



Meeting: **Cabinet**

Date/Time: **Tuesday, 20 October 2020 at 2.00 pm**

Location: **Via Microsoft teams/Sparkenhoe Committee Room**

Contact: **Anna Poole (Tel. 0116 305 2583)**

Email: **anna.poole@leics.gov.uk**

Membership

Mr. N. J. Rushton CC (Chairman)

Mr. R. Blunt CC Mr. J. B. Rhodes CC
Mr. L. Breckon JP CC Mrs H. L. Richardson CC
Mr. B. L. Pain CC Mr. R. J. Shepherd CC
Mr. T. J. Pendleton CC Mrs D. Taylor CC

**Please note: this meeting will be filmed for live or subsequent broadcast via the Council's web site at <http://www.leicestershire.gov.uk>
– Notices will be on display at the meeting explaining the arrangements.**

AGENDA

<u>Item</u>	<u>Report by</u>
1. Minutes of the meeting held on 18 September 2020.	(Pages 3 - 12)
2. To advise of any other items which the Chairman has decided to take as urgent elsewhere on the agenda.	
3. Declarations of interest in respect of items on the agenda.	
4. Coronavirus (COVID-19) Impact and Response of the County Council - Recovery.	Chief Executive and Director of Public Health (Pages 13 - 14)



- | | | | |
|-----|--|---------------------------------------|-------------------|
| 5. | Adult Social Care Winter Plan and Measures to Support Care Home Provider Sustainability. | Director of Adults and Communities | (Pages 15 - 42) |
| 6. | Air Quality and Health Joint Action Plan 2020-2024. | Director of Public Health | (Pages 43 - 74) |
| 7. | Development of a Healthy Weight Strategy for Leicestershire. | Director of Public Health | (Pages 75 - 104) |
| 8. | Community Speed Enforcement Initiative. | Director of Environment and Transport | (Pages 105 - 120) |
| 9. | Government Proposals to Reform Local Government Exit Pay. | Director of Corporate Resources | (Pages 121 - 124) |
| 10. | Exception to the Contract Procedure Rules for Direct Award of a Construction Contract. | Director of Corporate Resources | (Pages 125 - 128) |
| 11. | Items referred from Overview and Scrutiny. | | |
| 12. | Any other items which the Chairman has decided to take as urgent. | | |



Minutes of a meeting of the Cabinet held at County Hall, Glenfield and via Microsoft Teams on Friday, 18 September 2020.

PRESENT

Mr. N. J. Rushton CC (in the Chair)

Mr. R. Blunt CC
Mr. L. Breckon JP CC
Mr. T. J. Pendleton CC
Mr. J. B. Rhodes CC

Mrs H. L. Richardson CC
Mr. R. J. Shepherd CC
Mrs D. Taylor CC

Apologies

Mr. B. L. Pain CC

In attendance

Mr. O. O'Shea JP CC, Mrs. C. M. Radford CC, Mrs B. Seaton CC, Dr. Terri Eynon CC

428. Minutes of the previous meeting.

The minutes of the meeting held on 23 June 2020 were taken as read, confirmed and signed.

429. Urgent Items.

There were no urgent items for consideration.

430. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting. He and Mr. Blunt CC, Mr. Breckon CC, Mrs. Richardson CC, Mrs. Taylor CC and Mr. Shepherd CC each declared a personal interest in agenda item 5 (White Paper on Devolution and Local Recovery) as members of district councils, and Mr. Blunt CC undertook to leave the meeting during consideration of this item as Leader of North West Leicestershire District Council.

431. Medium Term Financial Strategy Latest Position.

The Cabinet considered a report of the Director of Corporate Resources concerning the 2020/21 revenue budget and capital programme monitoring position as at the end of July 2020. A copy of the report, marked 'Agenda Item 4', is filed with these minutes.

Members noted the comments of the Scrutiny Commission, a copy of which is filed with these minutes.

Mr. Rhodes emphasised the considerable pressures faced by the Council as a result of the Covid-19 pandemic. Although measures had been put in place to secure the

Council's financial position through to the end of the year, he expected 2020/21 to be more challenging due to the predicted loss of income from Council Tax and Business Rates. Although the financial situation was challenging, he reassured members that the Council was in a better position than many other authorities.

The Leader commended Mr. Rhodes and the Director of Corporate Resources for managing the challenging financial situation and asked that details be sent to Leicestershire MPs of how the future savings would be made so that there was a full understanding of the Council's financial situation.

