meetings have taken place for each of the boards with a particular focus on developing a terms of reference and action plan for each board.
- 1.3 Adopting a problem oriented approach has seen the creation of Victim, Offender and Location boards. The work of these boards will focus upon evidenced based priorities identified from the annual partnership Strategic Assessment to reduce victimisation and offending and to target resources in problem crime locations.
- 1.4 The structure provides a more streamlined problem oriented approach to enable cross cutting themes such as employment and mental health to be discussed in relation to all victims or offenders rather than separate cohort groups. CONTEST focuses on Counter Terrorism work and although much of

- this work is confidential, links will be made with the other project boards where necessary.
- 1.5 The introduction of an Executive Board has been created to drive and challenge performance across the boards and to identify synergies and any new emerging risks or issues. The Executive Board is chaired by the Borough Commander of the Fire Service and is made up of the Chairs of the Victim, Offender, Location and CONTEST boards.
- 1.6 The SWP will have closer links into the Health and Wellbeing Board and Adult and Children's Safeguarding boards.
- 1.7 The Business processes and support on the left hand side of the diagram show the partnership tasking and problem solving meetings which feed into each of the boards and are important in identifying and escalating any new or emerging trends and issues.



2 Safer Westminster Partnership Vision and priorities

2.1 A strategic assessment was produced in October 2016 drawing from a range of data across the partnership and this evidence base was used to develop the vision, goals and priorities for the SWP.

- 2.2 The vision for the SWP is:- 'Making Westminster safer by working in partnership to reduce the risk and harm of crime and ASB, focusing on protecting the most vulnerable within our communities'.
- 2.3 This vision highlights the priority of the SWP to focus resources towards protecting the most vulnerable within Westminster, in line with the MOPAC London Policing Plan. Often, vulnerability, crime and deprivation can come together creating a cycle of offending and victimisation. The SWP wants to work together to break that cycle.
- 2.4 Underpinning this vision are two cross cutting principles that apply to the Victim, Offender, Location and CONTEST groups that drive delivery of the SWP priorities.
 - Intervening early with families and young people to reduce their risk of victimisation and prevent offending.
 - > Working in collaboration with partners to focus on the key contributing factors that reduce victimisation and offending.
- 2.5 Each of the boards has a key aim and objectives driven by the findings of the Strategic Assessment they are:-

2.6 Victim

Aim:-

• Identify and work with repeat victims to reduce their vulnerability.

Objectives:-

- Improving co-ordination across the partnership to identify all repeat victims and ensure they have access to appropriate services;
- Provide bespoke support to those most at risk of domestic violence to reduce high levels of repeat victimisation;
- Provide bespoke support to vulnerable young victims i.e. those aged under 25 who are at risk of serious youth violence;
- Gain a greater understanding of the level and quality of pan London provision for victims in Westminster;
- Review the SWPs compliance with the victims code of practice;
- Early intervention to prevent victimisation.

2.7 Offender

Aim:

• Working the most prolific offenders to reduce their re-offending.

Objectives:-

- Ensure adequate commissioned services for the most prolific and vulnerable offenders to address their criminogenic needs, in particular around substance misuse and accommodation;
- Provide bespoke support to vulnerable young offenders, i.e. those aged under 25 who are at risk of committing serious youth violence;

- Improve offender cohort co-ordination to ensure clarity of partners roles and responsibilities and gain a greater understanding of what works;
- Explore and tackle the issue of cross border and foreign national offending in Westminster, utilising every possible funding opportunity;
- Intervening early with young offenders at risk or in the criminal justice system to prevent future criminality;

2.8 Location

Aim:-

 Reducing high harm crime in Queens Park and Church Street wards and the West End.

Objectives:-

 Develop a joint area action plan for Church Street, Queen's Park ward and the West End to reduce high harm crimes and reduce vulnerability in this area driven by business intelligence.

2.9 **CONTEST**

Aim:-

• Enhancing the partnership response to countering terrorism.

