

Overview & Scrutiny Committee

Agenda

Membership to be confirmed at
Annual Council on 15 May 2018

Date

Tuesday 22 May 2018

Time

10.00 am

Place

Trafford Room

Thorpe Lodge
1 Yarmouth Road
Thorpe St
Andrew Norwich

Contact

James Overy tel (01603) 430540

Broadland District Council
Thorpe Lodge
1 Yarmouth Road
Thorpe St Andrew
Norwich NR7 0DU
E-mail: james.overy@broadland.gov.uk



@BDCDemServices

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**The Chairman will ask if anyone wishes to
film / record this meeting**

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| 1 | To receive declarations of interest under Procedural Rule no 8 | |
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| 5 | Chairman’s Announcements | |
| 6 | Public Speaking | |
| | <p>To consider representation from the members of the public who have expressed the wish to convey their views on items on this agenda.</p> <p>In accordance with the Constitution a period of 3 minutes is allowed per member of the public.</p> | |
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| 9 | Outside Organisation Update | |
| | <p>To receive any updates from Member representatives on outside organisations.</p> | |
| 10 | <u>Overview and Scrutiny Committee Work Programme</u> | 20 – 23 |
| | <p>To consider the Committee’s Work Programme.</p> | |

P C Kirby
Chief Executive

Minutes of a meeting of the **Overview & Scrutiny Committee – Review of Cabinet Agenda** held at Thorpe Lodge, 1 Yarmouth Road, Thorpe St Andrew, Norwich on **Tuesday 3 April 2018** at **10.00 am** when there were present:

Mr D G Harrison – Chairman

Mr A D Adams	Mr J J Emsell	Mr V Ray-Mortlock
Mrs C H Bannock	Mr R F Grady	Mrs K A Vincent
Mr D Buck	Mrs L H Hemsall	Mr D C Ward
Mrs J K Copplestone	Mr G K Nurden	

Mr M Snowling also attended the meeting for its duration.

Also in attendance were the Head of Democratic Services and Monitoring Officer, Head of Corporate Resources, HR and Customer Services Manager, Private Sector Housing Manager, Overview and Scrutiny Research Officer and the Committee Officer (JO).

161 DECLARATIONS OF INTEREST UNDER PROCEDURAL RULE NO 8

Officer	Minute No & Heading	Nature of Interest
Head of Democratic Services and Monitoring Officer	165 - Pay Policy Statement: Annual Review 166 - Performance Related Pay 2018	Personal Interest, on behalf of all staff present as beneficiaries of the pay scheme

162 APOLOGIES FOR ABSENCE

Apologies for absence were received from Mr Everett and Mr Peck.

163 MINUTES

The Minutes of the meeting held on 20 March 2018 were confirmed as a correct record and signed by the Chairman.

Minute no: 160 – Overview and Scrutiny Committee Work Programme

A Member advised the meeting that the Highway and Major Projects Manager at Norfolk County Council had confirmed that he would be willing to attend a meeting of the Committee to discuss the proposed Western Link to the Northern Distributor Road and other highway issues. A date for the presentation would be arranged in due course.

164 CHAIRMAN'S ANNOUNCEMENTS

The Chairman advised the meeting that Stacy Cosham, the Overview and Scrutiny Research Officer, was leaving the Council to take up a post at another local authority. Members thanked Stacy for her hard work in supporting the Committee over many years and wished her good luck for the future.

CABINET REPORTS

165 PAY POLICY STATEMENT: ANNUAL REVIEW

The report provided the Annual Review of the Council's Pay Policy Statement, as required under the Localism Act 2011. The Policy set out the Council's position relating to the remuneration for Chief Officers, as well as the approach on pay for the financial year 2018/19. The Pay Policy Statement had been consulted upon with union and non-union staff representatives.

As part of the budget setting process for 2018/19, a two percent annual increase in the salary budget had been modelled as part of the Council's Medium Term Financial Plan.

The major change to the Statement was the removal of references to public sector exit payments, which had been included in the 2017/18 Statement in preparation for their introduction during 2017, but had still not yet been put in place.

Other amendments included changing the minimum salary level for local grades 13 and 12 to the National Minimum Wage and National Living Wage respectively.

It was confirmed that aligning HR policies and staff terms and conditions was being looked at as part of the Collaboration Feasibility Study with South Norfolk Council. However, there was no intention to align the Pay Policies of both authorities at this stage.

RECOMMENDED TO CABINET

Option (1)

to **RECOMMEND** to Council:

to approve the Pay Policy Statement, as set out in the report.

166 PERFORMANCE RELATED PAY 2018

The report outlined a request for the Cabinet to determine the percentage value Standard Merit Unit (SMU) for the purposes of the Performance Related Pay (PRP) award in 2018. The report also confirmed the two percent cost of living increase to pay grades and salaries that had been already implemented with effect from 1 April 2018.