RESOLVED:

- a) That the comments of the Scrutiny Commission be noted;
- b) That the latest position of the 2020/21 revenue budget and capital programme as at the end of July 2020 and the effect of Covid-19 be noted;
- c) That the changes to the 2020-24 capital programme as set out in the report be approved;
- d) That the approach outlined in the report to updating the Medium-Term Financial Strategy be approved.

(KEY DECISION)

REASONS FOR DECISION:

To note the intended approach to the development of plans to address the latest financial position.

To agree the revised capital programme for 2020-24 which required amendment as a result of the Covid-19 pandemic.

(Mr. Blunt then left the meeting during consideration of the following agenda item – White Paper on Devolution and Local Recovery).

432. White Paper on Devolution and Local Recovery.

The Cabinet considered a report of the Chief Executive concerning the forthcoming White Paper on Devolution and Local Recovery and the Council's proposal to write to the Secretary of State for Housing, Communities and Local Government requesting an invitation for councils in Leicestershire to come forward with proposals for a unitary authority as a prerequisite to a devolution settlement for the East Midlands. A copy of the report, marked 'Agenda Item 5', is filed with these minutes.

Members noted comments from Mr. M. Mullaney CC and Dr. T. Eynon CC on behalf of the Labour Group, a copy of which is filed with these minutes.

Members were informed that the Government was seeking greater devolution linked to improved local and regional accountability and preferred to have elected mayors in place. Ministers had suggested that reorganisation to unitary authorities would be a condition of a regional devolution deal. The recommendations in the report would align the Council

with both Nottinghamshire and Derbyshire County Councils and would present the opportunity for further financial savings to be made.

Mr. Rushton said that, following the passing of a similar motion in the same week, both Nottinghamshire and Derbyshire County Councils had written to the Secretary of State.

RESOLVED:

- a) That the Leader write to the Secretary of State for Housing, Communities and Local Government requesting an invitation for councils in the administrative boundaries of Leicestershire County Council to come forward with their proposals for the establishment of unitary local government as a prerequisite to a devolution settlement for the East Midlands;
- b) That officers be requested to
 - (i) Develop and update the draft strategic business case for a unitary structure for local government in Leicestershire having regard to the criteria and requirements of the White Paper;
 - (ii) Take steps to engage an independent social research company to undertake a stakeholder engagement on the revised business case;
 - (iii) Following publication of the White Paper submit a further report to the Scrutiny Commission and Cabinet before the matter be debated by the full Council with a view to an ambitious proposal being put to Government which recognises a once in a generation opportunity to improve local government in Leicestershire in the context of a strong economy and powerful voice for the East Midlands.

(KEY DECISION)

REASONS FOR DECISION:

To enable work to commence immediately to update the draft business case in order that Leicestershire, together with Nottinghamshire and Derbyshire, which are also approaching the Secretary of State, can be in a position to be in the early tranche for local government reform.

(Mr. Blunt re-joined the meeting).

433. Adults and Communities Department Strategy 2020-24 - Delivering Wellbeing and Opportunity in Leicestershire.

The Cabinet considered a report of the Director of Adults and Communities concerning the outcome of the consultation on the new Adults and Communities Strategy. A copy of the report, marked 'Agenda Item 6', is filed with these minutes.

Members noted the comments of the Adults and Communities Overview and Scrutiny Committee, a copy of which is filed with these minutes.

The Director said that the Strategy had been revised in light of the Covid-19 pandemic to ensure that services continued to support people in the most effective way whilst keeping residents and staff safe.

Mr. Blunt said that the Strategy continued to promote independence for users and aimed to improve user satisfaction levels and continue efficient delivery of services in a cost-effective way.

Mrs. Richardson was pleased to see continuing support for community libraries which became community hubs and were vital for supporting people's mental health.

RESOLVED:

- a) That the comments of the Adults and Communities Overview and Scrutiny Committee be noted;
- b) That the outcome of the consultation on "Delivering Wellbeing and Opportunity in Leicestershire: Adults and Communities Department Ambitions and Strategy for 2020-2024" be noted;
- c) That the "Delivering Wellbeing and Opportunity in Leicestershire: Adults and Communities Department Ambitions and Strategy for 2020–2024" be approved.