3 Next steps

- 3.1 Multi agency partnership workshops have been held for each of the new boards to develop action plans around these objectives
- 3.2 These draft plans will be presented to the SWP on June 22nd.
- 3.3 The development of a Strategy for the SWP for the next three years is in the process of being drafted and will also be presented to the SWP in June.
- 3.4 Quarter one performance data will be sent to the Scrutiny Panel once finalised.
- 3.5 The next strategic assessment and half year performance data will be presented to Scrutiny at the November meeting.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact the report author:

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Adults, Health & Public Protection Policy & Scrutiny Committee

Date: 19 June 2017

Classification: General Release

Title: Work Programme and Action Tracker

Report of: Director of Policy, Partnerships & Communications

Cabinet Member Portfolio Cabinet Member for Adults & Public Health

Cabinet Member for Public Protection

Chairman of the Adults, Health & Public Protection

Policy & Scrutiny Committee

Wards Involved: All

Policy Context: Building Homes and Celebrating Neighbourhoods

Report Author and Contact Details:

Muge Dindjer-Policy and Scrutiny Manager x2636

mdindjer@westminster.gov.uk

1. Executive Summary

1.1 This report updates the draft Work Programme and notes that it will not be finalised until after the urgency sub-committee on 29th June. It also updates the Action Tracker.

2. Key Matters for the Committee's Consideration

- 2.1 The Committee is asked to:
 - Review the draft list of suggested items in Appendix 1
 - Finalise items for the September meeting
 - Note the action tracker

3. Background

3.1 The only substantive change to the work programme at this stage is the addition of the health urgency sub- committee on 29th June which will consider the CCG's plans for the year ahead plus their new Primary Care Strategy.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact Muge Dindjer x2636

mdindjer@westminster.gov.uk

APPENDICES:

Appendix 1- Annual Work Programme

Appendix 2 - Action Tracker



Health Urgency Sub- Committee 29 th June 2017			
Local plans, priorities and key issues for service development and improvement	To outline to Committee the key priorities and plans for the CCG's.	Jules Martin	
New Primary Care Strategy	To consult Committee on the draft new Strategy	Jules Martin Chris Neal	
ROUN	ROUND TWO (20 SEPTEMBER 2017)		
Agenda Item	Reasons & objective for	Represented by:	
	item		
Cabinet Member Update	To receive and update	Councillor Heather Acton- Cabinet Member for Adult Social care and Public Health	
CCG Community Services programme?	To review proposed changes to patient pathways	CCG's	
Work Programme			

ROUND THREE (22 NOVEMBER 2017)		
Agenda Item	Reasons & objective for item	Represented by:
Examining the links between substance abuse, mental health and the criminal justice system	The criminalisation of health problems and the impact on services	Westminster magistrates

How can Business support	To identify how business	Amy Lame-night czar
best practice in public	does/could support the Police	and BIDS?
safety?	to help reduce crime.	

Agenda Item	ND FOUR (31 JANUARY2017) Reasons & objective for item	Represented by:
Report Back from HWB Centre task Group &? Corporate work on Hubs?	To receive report back from the committees task group and consider recommendations in the context if the corporate work on the hubs	Councillor Barrie Taylor

Agenda Item	OUND FIVE (9 APRIL 2017) Reasons & objective for item	Represented by:
N.B this meeting will take place during purdah		

	Other Committee Events & Task Groups			
Briefings	Reason	Type		
Safer Westminster	To assess the work of the Safer Westminster Partnership.	To be		
Partnership	Please note that this is one of the statutory duties of the	Considered		
	Committee.	at		
		Committee		
NHS Provider	To assess complaints from local Provider Trusts as a	A potential		
Complaints	result of the Francis Inquiry and new Health Scrutiny	briefing		
	powers.			
CIS Impact-	Councillor McAllister has picked up this Single Member	SMS-		
	Study form Councillor Rowley.	Councillor		
		McAllister		
Supporting the	Committee has agreed to establish this task group. This	Councillor		
development of	will run from September to January with the background	Barrie Taylor		
health and	working taking place over the summer.			
wellbeing centres				
Air Quality Task	This task group has concluded its work and the report is	Councillor		
Group	being launched on 14.6.2017.	Jonathan		
		Glanz.		