Members were advised that the Council had operated a PRP scheme linked to an objectives-based appraisal system for many years and the scheme had proved successful in recruiting and retaining high performing staff throughout the period.

Cabinet had agreed a Medium Term Financial Plan for the Council from 2016/17, which included a two percent annual growth in salary budgets for both cost of living and PRP awards during the lifetime of the Plan.

There was now a requirement for Cabinet to determine the value of the SMU for 2018, in recognition of the fact that the two per cent allocation for pay increases in 2018 would be fully committed. Based on current staffing and a prediction of individual performance assessments derived from previous years, one per cent of the payroll budget (equivalent to £76,500) would be sufficient to fund an SMU of 1.33 percent.

Staffside had been invited to comment on the proposed PRP award for 2018 and it was expected that a representative from Unison would be making a representation to Cabinet on the award.

Members noted that 93.3 percent of male staff and 89.2 percent of female staff received a PRP award, but that overall a higher proportion of females (64 percent) received the more financially advantageous PRP assessments compared with 22 percent of males.

In response to a query, it was confirmed that Broadland's and South Norfolk Council's pay structure was being explored as part of the Collaboration Feasibility Study.

RECOMMENDED TO CABINET

that the value of a Standard Merit Unit for 2018 be set at 1.33 percent, to be met from the general fund reserve.

167 DISABLED FACILITIES GRANT PROCEDURE

The report sought Cabinet's views on some proposed options for the use of additional external funding to support vulnerable residents in Broadland.

The Council was responsible for the delivery of mandatory Disabled Facilities Grants (DFGs). The contribution received by the Council to fund DFGs through the Better Care Fund had recently risen and last year was £766,000. The Council was committed to spending this sum, which would be close to full capacity of demand. Moreover, it was likely that next year's DFG allocation could increase by up to nine percent. The Council had also received £74,395 of additional resource for DFGs or other initiatives to be spent in the current financial year. In the light of this level of funding it was proposed that a number of options be considered to help residents in the district with health difficulties beyond the scope of the mandatory DFG procedure.

The proposals for utilising the additional funding were:

- To continue a previous Heating System Project to allow the upgrade of heating systems at residential properties to continue using a tightened health and financial criteria.
- The introduction of an architect fee grant to a maximum of £4,500 for complex cases where structural works were required.
- A top up grant or loan of up to £15,000 where works were required to adapt the property beyond the current DFG cap of £30,000.
- To increase the Handyperson+ current low level adaption grant to £750.
- A 'Get You Home Grant' of up to £1,000 to pay for essential maintenance works at residents' properties identified through the District Direct Service and other hospital referral routes.

Members considered that loans rather than grants were preferable for works to adapt homes beyond the £30,000 DFG cap. It was confirmed that loans would be held in perpetuity against a property and would be payable when the property was sold.

The Committee expressed concern about the possible costs of architect drawings and proposed that they be set at no more than ten percent of the required structural works and up to a total of £4,500.

It was confirmed that the Council facilitated the financing of DFGs and did not recommend or enter into contracts with builders. The Home Improvement Agency was the body that provided additional support, advice and information to allow vulnerable residents to stay in their own homes.

RECOMMENDED TO CABINET

Options (1, 2 as amended, 3 (ii), 4, 5, 6)

- (1) to continue the current heating system service including the current fast tracked means test procedure using Energy Company Obligation flexible criteria. The minimum health requirement would relate to a disabling condition as diagnosed by a health professional or the receipt of attendance allowance to represent the care eligibility element. Replacement would be available for all non-condensing boilers and those condensing boilers identified beyond reasonable repair. Other systems such as those using inefficient electric heaters could also be replaced;
- (2) to provide an Architect Fee Grant of up to 10 percent of the total works, with an upper limit of £4,500, for adaptations that involve structural works and thus require detailed drawing beyond the schedule process initiated by the Council's Technical Officers;
- (3) to provide financial assistance where the current cap of £30,000 will not cover the required adaption works through a top up loan without interest of up to £15,000;
- (4) to increase the Handyperson+ current low level adaption grant to £750;
- (5) to provide "A Get You Home Grant" of up to £1,000 to pay for essential maintenance works and or essential capital purchases at residents' properties identified through the District Direct Service and other hospital referral routes;
- (6) to subject all new services to availability of funds in the relevant financial year and for a monitoring procedure to be initiated by the Private Sector Housing Manager in consultation with the Head of Service and Portfolio Holder for Communities and Housing.