(KEY DECISION)

REASONS FOR DECISION:

The consultation and engagement exercise undertaken overwhelmingly support the key themes of the Strategy, which will underpin the work of the Department over the next four years.

434. Status on Support for Community Managed Libraries.

The Cabinet considered a report of the Director of Adults and Communities regarding the provision of extra support for community managed libraries in light of the Covid-19 pandemic. A copy of the report, marked 'Agenda Item 7', is filed with these minutes.

Members noted the comments of the Adults and Communities Overview and Scrutiny Committee, a copy of which is filed with these minutes.

The Director informed members that Community Managed Libraries (CMLs) were an established and successful part of the library service. The Covid-19 lockdown had impacted on the ability of CMLs to raise additional funds to support their work and it was proposed to enhance the Council's support to them during this challenging time.

Mr. Blunt thanked the Trustees of Community Managed Libraries for their support in steering the libraries through the Covid-19 pandemic and commended officers for the support given to CMLs, a model which other Councils had followed.

Mr. Rhodes supported the increased investment, from existing budgets, to help ensure the continuing operation of CMLs.

RESOLVED:

- a) That the comments of the Adults and Communities Overview and Scrutiny Committee be noted;
- b) That the baseline support offer to Community Managed Libraries be enhanced to:
 - (i) increase the lease extension period from five to 10 years;
 - (ii) offer more officer visits to provide support and training and, via Voluntary Action Leicestershire, support for volunteer recruitment and retention, business planning, and income generation;
- c) That it be noted that the position of Community Managed Libraries will be kept under review during the recovery from Covid-19 and further reports will be made to members as necessary.

REASONS FOR DECISION:

The original funding support package for Community Managed Libraries was set up in 2014. This tapered funded support reduced by 20% each year from 100% running costs and will reach nil by 2021 for those CMLs that transferred early in the process.

The pandemic has resulted in all libraries being closed and consequently their ability to generate income has halted.

Lessons learned from the CML project have indicated that in order to indicate viability for external funds, a 10-year lease is preferable to the current arrangement which requires library groups to request a rollover five-year extension. Ten-year leases would also reduce CMLs trustees' legal costs and would be more efficient from the Council's perspective.

CMLs have identified the importance of regular visits from Council support officers, especially in supporting volunteers and trustees at points of crisis, and this is imperative following Covid-19. It is therefore important that the frequency of these visits be increased during this period of known vulnerability.

OTHER OPTIONS CONSIDERED:

Option 2 - Upscaled baseline plus offer for all libraries with internal repairing-only leases.

Option 3 - Upscaled baseline offer relating to County Council and VAL officer support plus the Council takes back control of all running costs of CML building.

435. Special Educational Needs and Disabilities (SEND) and Inclusion Strategy 2020 to 2023.

The Cabinet considered a report of the Director of Children and Family Services which presented the outcome of engagement on the Special Educational Needs and Disability and Inclusion Strategy for 2020-2023. A copy of the report, marked 'Agenda Item 8', is filed with these minutes.

Mrs. Taylor explained that the Strategy would be monitored through the SEND and Inclusion Board with strong governance in place to oversee delivery of the action plan to

ensure the best outcomes for children with SEND. She thanked local area partners, the Parent and Carer Forum, parents, carers and children for their support in developing the Strategy.

Mr. Rhodes said that he was pleased that the Strategy had been developed to improve standards and reduce dependence on the independent sector.

RESOLVED:

- a) That the responses to the consultation including the comments of the Children and Families Overview and Scrutiny Committee be noted;
- b) That the Leicestershire local area Special Educational Needs and Disability and Inclusion Strategy 2020-2023 be approved.

(KEY DECISION)

REASONS FOR DECISION:

To provide the basis for planning, commissioning and delivering SEND Services and support by the Council and its partners for children and young people living in Leicestershire over the next three years.

436. Leicestershire and Rutland Safeguarding Children Board Partnership Annual Report 2019/20 and Business Plan for 2020/21.

The Cabinet considered a report of the Director of Children and Family Services concerning the Annual Report 2019-20 for the Leicestershire and Rutland Safeguarding Children Partnership and the Business Plan 2020-21 from that Partnership and the Leicester Safeguarding Children Partnership Board. A copy of the report, marked 'Agenda Item 9', is filed with these minutes.

