

Coventry City Council
Minutes of the Meeting of Cabinet held at 2.00 pm on Tuesday, 1 November 2016

Present:

Members: Councillor G Duggins (Chair)
Councillor A Khan (Deputy Chair)
Councillor F Abbott
Councillor L Bigham
Councillor K Caan
Councillor K Maton
Councillor J O'Boyle
Councillor E Ruane

Deputy Cabinet Members Councillor P Akhtar
Councillor R Lakha
Councillor P Seaman
Councillor C Thomas
Councillor D Welsh

Non-Voting Opposition Members: Councillor J Blundell
Councillor G Crookes

Other Members: Councillor S Bains
Councillor R Lancaster (Chair of Scrutiny Co-ordination Committee)
Councillor S Walsh
Councillor G Williams

Employees (by Directorate):

Place M Yardley (Executive Director), D Cockroft, L House, A Walster, A Williams
People G Quinton (Executive Director), L Gaulton, J Moore
Resources C West (Executive Director), L Hughes, P Jennings, L Knight, J Newman
Apologies: Councillor R Ali, J Innes and J Mutton

Public Business

45. Declarations of Interest

There were no disclosable pecuniary interests.

46. Minutes

The minutes of the meeting held on 4th October 2016 were agreed and signed as a true record.

There were no matters arising.

47. **Exclusion of Press And Public**

RESOLVED that the Cabinet agrees to exclude the press and public under Section 100(A)(4) of the Local Government Act 1972 relating to the private report in minute 57 headed “Reshaping Drug and Alcohol Services in Coventry” on the grounds that the report involves the likely disclosure of information defined in Paragraph 3 of Schedule 12A of the Act, as it contains information relating to the financial affairs of a particular person (including the authority holding that information) and in all circumstances of the cases, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

48. **Participation in 100% Business Rates Retention Pilot**

The Cabinet considered a report of the Executive Director of Resources, which sought approval of proposals to participate in 100% business rates retention pilot.

The Government announced that it intended to introduce a national scheme for the full local retention of all business rates, probably from 2020/21 financial year onwards.

Areas that had agreed a Devolution Deal had the opportunity to be involved in a 100% business rate retention pilot, which would begin from 1st April 2017. This would provide the opportunity to shape national thinking about the eventual scheme and to take forward further devolution. Conversations about the potential for a West Midlands pilot had taken place in parallel with discussions about a Devolution 2 Deal. Each pilot would incorporate some core design principles, but there would be some flexibility around what else was included.

The Department for Communities and Local Government (DCLG) had clarified that the pilot would only be open to constituent member authorities of combined authorities. Subject to the approval of each local authority and by Ministers, the West Midlands metropolitan authorities could be involved in a pilot should they wish. It was noted that each of the authorities would need to agree to participate for the pilot to go ahead.

It was proposed that the pilots would operate on a no financial detriment principle, meaning that authorities could not be worse off financially than they would otherwise have been had they not participated in the pilot. It was noted that, following detailed scrutiny of the way in which the pilot would operate, it had become clear that there may be a windfall benefit to authorities as a result of being part of the a pilot.

As there were still some matters that were the subject of ongoing dialogue with DCLG, it was being recommended for Coventry that authority to finalise detailed terms and arrangements for the pilot be delegated to the Executive Director of Resources following consultation with the Leader of the Council and the Cabinet Member for Strategic Finance and Resources.

The report indicated that, should the individual authorities and ministers wish to proceed, there was a need for the Government to commence the necessary legal process very shortly. Councils had therefore been asked to approve their participation formally during October, although in Coventry's case, the decision was being considered on 1st November as the soonest available meeting.

Due to the timescale for this matter, in accordance with Part 3e, Paragraph 19 of the City Council's Constitution, Councillor Lancaster, Chair of the Scrutiny Co-ordination Committee, attended the meeting for the consideration of this matter and agreed the need for urgency such that call-in arrangements would not apply.

RESOLVED that the Cabinet approves:-

- 1. Coventry City Council's participation in a West Midlands business rate retention pilot from April 2017, on a no detriment basis and in accordance with the terms outlined in the report submitted.**
- 2. Delegation of the authority for final sign-up to the pilot to the Executive Director for Resources, following consultation with the Leader of the Council and the Cabinet Member for Strategic Finance and Resources.**

49. Coventry Carers' Strategy 2016 - 2019

The Cabinet considered a report of the Executive Director of People, which sought approval of the Coventry Carers' Strategy for the period 2016-2019.