The meeting closed at 11.02 am

PUBLIC HEALTH UPDATE

Portfolio Holders: Policy, Environmental Excellence, Communities & Housing and Economic Development
Wards Affected: All

1 SUMMARY

- 1.1 This report provides an update on activity over the last six months relating to increasing the levels of health and wellbeing of Broadland residents in line with the Council's stated ambition.

2 INTRODUCTION

- 2.1 In April 2018 Public Health England updated their Health Profile Deprivation Maps to include data for Indices of Multiple Deprivation (IMD) from 2015 (previously it was from 2010) and 2016 electoral ward boundaries. The update is available on page 2 at: <http://fingertipsreports.phe.org.uk/health-profiles/2017/e07000144.pdf>.
- 2.2 This showed no change to Broadland's overall position as above the England average for deprivation with 35 percent of our population in the least deprived category and no areas in the most deprived quartile. However there was a slight increase in deprivation in Foulsham, Guestwick and Wood Dalling parishes, together with a small area around Aylsham town centre. On a positive note, deprivation reduced in Halvergate parish. The 2018 Profile is due to be published in June 2018 and will be fully evaluated in the next Public Health Update.
- 2.3 The Social Mobility Commission published their 'State of the Nation' report on 28 November 2017. Their Social Mobility Index, used a range of 16 indicators for every major life stage, from early years through to working lives, to map England's social mobility hotspots and coldspots. This ranked all 324 local authorities in England in terms of the social mobility prospects for someone from a disadvantaged background.
- 2.4 The report found the worst performing areas for social mobility were not city areas, but remote rural and coastal areas. Broadland was ranked 93rd from the top, the highest scoring local authority in Norfolk. Five local authorities in Norfolk were in the bottom 65 local authorities. Details of the full report are available at <https://www.gov.uk/government/news/social-mobility-in-great-britain-fifth-state-of-the-nation-report>
- 2.5 Data from the 'State of the Nation' report will be used to inform future improvement projects.

2.6 Indicators where Broadland performed above average nationally were

	Indicator	Score
Schools	% of children eligible for FSM* achieving at least the expected level in reading, writing and maths at the end of Key Stage 2. (*FSM: Free School Meals)	Best 10%
Youth	% of young people eligible for FSM that are not in education, employment or training (positive destination) after completing KS4	Best 20%
	Average points score per entry for young people eligible for FSM at age 15 taking A-level or equivalent qualifications	Best 10%
	% of young people eligible for FSM at age 15 entering higher education at a selective university (most selective third by UCAS tariff scores) by the age of 19	Best 25%
Adult	% of families with children who own their home	Best 10%

2.7 However not all indicators gave a positive result and some of the worst performing areas in Broadland were:

	Indicator	Score
Schools	Average attainment 8 score for pupils eligible for Free School Meals (FSM)	Worst 10%
Youth	% of young people eligible for FSM at age 15 entering higher education by the age of 19	Worst 20%
Adult	Median weekly salary (£) of employees who live in the local area, all employees (FT and PT)	Worst 20%

2.8 The Housing Affordability ratio supplied by ONS (2014 average house prices / total household weekly income) is high across many Broadland parishes, particularly in the north of the District. This reflects the lower wages and higher property prices.

2.9 Across Broadland it is estimated there are 251 households in the most financially vulnerable decile. These households might benefit from access to advice, learning and jobs, which may prevent further deterioration in finances and potential need for services. Whilst this is the lowest number across Norfolk, these households are most concentrated in Thorpe St. Andrew, Acle and Aylsham areas. Norwich had the highest number (12,603).

3 THE NORFOLK CONTEXT

Health and Wellbeing Board (HWB)

3.1 The Health & Wellbeing Board (HWB) is developing its joint Health & Wellbeing Strategy for 2018-22. A workshop in December 2017 focused on three areas:

- The links with Sustainability & Transformation Plan (STP) and HWB
- District Councils and a Place Based approach
- Wider issues around building healthy, resilient communities.

3.2 Some key workshops outcomes were:

- Creating a single integrated, sustainable system to improve the health and wellbeing of Norfolk and Waveney. Integrating ways of working, collaborating on delivering person centred care.
- Taking a collective view as a system – working as system leaders to engage workforce, elected members and the public.
- Sustainability of the health, care and wellbeing system – focus on prevention, early intervention and wider determinants of health and wellbeing.
- Place based approach – build health and wellbeing systems around people and communities.

3.3 To take this forward, there needs to be strategic alignment between the HWB, the Joint Health & Wellbeing Strategy and the STP. A draft strategic framework has been drawn from development work to date.

3.4 The framework will be a core element of the Board's new Strategy and is a shared commitment by all partners.

3.5 An early draft of the Joint Health & Wellbeing Strategy has received comments from Broadland District Council and we will continue to contribute to the Strategy over forthcoming months.