Mrs. Taylor said that the new arrangements were now bedded in and a new Independent Adviser was working with the Leicestershire and Rutland Safeguarding Children's Partnership and the Leicester Safeguarding Children Partnership Board. She welcomed more aligned working across Leicester, Leicestershire and Rutland to address children's safeguarding.

Members asked that their thanks be conveyed to Mr. Simon Westwood for his work as Independent Chair and Adviser since 2017.

RESOLVED:

That the Leicestershire and Rutland Safeguarding Children Partnership (LRSCP) Annual Report for 2019/20 and the joint Business Plan of the LRSCP and the Leicester Safeguarding Children Partnership Board for 2020/21 be noted and welcomed.

REASONS FOR DECISION:

Leicestershire County Council is one of the Statutory Partners who have a shared and equal statutory duty with the local Clinical Commissioning Groups and Chief of Leicestershire Police to agree and make arrangements to work together to safeguard and promote the welfare of all children in Leicestershire.

The multi-agency safeguarding arrangements locally are managed through a new partnership – the LRSCP – that covers Leicestershire and Rutland. The arrangements commenced on 29 September 2019, replacing the former Local Safeguarding Children Board.

The Business Plan for 2020/21 has been jointly developed by the LRSCP and Leicester Safeguarding Children Partnership Board in order to support greater alignment in safeguarding development work across the two areas.

In Leicestershire the Annual Report has traditionally been presented to the Cabinet and the Children and Families Overview and Scrutiny Committee.

Presenting the Annual Report and Business Plan enables the Cabinet to comment on the content of both documents and consider whether these identify matters that it wishes to address in relation to the effectiveness of safeguarding within the work of the Authority.

437. Leicestershire and Rutland Safeguarding Adults Board Annual Report 2019/20, Strategic Plan 2020 to 2025, and Business Plan 2020/21.

The Cabinet considered a report of the Independent Chair of the Leicestershire and Rutland Safeguarding Adults Board which presented the Board's draft Annual Report 2019-20, Strategic Plan 2020-2025 and Business Plan for 2020-21. A copy of the report, marked 'Agenda Item 10', is filed with these minutes.

Members noted the comments of the Adults and Communities Overview and Scrutiny Committee, a copy of which is filed with these minutes.

RESOLVED:

- a) That the comments of the Adults and Communities Overview and Scrutiny Committee be noted;
- b) That the Leicestershire and Rutland Safeguarding Adults Board Annual Report for 2019/20, Strategic Plan for 2020-2025, and Business Plan for 2020/21, be noted and welcomed.

REASONS FOR DECISION:

The Leicestershire and Rutland Safeguarding Adults Board (LRSAB) is a statutory body and local authorities have a duty to ensure that the Board is enabled to operate effectively.

It is a requirement of the Care Act 2014 that the LRSAB Annual Report be reported to the Leader of the Council together with the Chief Executive of the local authority, the Chairman of the Health and Wellbeing Board, the Police and Crime Commissioner, and local Healthwatch.

In Leicestershire, the Annual Report and Business Plans have traditionally also been presented to the Cabinet and the Adults and Communities Overview and Scrutiny Committee.

Presenting the Annual Report enables the Cabinet to comment on the content of the Annual Report and consider whether the report identifies matters that it wishes to address in relation to the effectiveness of safeguarding within the work of the Authority.

Presenting the Strategic Plan and Business Plan enables the Cabinet to have oversight of the work of the Safeguarding Adults Board and the requirement on the Local Authority for contribution to these partnership plans.

438. Corporate Asset Investment Fund Annual Performance Report 2019-2020.

The Cabinet considered a report of the Director of Corporate Resources concerning performance of the Corporate Asset Investment Fund for the 2019-20 financial year. A copy of the report, marked 'Agenda Item 11', is filed with these minutes.

Mr. Rhodes informed members that investments would be closely monitored and were expected to make a significant contribution to the Medium-Term Financial Strategy each year.

RESOLVED:

- a) That the comments of the Scrutiny Commission as set out in the report be noted;
- b) That the performance of the Corporate Asset Investment Fund for the period April 2019 to March 2020 be welcomed.

REASONS FOR DECISION:

In accordance with the Cabinet's decision in September 2017, this report fulfils the requirement to report annually on the performance of the CAIF to both the Cabinet and the Scrutiny Commission, to demonstrate that the Fund is being managed professionally and prudently.