Appendix 2



22 June 2016		
Agenda Item	Action	Status
Item 5 Cabinet Member Updates: Adults & Public Health	A paper on the proposed Prioritisation Framework being drawn up by the Westminster Health & Wellbeing Board to be submitted to the Committee for comment and input at its meeting in November.	Completed.
Item 5 Cabinet Member Updates: Adults & Public Health	Committee Members to receive a copy of Westminster's Better Care Fund application which had been submitted to the Department of Health	Completed.
Item 5 Cabinet Member Updates: Adults & Public Health	Suggested that Tamara Barnett met with Children's Services to make them aware of the training that was available for foster carers.	This has been completed on email.
Item 6 Task Groups – Human Trafficking	Suggested that it would be useful to provide a briefing on Human Trafficking to elected Members in the north of the borough.	This meeting has now taken place.
Item 6 Task Groups – Human Trafficking	Agreed that the Committee would:	
	i) Promote the free October Conference, on how local authorities can best tackle human trafficking in light of the Modern Day Slavery and Care Acts, to relevant Councilors and Officers related to Community Safety, Child and Adult Safeguarding, Housing and Violence against Women & Girls.	The conference has been postponed to 2017 and will be promoted within the Council when announced.

	ii) Consider how the City Council could contribute to the agenda of this Conference and have	
	broader input. (iii)Write to relevant Directors in Adult Social Care, Children's Services and Public Protection, asking how they:	Completed
	 identify victims leaving safe houses to ensure that the ongoing support provided by the City Council was compliant with new legislation and represented best practice improve access to intelligence identify and protect child victims of trafficking 	
	(iv) Ask the Director of Adult Safeguarding and Director of Housing to provide a briefing on how the City Council supported adult victims of trafficking after they were recognised as trafficked; had leave to remain; and had left a safe house.	Completed
Item 7 Westminster Health & Wellbeing Board	Committee to receive a briefing paper on NHS England's plans for pharmacy services and whether pharmacies would be asked to have a greater role.	Distributed to committee 22.9.16
Item 7 Westminster Health & Wellbeing Board	The City Council's Policy & Communications Department to be requested to draw up proposals for the publication and distribution of consultation on the draft joint Health & Wellbeing Strategy, and to share the consultation programme with Committee Members.	Completed
Item 10 Public Protection Data and Information	The paper on public protection data to be made available to the forthcoming meeting of the Westminster Scrutiny Commission as a background paper for the discussion on Committee Work Programmes.	Completed.

Item 11
Annual Work Programme
2016-17

The approved Committee Work Programme for 2016-17 to be published.

Completed.

21st September 2016		
Agenda Item	Action	Status
Item 4 Cabinet Member Updates: Public Protection	The Cabinet Member to contact the Police regarding the need for residents to receive a response to reports and concerns raised through calls to the 101 service.	Completed
Item 4 Cabinet Member Updates: Public Protection	The Cabinet Member to contact the Rough Sleeping Team to ensure that Ward Members received follow-up information on specific cases that had been raised.	Completed
Item 4 Cabinet Member Updates: Public Protection	The Cabinet Member to receive future copies of the quarterly crime 'dashboard', which sets out the most recent data.	Due with next dashboard which is in discussion with Stuart Love and the Chairman
Item 4 Cabinet Member Updates: Public Protection	The Cabinet Member to write to all Councilors offering to visit their Wards to undertake public protection and licensing audits, and to discuss issues that fell within her portfolio.	Completed
Item 4 Cabinet Member Updates: Adults & Public Health	The Cabinet Member to be asked to provide a written response on the impact that that the Key Performance Indicator targets not being met had on the delivery of out of hospital care.	Covered in the Cabinet Member update of 23.11.2016 Appendix B
Item 4 Cabinet Member Updates: Adults & Public Health	A progress report on the review of priorities for Public Health to be provided for Committee Members.	Covered in the Cabinet Member update of 23.11.2016 Appendix C
Item 5 Standing Updates	Details of the operational plan and key performance indicators for the new Healthwatch contract to be submitted to the next meeting of the Committee in November.	On the November agenda