Better Care Fund (BCF)

3.6 A report on Integration of Norfolk Adult Social Services and a review of the Better Care Fund 2017/18 was presented to the May Health & Wellbeing Board.

- 3.7 This set out the high level position of Adult Social Services on future integration and reported on the Better Care Fund for 2017/18, including work on social prescribing. Full details of the report are available at: <http://norfolkcc.cmis.uk.com/norfolkcc/Meetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/1483/Committee/39/Default.aspx>
- 3.8 Broadland has received an allocation from the improved Better Care Fund (iBCF) of £766,000 to deliver Disabled Facilities grants and adjacent services as detailed in the IHAT (Integrated Housing Adaption Team) Locality plan submitted to the BCF.

Sustainability and Transformation Plan

- 3.9 In February an Expression of Interest was submitted by Norfolk & Waveney STP to become an Integrated Care System (ICS).
- 3.10 NHS England will work with the STP over the next six to twelve months so they can be fully prepared to become an ICS. The STP will work closely with local health and wellbeing boards to develop plans for closer working around the ICS in coming months.

Social Prescribing Update

- 3.11 Funding of £950,000 per year for two years from the Adult Social Care improved Better Care Fund and Public Health has been allocated to support county-wide Social Prescription initiatives.
- 3.12 £100,000 has been allocated for a programme/service manager and training. There are no further details of this as yet.
- 3.13 £850,000 is to be divided across the five CCG locality boundaries to develop local Social Prescription models. Norwich CCG will receive £240,000 and North Norfolk CCG will receive £144,500 annually for two years.
- 3.14 Norwich CCG funds will be held by Norwich Community Advice Network to provide 2.5FTE Living Well Workers and a FTE Team Manager who will be employed by voluntary sector partners.
- 3.15 The Living Well Workers will be trained to NCAN Level 1 or Level 2 Advice Qualification standard and have around 4-5 contacts per client, with a motivational interviewing approach. A degree of flexibility will be required as some clients may respond to advice; some may need further support and help to access other organisations.
- 3.16 A small scale support fund of around £20,000, managed by the Team Manager will be allocated across the three areas in Norwich CCG (East, Central and West). £10,000 of this will be allocated to Central Norwich as

this is larger area. The remainder of the £240,000 (approximately £65,000) will be held for capacity building funding

- 3.17 North Norfolk CCG agreed that funding should be split along patient population, which would give a 40 percent allocation (£57,800) to Broadland area. This will be used to provide the Living Well Workers, same as Norwich CCG area to ensure parity of service across the District.
- 3.18 It is expected there will be 1.5 FTE Living Well Workers employed within the Broadland area of the North Norfolk CCG boundaries, with a small amount remaining to support Voluntary Community Sector (VCS) capacity.
- 3.19 It has been agreed to broadly maintain financial and geographical boundaries and not merge either Living Well Workers or VCS capacity pots. However a degree of flexibility across the areas to meet supply, need and demand will be required, particularly around the borders of the two CCG areas.
- 3.20 It is expected to have Living Well Workers in place by July.
- 3.21 North Norfolk District Council will use the remaining North Norfolk CCG funds to directly employ Living Well Workers in their hub.

District Direct

- 3.22 District Direct was a six-month pilot from September 2017 to March 2018, based at Norfolk & Norwich University Hospital (NNUH) aimed at reducing Delayed Transfers of Care, by having District Council Housing Officers within the discharge hub to identify housing related barriers and reduce delays, help to prevent re-admission and support sustainable independent living at home.
- 3.23 One member of staff from the Housing Options Team was based in the Discharge Hub with officers from four other districts providing resource for the remaining four days. One hundred and eighty four patients were managed via District Direct and the review identified a 36 percent reduction in average length of stay from 11 days to 7 days. Based on NNUH performance management information this saved 725 bed days over the 29 week pilot (a saving of £181,250 based on £250 cost per bed day)
- 3.24 Over the course of a year, this could lead to a saving of £325,000 for a five day service or £465,250 for a seven day service. The most significant savings were made in Geriatric Medicine, and General Surgery.
- 3.25 The current pilot ended on 31 March 2018 and an interim generic email address has been provided by South Norfolk District Council to co-ordinate any subsequent enquiries the Discharge Hub staff may have. Options for future funding have been proposed and are being considered by Adult Social Care, Clinical Commissioning Groups and the District Councils.