The report indicated that carer was someone who provided unpaid care for a family member or friend, who due to illness, disability, a mental health condition or an addiction, can't cope without support. The 2011 census identified 32,101 carers within Coventry. Of these, 3,100 were young carers or young adult carers under the age of 25 with approximately 28% of these under 16 years of age. Approximately 25% of carers in Coventry said they were caring for 50 plus hours per week, which was in line with the national average. It was estimated that the economic value of the contribution made by carers was approximately £132bn a year nationally and £680m in Coventry.

The Strategy was Coventry's third and applied to carer of all ages and built upon the progress and achievements already made, in addition to responding to the requirements set out in the National Carers' Strategy Second Action Plan 2014-16.

The Cabinet noted that the Strategy had been developed through a multi-agency approach, including health partners and voluntary sector organisations that play a key role in supporting carers. Carers and other stakeholders had also been engaged to ensure that the priorities contained within the Strategy reflect what was important to them and support the four priorities set out in the National Carers' Strategy of identification and recognition; realising and releasing potential; a life alongside caring' and supporting carers to stay healthy.

For each of the priorities, a number of improvement areas were identified based on local carers' feedback and evidence of what support carers found most effective. These improvement areas were set out in Appendix A of the report submitted and would be accompanied by annual implementation plans which

would clarify how activity across a range of organisations would support and contribute towards these improvement areas.

In addition, the Strategy supported the Coventry Health and Wellbeing Strategy 2016-19 objectives of working together as a Marmot City: reducing health and wellbeing inequalities; improving the health and wellbeing of individuals with multiple complex needs; developing an integrated health and care system that provides the right help and support to enable people to live their lives well.

RESOLVED that the Cabinet approves the Coventry Carers' Strategy 2016-2019.

50. **Provision of Effective Home Support Services**

The Cabinet considered a report of the Executive Director of People, which sought approval of commissioning proposals for the provision of effective home support services.

Prior to considering the proposals, the Cabinet Members present confirmed that they had received and read the Equality and Consultation Analysis (ECA) which had been circulated separately to the main report.

Home support was personal care and support delivered to people who meet the eligibility criteria for social care and who were living in their own homes, to enable them to remain living independently for as long as possible. As well as supporting adults and older people, the support provided assists carers and relatives in maintaining their caring role, and children.

Existing adults and children's home support services were provided under a framework contract awarded in 2010 with a small number of contracts awarded subsequently to ensure sufficient provision was in place. Under these arrangements a range of independent providers were contracted to provide services with no guarantee of volume of work. Since these contracts were let, there had been a number of significant changes in social care and the market in general, including the introduction of the Care Act 2014, Children and Families Act 2014, changing regulatory framework and changes to employment terms and conditions through the introduction of the National Minimum Wage.

Providers of home support had reported that due to cost pressures, a larger volume of business was required in order to ensure that services were sustainable. It was therefore proposed that children's and adults home support be brought together under one commissioning activity to ensure children's home support supply is not restricted due to having low volume children's only providers which would not be maintainable.

It was proposed to undertake a procurement exercise to award nine contracts for home support ranging between 1,200 and 1,500 hours per week per contract. The contracts would be of seven years duration (five years plus the option to extend by a further two years) to enable security for providers in order for them to invest appropriately in the development and training of their workforce. Seven contracts would focus on support to older people, younger adults with physical impairment and children and would be aligned to Coventry's seven GP cluster areas. The

remaining two contracts would provide support on a city wide basis to people with learning disabilities and/or mental ill health. It was intended that for each contract there would be a primary and secondary provider to provide resilience.

The Cabinet noted that the procurement process would be undertaken at a time where there was increasing emphasis on bringing together health and social care to operate as a more cohesive single system, while recognising the different statutory duties that existed. In order to recognise this, the procurement process would include requirements for Continuing HealthCare (CHC) which was currently provided by similar providers but under a different contract. It was estimated that the CHC requirement totalled 4,500 hours citywide. The CHC element of the contract would continue to be managed by Coventry and Rugby Clinical Commissioning Group with budget and purchasing arrangements remaining distinct from the City Council.