Item 7 Update on Progress of the Safer Westminster	The Director of Public Protection & Licensing to provide a report on the new	On track
Partnership	Policing & Crime Plan and on the implications it may have on existing projects, when it becomes available.	
Item 7 Update on Progress of the Safer Westminster Partnership	Details of the outcome of discussions with MOPAC about future funding for the SWP, and for initiatives such as the integrated gang projects, to be reported at the forthcoming meeting of the Committee in February 2017.	Due in February
Item 9 Update on the North West London Sustainability & Transformation Plan (STP)	The Tri-Borough Executive Director of Adult Social Care to provide Committee Members with clarification of how the Council Tax increase of 2% in respect of the adult social care precept was being spent by the City Council.	Completed
Item 9 Update on the North West London Sustainability & Transformation Plan (STP)	The Committee had the following feedback on the draft STP: • There is a need for early engagement with LA's, service users and other partners • A need for greater emphasis on mental health and social isolation and • They had concerns over the implementation of the 7 day GP service. The Committee to receive the next draft of the STP for final comment, prior to its submission to NHS England on	Letter sent from the Chairman to the Cabinet Member and response received. Scrutiny's response submitted to NHS England. Received and final version post submission also
11000 40	21st October.	shared with Scrutiny in November.
Item 10 Committee Work Programme 2016-17	A further report on the review of Licensing Policy to be added to the Agenda for the meeting in February 2017, which would	Completed

Agenda Item	include case studies from the Mayfair area. Consideration to also be given to inviting expert witnesses from the area to contribute to the discussion, together with representatives from the Planning and Licensing services. 23 rd November 2016 Action	Status
Item 4 Cabinet Member Updates: Public Protection	The potential role of Scrutiny in establishing a bidding strategy for MOPAC to be included in the discussion on future funding at the forthcoming meeting in February.	Main item on February Agenda
Item 4 Cabinet Member Updates: Public Protection	Clarification of the outcome of the discussion on future funding for Westminster's Integrated Gangs Unit by the Children, Sports & Leisure Policy & Scrutiny Committee to be obtained.	Email to Committee on 23.1.2017
Item 4 Cabinet Member Updates: Public Protection	The concerns of the Human Trafficking Foundation over a recent raid on sex work premises by the police that had been conducted in violation of the Association of Chief Police Officers rules to be raised with the Police.	Letter sent from the Chairman. Response received from Borough Commander-to be sent with Committee papers on 24.1.2017
Item 4 Cabinet Member Updates: Public Protection	The concerns of the Human Trafficking Foundation over child trafficking in Westminster to be raised with the Interim Tri-Borough Director of Children's Services.	Letter sent from the Chairman
Item 4 Cabinet Member Updates: Public Protection	Consideration be given to convening a cross-portfolio scrutiny examination of public safety concerns arising from the forthcoming 50 th anniversary of the Notting Hill Carnival, which would include	Short brief to be sent with Committee papers on 24.1.2017

	representation from the police and the community.	
Item 9 Committee Work Programme 2016-17	The Borough Commander to be invited to attend the meeting in February 2017 to participate in the discussion on MOPAC funding. Consideration to also be given to inviting a representative from the Home Office.	The Borough Commander and MOPAC are attending.
Item 9 Committee Work Programme 2016-17	The report on End of Life Care to be rescheduled to the meeting in March 2017.	Completed
Item 9 Committee Work Programme 2016-17	The review of the Better Care Fund to be dealt with by way of a separate briefing.	Completed- sent to Committee 30.1.17

Agenda Item	1st February 2017 Action	Status
	T. 01 0 11	

Item 4 Cabinet Member Updates: Public Protection & Licensing	The City Council's response to the draft London Police & Crime Plan to be signed by the Cabinet Member and the Chairman of the Committee	Signed by the Leader, Cabinet Member and Chairman of the Committee and submitted on 1st March. Circulated to Committee on 1st March 2017.
Item 4 Cabinet Member Updates: Public Protection & Licensing Item 4 Cabinet Member Updates: Public Protection	The Committee to be provided with statistical details of the regular street counts of rough sleepers in Westminster. The Committee to be provided with a substantive update on the Westminster Rough Sleeping Strategy, prior to the re-commissioning of outreach services.	Completed and circulated to Committee on 15 th February 2017. Completed and circulated to Committee on 15 th February 2017