Community FICS

- 3.26 The Integrated Case Management has been rebranded as “Community FICS” (Fully Integrated Care and Support) across Norwich CCG. This new model is being piloted in the City 2 area, covering GP surgeries in Old Catton, Sprowston and Thorpe St. Andrew.
- 3.27 A key aim is to free up capacity within general practice. This new model includes a standard weekly Multi-Disciplinary Team (MDT) meeting involving a wider group of organisations from across all sectors, including representation from Broadland District Council. The expectation is that most referrals will be managed at this level and will include people who have historically been difficult to engage and or hard to help.
- 3.28 There will be a monthly Enhanced MDT to review the small number of complex cases who require GP input and a more in-depth multi-agency discussion to support robust and effective care and prevention planning
- 3.29 The new Community FICS began on 26 April 2018. The pilot will run in City 2 for several months and will be evaluated before being rolled out across the remaining Norwich CCG neighbourhoods.

Healthy Norwich

- 3.30 Broadland District Council continues to work in partnership with Norwich City Council, Norfolk Public Health and Norwich CCG through Healthy Norwich to improve health outcomes particularly in relation to four priorities for 2017/18:
- Smoking cessation and prevention
 - Promoting healthy weight and lifestyles – including diabetes prevention
 - Affordable warmth
 - Cancer – prevention and early detection
- 3.31 A 2018/19 project plan has been submitted to the Norwich CCG programme board for approval and will then be shared with Broadland District Council.

Smoking cessation and prevention

- 3.32 **Smoke-free side-lines:** This Norfolk wide project involves Healthy Norwich, District Councils, Smokefree Norfolk and the Norfolk Football Association to encourage adults to refrain from smoking at youth football games. Norfolk now has 28 football clubs signed up to the scheme. The UEA are undertaking a formal evaluation of the project to assess the impact on

behaviour change. Taverham and Hungate Rovers have joined South Walsham, Old Catton Juniors, Horsford Juniors and Aylsham Juniors taking part. There has been significant positive engagement on twitter, at: #smokefreesidelines. Aylsham Juniors Youth Football club was part of a feature on Radio Norfolk <https://www.bbc.co.uk/programmes/p062ml2p>.

- 3.33 Promoting Healthy Weight and Lifestyles – including diabetes prevention has a number of work streams within this area.
- 3.34 **The Daily Mile:** Engagement with primary schools continues to prove a challenge across Norfolk. Research from Stirling University into the link between the Daily Mile and a child's cognitive function and their academic performance is still awaiting publication. The Daily Mile is gaining national momentum, with an advert on ITV. Healthy Norwich has engaged GP practices to ask them to write to their local primary schools to support engagement in this initiative.
- 3.35 **Breastfeeding Friendly (BFF) GP Surgeries:** This project is still proving successful with 85 percent of Norwich CCG practices engaged in the scheme. Practice level outcome data on the impact on feeding rates has begun to be collated.
- 3.36 **Sugarsmart:** Healthy Norwich initially developed a Sugarsmart campaign with Dieticians from NNUH. The Mancroft Advice Project (MAP) was commissioned to develop the Sugarsmart project to secondary schools during 2018/19. Learning from this will inform a 'sugarsmart offer' to all Norwich secondary schools including Thorpe St Andrew High School, Sprowston, Taverham and Hellesdon High Schools.
- 3.37 **National Diabetes Prevention Programme:** This has been successfully rolled out across Norwich CCG, with practices carrying out retrospective database trawls to invite their patients to attend the programme. 1350 Norwich CCG patients have been referred into the scheme since its launch in January 2017.
- 3.38 **Cancer Prevention and Early Detection.** A significant amount of work has taken place since this project began in October 2017. The activities include launching a C the Signs cancer diagnosis app with GP Practices in Norwich CCG area, working closely with Cancer Research UK and Macmillan to develop a variety of training courses for nursing and medical staff and development of practice level data packs.

Public Health

- 3.39 The Local Public Health Offer (LPHO) has provided £17,142 annually for three years from 2016/17 until 2018/19.

- 3.40 Local Public Health Offer monies in 2016/17 and 2017/18 funded a six-month pilot of the Home Improvement Agency (HIA) intervention at Drayton Surgery. This pilot is currently being evaluated by Norfolk Public Health using an independent assessor, together with data from North Norfolk CCG Integrated Care Coordinators (ICC). Results from the evaluation will be shared once available.
- 3.41 The HIA intervention was extended to a Norwich CCG Practice, East Norwich Medical Partnership who have practices in Sprowston and Thorpe St Andrew. However there was limited response due to the different nature of their ICC criteria and the HIA Officer was relocated to accept an additional 10 referrals from Aylsham ICC. These referrals will also be included in the evaluation being carried out by Public Health.
- 3.42 Options for Local Public Health Offer funds for 2018/19 are currently being considered. These include looking at improving resilience in young people. Suitable models are currently being examined; including using the PATHs (Promoting Alternative Thinking Strategies) in young people aged 5-11.
- 3.43 Along with the Health Profiles, data from the 'State of the Nation' report will be used to inform future Public Health initiatives.