RESOLVED that the Cabinet:-

- 1. Approves the commencement of a tender process for home support to enable the City Council to continue to deliver its duties to those eligible for social care.**
- 2. Delegates authority to the Executive Director of People and the Executive Director of Resources following consultation with the Cabinet Member for Adult Services, for the award of contracts following the conclusion of the tender process.**

51. Health and Well Being Strategy and Joint Strategic Needs Assessment (JSNA)

The Cabinet considered a report of the Director of Public Health, which sought approval of the Joint Strategic Needs Assessment (2016) and the Joint Health and Wellbeing Strategy (2016-2019).

The Cabinet noted that the Coventry Health and Wellbeing Board had a statutory responsibility to produce a Joint Strategic needs Assessment (JSNA) for the local authority area, which looked at the current and future health and care needs of the local population. This would inform and guide the planning and commissioning of health, wellbeing and social care services within a local authority area.

Coventry Health and Wellbeing Board was also responsible for producing a Joint Health and Wellbeing Strategy (JHWBS), which would provide Coventry with a picture of what the Health and Wellbeing Board would deliver over the next three years and how partners would work together to achieve this. The Coventry Health and Wellbeing Board's vision for Coventry was that local people live happier, healthier, longer lives and have improved health and wellbeing during their lives.

In order to develop the JSNA and identify the priorities in the JHWBS, a review of the 2012 Health and Wellbeing Strategy was undertaken, alongside a wide ranging study of data, information and resources about the health and social care issues affecting Coventry residents. A stakeholder call to evidence was also carried out. To focus on the areas of greatest need, a prioritisation matrix was used to identify potential priorities, which considered a range of factors including

size of the population affected, scale of the impact, associated economic costs and the scale of inequality. Together, this work produced a list of potential priorities, and three final priorities were chosen by the Coventry Health and Wellbeing Board:

- Working together as a Marmot City to reduce health and wellbeing inequalities
- Improving the health and wellbeing of individuals with multiple complex needs
- Developing an integrated health and care system that provides the right help and support to enable people to live their lives well.

The Cabinet noted that the report had also been submitted to the Scrutiny Co-ordination Committee at their meeting on 12th October 2016 and received a briefing note detailing recommendations arising from their consideration on this matter. In particular, they recommended that the Cabinet make the following amendments to the Joint Health and Wellbeing Strategy (2016-19):

- a) An approach to mental health transition between children's and adult services be included;
- b) The section on skills and education to be expanded to include adult education.

They also recommended that when money becomes available across the Health and Social Care system, it should be invested in prevention services.

RESOLVED that the Cabinet:-

- 1. Agrees the additional recommendations from the Scrutiny Co-ordination Committee.**
- 2. Endorses the Joint Strategic Needs Assessment (2016) and the Joint Health and Wellbeing Strategy (2016-2019).**

52. Increasing Coventry's Superfast Broadband Coverage

The Cabinet considered a report of the Executive Director of Place which sought approval of proposals for investment to increase Coventry's superfast broadband coverage.

The Government expected that 20,000 new jobs and £6.4bn in Gross Value Added (GVA) would be created in the UK by 2024 as a result of investment in broadband infrastructure.

Coventry's broadband coverage currently lagged behind that of similar areas. Superfast broadband connections (over 20Mbps) were available in just 91.7% of properties in Coventry, which compared poorly to other areas and was a long way from the Government target of 95% of properties having superfast broadband by 2017. Birmingham, Derby and Leicester were in the top 40 for broadband speeds, while Coventry was 74th out of 185.

European funding was being made available to improve superfast broadband infrastructure that served small and medium enterprises (SMEs). This funding would target areas containing concentrations of SMEs, but would not serve them exclusively; residents and larger businesses would also benefit as the infrastructure in the target areas improved as a result of the project. Ultimately, the project would help the city improve its superfast broadband coverage considerably as part of its Digital Strategy, which was under development and due to be formally adopted by the end of 2016.

In order to access this funding, the Council must provide match funding. Coventry's contribution to an overall £15m package of improvement across Coventry and Warwickshire would be £2.55m, which was proposed to come from corporate capital resources. In addition to a European grant of £4.86m, Growth Deal funding of £4.3m had been requested from Government. The project would be completed by the established Coventry, Solihull and Warwickshire Broadband Project (CSW Broadband). A further one off investment of corporate monies was proposed to project manage on behalf of the Council for a period of 2 years up to a maximum of £150k.