Item 4 Cabinet Member Updates: Adult Social Services & Public Health	The draft Health and Wellbeing Strategy Implementation Plan to be referred to Committee for comment.	This is still in production and will be shared with committee once completed.
Item 5 Standing Updates: Air Quality Task Group	A Member of the Committee is sought as a deputy for Councillor Glanz.	No one has been identified. However the Task Group completes its work in March.
Item 5 Standing Updates: Community Independence Task Group	A Member of the Task Group is sought to take forward the work begun by Cllr. Rowley	Councillor McAllister has taken on this work and the first meeting with officers takes place on 28 th March.
Item 6 MOPAC Funding & Proposals for Metropolitan Police Basic Command Unit Changes	That MOPAC provide Committee Members with copies of the draft Performance Framework and the London Formula	The draft Performance Framework was circulated to Committee on 15 th February. The London Formula has been requested and is still awaited.

Agenda Item	8 th May 2017 Action	Status
Item 3 Minutes	The wording to be expanded to include reference to Members' comments that	Completed
St. Mary's Urgent Care Centre - Minute 6.6	patients who were ready to be discharged should have the	

St. Mary's Urgent Care Centre - Minute 6.6	Members' comments that patients who were ready to be discharged should have the opportunity to be assessed formally, and that this should form the basis of any necessary care plan.	
Item 4 Cabinet Member Updates: Adult Social Services & Public Health Homecare	Members requested details of the IT that was available for Homecare; and asked that the next Cabinet Member update include information on the Homecare contract, with details of hourly rates and whether an allowance was made for travel time.	Completed via briefing note of 9.6.17
	Details of the outcomes and recommendations that may have followed Care Quality	Sent to Committee on 12.6.17

Item 4 Cabinet Member Updates: Adult Social Services & Public Health Smoking	Commission inspections of Homecare and care homes in Westminster were also requested. To investigate whether other local authorities have extended the places where smoking is not permitted to include Council housing. John Forde (Deputy Director of Public Health) to provide the Committee with a link to the video being offered by the 'Kick-it' campaign.	Completed vis briefing note as above.
Item 4 Cabinet Member Updates: Adult Social Services & Public Health Sustainability & Transformation Plan (STP)	Details of the feedback received from NHS England to the submission made by North West London; together with the minutes from North West London STP meetings were requested.	Requested
Item 4 Cabinet Member Updates: Adult Social Services & Public Health Air Quality and Planning	Clarification sought of the influence that the City Council could have through planning decisions which improved public health by reducing the pollution caused by buildings.	Completed via briefing note as above.
Item 4 Cabinet Member Updates: Adult Social Services & Public Health Mental Health Day Services	An update requested on the effectiveness of Mental Health Day Services and safe spaces	Requested
Item 4 Cabinet Member Updates: Adult Social Services & Public Health Mental Health Day Services	Clarification sought on whether Westminster's Troubled Families were linked with the Family Information Service and Employment Support.	Completed via briefing note sent out 9.6.17
Item 4 Cabinet Member Updates: Public Protection Anti-Social Behaviour	Sara Sutton (Director Public Protection & Licensing) to provide the Committee with details of the work of Street Based Anti-Social Behaviour Task & Finish Group.	Requested

Item 4 Cabinet Member Updates: Public Protection Moped Crime	A joint letter would be sent to the Borough Commander from the Committee and Cabinet Member highlighting their concerns regarding the rise in moped enabled robbery.	Being updated following feedback from Borough Commander
Item 7 Committee Work Programme	The agenda for the next meeting in June to focus on implementation of the Policing Plan and Borough Command Units; MOPAC Funding; and the Safer Westminster Partnership.	Completed
Item 7 Committee Work Programme	The presentation by Westminster's CCG's on local plans, priorities and key issues for service development and improvement, to be received at a meeting of the Health Urgency Sub-Committee, to be arranged as soon as possible after the General Election on 8 June. The presentation to also look at the Primary Care Strategy over the forthcoming year.	Completed