Joint Working with Partner Agencies

- 3.44 A joint Broadland, North Norfolk District Council, North Norfolk CCG and Public Health workshop took place on 8th December 2017. This aimed to raise awareness of the different work of the organisations and identify gaps in services and looked at partnership working opportunities.
- 3.45 Outcomes from the workshop included a discussion between Broadland District Council and North Norfolk CCG about the benefits of taking Broadly Active to their CCG Executive Board. A workshop was arranged as part of Social Prescribing planning for practitioners.
- 3.46 A Public Health Workshop for Members was held on 1 February 2018. This was attended by 11 members and facilitated by the Director of Public Health and Public Health Officers.
- 3.47 The Workshop aimed to enable members to champion health improvements in their communities. It covered many aspects of Public Health policy, including the national context, with a focus on prevention and health improvement, including measures to improve health and reduce inequalities.
- 3.48 The role of District Councils and Public Health in tackling inequalities and preventing ill health was also covered. Members gave a very positive response to the workshop with feedback scores of 8/10 and above.

4 BROADLAND DISTRICT COUNCIL SPECIFIC ACTIVITY

4.1 There is a range of activity delivered by Broadland District Council meeting the ambition to increase levels of health and wellbeing. Updates on some key pieces of work are summarised below.

Handyperson+

4.2 A review of Handyperson+ activity for years 2015 to 2018 is being undertaken in May 2018. This will include dip sampling from November 2017 and the results will be presented to the Wellbeing Panel on 18 June 2018.

Broadly Active

4.3 Broadly Active has received 462 referrals across Broadland and Norwich in 2017/18. Final figures are not yet available due to active clients referred before the end of the financial year not yet completing the scheme, but indications are completion rates will remain above 30 percent. A full evaluation of 2017/18 will be presented in the next update. In November 2017, an evaluation sample of Broadly Active clients who had completed the scheme one year ago or more produced the following results:

- Those referred for being overweight had lost an average of 11.5% of their starting bodyweight after a minimum of one year (suggesting weight loss is being sustained)
- After a minimum of one year's completion, patients reported an average of 85 minutes more physical activity per week than when they began.
- 73 percent reported being more physically active than when they completed the scheme (9 percent remained the same). On average the clients were partaking in 53 more minute's physical activity than when they completed the scheme.
- 61 percent felt healthier than when they completed (23 percent the same).
- 58 percent visited their GP less than when they completed (37 percent the same).
- 89% were doing activities in independent, community based provision.

4.4 Most of the clients sampled referred to the social support that Broadly Active (and then their follow-on activity groups) provided as being a key element of their adherence. These statistics clearly demonstrate the long term benefit (and cost effectiveness) of the scheme.

- 4.5 Norwich CCG have agreed to continue to fund Broadly Active for 2018/19 with South and North Norfolk CCGs currently considering an option to provide funding at their executive committees.
- 4.6 Active Norfolk's Physical Activity Pathway pilot project has operated in two surgeries in Broadland this year. It has seen a limited number of patients but has shown early indications that direct referral is the best method for engaging patients in health change behaviours therefore recommending Broadly Active. The scheme has continued to deliver with Weight Intervention Norwich (WIN), a Tier three weight management scheme commissioned by Norwich CCG. Early analysis has suggested patients engaging with both Win and Broadly Active/Why Weight are losing a greater percentage of bodyweight than by attending WIN alone.

Why Weight

- 4.7 Three full Why Weight courses have been delivered in the second half of the year along with two four week Christmas focused groups. 36 residents attended with a 78 percent completion rate and average weight loss of 2.75 percent of their starting bodyweight. Two further follow up sessions have been held with 35 percent of completed members surveyed continuing to lose weight. 83 percent of those measured remain below their original bodyweight.
- 4.8 Two Why Weight sessions have been delivered for Broadland staff.

Parkrun

- 4.9 Despite the poor winter weather, the average attendance at Broadland's three parkruns rose to 740 per week in the early stages of 2018 and there has been a noticeable increase in 'new' runners. Blickling parkrun saw a huge new record turnout on New Year's Day, from 277 to 508. The increase in popularity has also seen a knock on effect to running clubs, races and events. In February 2018, The Stroke Association held a 'Resolution Run' that was supported and promoted by Catton parkrun participants and volunteers. Over £20,000 was raised at this event.
- 4.10 There are several stories of regular users crediting their local parkrun with getting them exercising for the first time or providing support through a period of poor mental health. Case studies are being prepared to illustrate this.

Community Activity

- 4.11 Various community groups continue to flourish throughout Broadland with support from the Council. The Acle Cardiac Support group has continued to meet, although the numbers are still quite low it does have a small core group of regular attendees. Recently, a Cardio Pharmacologist attended as a guest

speaker and gave an excellent presentation about the various heart related medications, which all members of the group found extremely useful.