RESOLVED that Cabinet:-

- 1. Agrees one-off corporate funding for up to £150,000 to project manage the Council's investment and work as part of the Coventry, Solihull and Warwickshire Broadband (CSW Broadband) team to secure ongoing funding into Coventry's Broadband Infrastructure.**
- 2. Recommend that Council:-**
 - a) Approves capital investment of up to £2.5m for Superfast Broadband Infrastructure to lever in both European Regional Development funding and Growth Deal funding for investment into Coventry's broadband infrastructure.**
 - b) Approves the addition of £2.55m to the Corporate Capital Programme, profiled as appropriate in terms of financial year.**

53. Reshaping Drug and Alcohol Services in Coventry

The Cabinet considered a report of the Director of Public Health, which set out proposals to tender for a reshaped drug and alcohol service in Coventry.

A corresponding private report detailing confidential aspects of the proposals was also submitted to the meeting for consideration.

The Council was responsible for commissioning drug and alcohol recovery services for adults and young people, which formed part of a wider programme of activity to reduce drug and alcohol related harm. The current contract for adult drug and alcohol recovery services was due to end in November 2017 and provided an opportunity to review and reshape the services to ensure that they are fit for the future.

The Council had developed a future treatment model for November 2017 onwards, based on the needs of the Coventry population, evidence of what works and findings from engagement and consultation undertaken with service users, wider stakeholders and the general public.

The report indicated that since the existing adult treatment model was commissioned six years ago, national evidence and thinking had evolved. Clinical based treatment for opiate users was still an important element, however, the future service model had a renewed emphasis on a co-produced recovery system with the user at the centre, online support, peer to peer support, family support, additional support for those with multiple complex needs and for those who were misusing an emerging variety of substances. The future treatment model was based on three separate lots covering adult recovery services; family support and service user advocacy; and young people's substance misuse and early intervention service. Whilst contract start dates for the new services were still to be finalised, it was anticipated the proposed start date would be 1st November 2017.

RESOLVED that the Cabinet:-

- 1. Approves the proposed service model for drug and alcohol recovery services in Coventry and grant permission to tender for drug and alcohol services in line with the proposed model and timescales.**
- 2. Delegates authority to the Director of Public Health and Executive Director of Resources to award and implement the contracts for drug and alcohol recovery services in Coventry.**

54. Outstanding Issues

The Cabinet considered a report of the Executive Director of Resources that contained the list of outstanding issues and summarised the current position in respect of each item.

RESOLVED that the Cabinet approves the dates for future consideration of matters relating to the outstanding issues items listed in the report.

55. Coventry Half Marathon 2017

The Cabinet considered a report of the Executive Director of Place, which sought approval of contingency funding in support of an alternative model for of delivery for the Coventry Half Marathon 2017.

The Coventry Half Marathon was an established 13.1 mile annual road race that starts and finishes in the city centre. In 2016, the 'Decathlon Coventry Half Marathon' attracted 4,212 runners and the associated Schools Challenge event attracted 1,033 children as participants. In 2016, the event secured over £80,000 in charitable fundraising.

Since 2014, the Coventry Half Marathon had been delivered by Achieve Events (UK) trading as GO2. In recent weeks, GO2 had advised the Council that they were not looking to extend their contract for delivering the event. In order to secure the event for 2017 for the benefit of runners, local businesses and charities, it was proposed that a contingency budget of £50,000 be allocated from reserves that were currently un-earmarked, to support an alternative model of delivery for the 2017 event. The Cabinet noted that securing the Coventry Half Marathon for 2017 would also enable more detailed discussions with local partners to continue over delivery of the event in 2018 and beyond.

RESOLVED that the Cabinet approves:-

- 1. A £50,000 contingency budget to support delivery of the Coventry Half Marathon in 2017.**
- 2. The procurement of the necessary services for the delivery of the Coventry Half Marathon in 2017.**

56. **Any other items of public business which the Chair decides to take as a matter of urgency because of the special circumstances involved.**

There were no other items of public business.

57. **Reshaping Drug and Alcohol Services in Coventry**

Further to Minute 53 above, the Cabinet considered a private report of the Director of Public Health that set out confidential aspects of proposals to tender for a reshaped drug and alcohol service in Coventry.

RESOLVED that the Cabinet:-

- 1. Approves the proposed service model for drug and alcohol recovery services in Coventry and grant permission to tender for drug and alcohol recovery services in line with the proposed model and timescale.**
- 2. Delegate's authority to the Director of Public Health and Executive Director of Resources to award and implement the contracts for drug and alcohol recovery services in Coventry.**

58. **Any other items of private business which the Chair decides to take as a matter of urgency because of the special circumstances involved.**

There were no other items of private business.

(Meeting closed at 2.50 pm)