- 4.12 The Co-ordinator has continued to provide activity sessions to Dementia Café groups including one at Roxley Hall, Thorpe St Andrew. In addition to the Dementia Cafes the Co-ordinator has continued attending sessions at the Stroke Survivors group at Thorpe St Andrew and has introduced other activities which have been provided and organised by community representatives from one of the other established Community Groups (from Frettenham Village Hall). In effect, this has provided an opportunity for an existing active community group organiser to support other groups with activities which they provide independently – a good example of one community group supporting another one.

Marriott's Way 10k

- 4.13 The 2018 Marriott's Way 10k will take place on 7 October 2018. This year will be the 10th anniversary of the event with the number of places increased to 500 and a range of celebratory ideas are being considered. The successful juniors fun run will accompany the race and a 'Couch to 10k' Beginners Course will take place in the Reepham/Aylsham area of the district in the approach to the race.

5 SAFEGUARDING

- 5.1 Broadland continues to be an active partner in the District Council Safeguarding Group which looks at both adults and children. The Chair is now held by Norwich City Council.

Safeguarding Workshop

- 5.2 An internal training workshop for Broadland District Council Managers has been arranged for Wednesday 13 June 2018. This will include updates on Safeguarding and dealing with immediate risks.

Harmful Sexual Behaviour (HSB)

- 5.3 The HSB audit report is currently with the Norfolk Safeguarding Children's Board for final approval before being published. A copy will be sent to Broadland District Council and will also be available on the Norfolk Safeguarding Children Board website: www.norfolkscb.org

6 RESOURCE IMPLICATIONS

- 6.1 There are no resource implications arising from this report.

7 LEGAL IMPLICATIONS

- 7.1 There are no legal implications arising from this report. The statutory responsibilities within the Health and Social Care Act 2012 lie with the upper tier authority.

8 CONCLUSION

- 8.1 Broadland residents continue to enjoy relatively good levels of health and wellbeing but the Council has an ambition to increase these further and will continue to support key areas of concern, which include obesity, dementia and mental health, particularly for young people.
- 8.2 Broadland District Council continues to work closely with partner organisations such as Public Health and the Clinical Commissioning Groups to build on existing strong relationships, particularly around new developments in healthcare. We continue to engage with Members and an update will be presented to the next Wellbeing Panel in June. Council officers are continuously briefing the relevant Portfolio Holders on current proposals.

9 RECOMMENDATION

- 9.1 The Overview and Scrutiny Committee is asked to note the content of this Public Health update report and feedback any further questions to the Deputy Chief Executive.

Matthew Cross
Deputy Chief Executive

Background Papers

None

For further information on this report call Sarah Oldfield on 01603 430121 or e-mail sarah.oldfield@broadland.gov.uk

OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME 2018-19

Subject to change across the year accounting for any resource implications and/or matters arising from Councillors. Please consult agendas before attending on our [website](#)

Topics brought to Committee for Information:

Date of Meeting	Topic	Lead Officer Portfolio Holder	Objectives and Desired Outcomes	Time Cycle
	Performance Report	Committee Officer	Committee to allocate areas for investigation to the Performance Management Sub Committee (PMSC) when the report is received under Cabinet papers.	Six Months
22 May 2018 17 July 2018 11 September 2018 6 November 2018 29 January 2019 26 March 2019	Committee Representation Updates	Committee Representatives	Opportunity for Committee Representatives from Norfolk Health Overview and Scrutiny Committee, Broadland Corporate Equalities Group, Norfolk Police and Crime Panel and Norfolk Health and Wellbeing Board to report back any key information to Committee or for Committee Members to raise any questions for representatives to take forward.	Bi-Monthly
22 May 2018 29 January 2019	Public Health Update	Health Housing and Partnership Officer	To receive an update on progress being made against the delivery of Public Health responsibilities at a District level, including Council priorities.	Six Months
17 July 2018	Transport provision and sustainability	Highways England Representative Public Highways Representative Cllr Clancy	To hold a discussion with the public body to understand specific elements of future infrastructure planning in the district, plans for the NDR, Northern and Western Link roads.	Once
17 July 2018	A47 Duelling Campaign	A47 Alliance representative Norfolk Public Highways	To understand the remit of the campaign and the role BDC can contribute towards the lobbying of Government	Once
17 July 2018 29 January 2019	Economy Update	Head of Economic Development/ Portfolio Holder for Economic Development	An update on progress being made against Tourism, Funding Deprivation, Unemployment Figures, what BDC is doing to generate sustainable employment opportunities, and progress of the LEP.	Six Months
17 July 2018 29 January 2019	Recommendation Update	Committee Officer	To review the Committee's recommendations from Scrutiny Reviews; establish how recommendations have progressed and been implemented; review any recommendation as necessary	Six Months

Date of Meeting	Topic	Lead Officer Portfolio Holder	Objectives and Desired Outcomes	Time Cycle
17 July 2018 29 January 2019	Resilience Update	Emergency Planning Manager	In place of the Broadland Resilience Forum, Members to receive an update on work being delivered and future plans	Six Months
11 September	Health Services in Broadland and Social Care Crisis	Clinical Commissioning Group representatives	Committee to discuss various elements of the services they commission to better understand their role and services delivered across the District	Once
11 September 2018 26 March 2019	Community Safety Update	Community Safety Manager	To receive an update from the Community Safety Coordinator on progress being made by the Norfolk County Community Safety Partnership with particular reference to any progress directly impacting the Broadland district.	Six Months
06 October 2018	Defences and Climate Change	Environment Agency representative	To understand how to protect Broadland for the future, specifically flood alleviation, planning on flood plains and establishing better planning for development.	Once
06 October 2018	Tourism and Business Development	New Anglia LEP representatives Head of Economic Development	Committee to gain insight as to how the New Anglia Strategy complements BDC policy; obtaining views of progress of New Anglia across Broadland; Understanding what has been delivered across the district and funding options beyond EU funding.	Once
16 October 2018 (after Committee meeting)	Joint Budget Meeting Preparation	Committee Officer	A facilitated discussion for the Committee to identify their questions for Cabinet ahead of the Joint Meeting. The Head of Finance and Revenues is invited to contribute towards the discussion to help the Committee set their questions	Annual
13 November or 11 December 2018	Joint Budget Meeting	Head of Finance and Revenues All PH's	To address Portfolio Holders with the agreed questions drafted at a workshop to be arranged separately from the agenda in October.	Annual
26 March 2019	Council Partnership Register Review	Committee Officer	Committee to receive an update against the Council's partnership register. Committee will be asked to identify any partnership concerns that may require further investigation by a nominated time and task limited panel	Annual
26 March 2019	Committee Annual Report	Scrutiny Research Officer	Committee to approve the drafted Annual Report for presentation to Council.	Annual

Date of Meeting	Topic	Lead Officer Portfolio Holder	Objectives and Desired Outcomes	Time Cycle
June 2019 (first after elections)	Council Policy Register	Committee Officer	Committee to receive an update of the Council's Policy and Strategy Register to enhance understanding of what exists and where such documentation is located for further reference. The Committee will be asked to identify any areas for further review as necessary.	4 Yearly after elections

Performance Management Sub Committee

Date of Meeting	Topic	Lead Officer Portfolio Holder	Objectives and Desired Outcomes
	Tourist department	Head of Economic Development Tourism Officer	To look at how the Council supports local businesses and art Initiatives and test how councillors can support further.
	Norwich Airport – Business Development	Economic Development Officers Norfolk Highways Team	Understand the masterplan for the airport; what impact will it have on local infrastructure – e.g. increased traffic and impact on businesses in Broadland.
	Fee's on DIY Waste	Norfolk County Council Portfolio Holder Waste Officer Farm watch representatives Police Officers dealing with waste reports. Parish/Town and District Council representatives	To understand: how were the fees determined and impacts on levels of fly tipping since the introduction of fees. The intention to improve waste services and residents understanding of recycling centre uses and how to report fly-tips.
	Rural Transport	Licensing Officers NCC Transport Parish/Town Councillors	To establish whether the Council has private operators in rural areas and how they are regulated. Determining any opportunities to invest in companies and how to assist rural villages to connect to main routes.

	Community at Heart	Communications Team	To understand the strategy and what has been achieved so far. Understand future aspirations and how Community at Heart feeds into parish councils and wider council strategy.
	Communications	Communications Team	Assess how communication has improved since implementation of revamped Comms Strategy. How are residents engaged in Council news How are papers utilised to promote the Council e.g. free-papers if Evening News/EDP aren't interested How parishes are supported in their communication

Workshops

Topic	Objectives	Lead Officers	Month
Preparing to meet with Cabinet to discuss budget performance	A workshop format facilitated by the Scrutiny Research Officer and Head of Finance and Revenue for Committee Members to identify, agree, and allocate questions for Cabinet to answer at the Joint Budget meeting.	Head of Finance and Revenue Services Finance Team staff Scrutiny Research Officer	October
Work Programme Identification	To identify subjects to be included in the replacement work programme. Considering suggestions received from members of the public and parish/town councils. Agreeing membership of identified review panels and outlining their Terms of Reference.	Scrutiny Research Officer	April