439. Planning for the Future White Paper (August 2020).

The Cabinet considered a report of the Chief Executive which proposed the Council's response to the Government's White Paper "Planning for the Future". A copy of the report, marked 'Agenda Item 12', is filed with these minutes.

Members noted the comments of the Scrutiny Commission, a copy of which is filed with these minutes.

RESOLVED:

- a) That the comments of the Scrutiny Commission be noted;
- b) That the proposals set out in the Planning for the Future White Paper (August 2020), be noted;
- c) That the County Council's response to the consultation on the proposals set out in the White Paper as appended to the report, be approved, subject to (d) below;

- d) That the Chief Executive be authorised, following consultation with the Leader and Cabinet Lead Member, to agree a final response to the consultation having regard to the comments made by the Scrutiny Commission.

REASONS FOR DECISION:

The White Paper proposes substantial reform to the English town and country planning system. In order to protect the County Council's services and its strategic objectives, it is essential that the White Paper is thoroughly reviewed and a response to government is provided.

The draft response sets out how the proposed revisions to the planning system will impact upon County Council services. It explains where the changes appear acceptable and where amendments are required.

The views of the Cabinet are sought to confirm the County Council's response and inform a discussion by a working group comprising representatives from local planning authorities (city, county, district) plus the Leicester and Leicestershire Enterprise Partnership later in the month.

440. Items referred from Overview and Scrutiny.

There were no items referred from Overview and Scrutiny.

11.00 am - 12.12 pm
18 September 2020

CHAIRMAN

This page is intentionally left blank



CABINET – 20 OCTOBER 2020

**CORONAVIRUS (COVID-19) IMPACT AND RESPONSE OF THE
COUNTY COUNCIL – RECOVERY**

**JOINT REPORT OF THE CHIEF EXECUTIVE AND DIRECTOR
OF PUBLIC HEALTH**

Purpose of the Report

1. The purpose of this report is to advise the Cabinet of the plans to further support the recovery of functions and services in the context of the Covid-19 pandemic and work in hand within the County Council and with partners to continue to respond and to set out plans for the Winter. A supplementary report will be circulated to members nearer the time.

Recommendations

2. The Cabinet is asked to have regard to the information in this and the subsequent supplementary report.

Reason for Recommendations

3. To advise on the plans in place to support the continued recovery of the Council's functions and services and to respond to the expected winter pressures.

Background

4. Coronaviruses are a family of viruses common across the world in animals and humans. COVID-19 is the illness seen in people infected with a new strain of coronavirus not previously seen in humans and began in Wuhan Province in China in December 2019. This has since spread to most parts of the world.
5. The Cabinet has considered reports regarding the impact of the coronavirus pandemic at its meetings in March, April, May and June. These have covered issues such as the impact of the virus across Leicestershire, the Council's plans to respond, the joint working with partners, and the financial implications for the Authority. The County Council on 30 September noted a report which set out the impact of Covid-19 on the Council's finances.

6. A supplementary paper to this report is being produced by officers. This will focus on the latest position, the continued response and recovery work that is taking place across the Authority.
7. Members have continued to receive regular updates including on the latest public health information and guidance, issues pertaining to service areas, and resilience and co-ordinating activity being undertaken by the Local Resilience Forum and the Council.

Circulation under the Local Alerts Procedure

8. This and the supplementary report will be circulated to all members of the County Council.

Officers to Contact

Tom Purnell, Assistant Chief Executive

Tom.Purnell@leics.gov.uk

0116 305 7019

Mike Sandys, Director of Public Health

Mike.Sandys@leics.gov.uk

0116 305 4239

Lauren Haslam, Director of Law and Governance

Lauren.Haslam@leics.gov.uk

0116 305 6240

Chris Lewis – Head of Transformation
Corporate Resources Dept.

Chris.Lewis@leics.gov.uk

Tel 0116 305 7104



CABINET – 20 OCTOBER 2020

**ADULT SOCIAL CARE WINTER PLAN AND MEASURES TO
SUPPORT CARE HOME PROVIDER SUSTAINABILITY**

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

PART A

Purpose of the Report

1. The purpose of this report is to inform the Cabinet of the requirement to produce a Winter Plan for Adult Social Care (the Winter Plan) by 31 October 2020 which sets out how the County Council will support the adult social care providers in Leicestershire in the context of the ongoing pandemic. The production of a Winter Plan is essential in order for the County Council to benefit from the Government's extended Infection Control Funding from December 2020.
2. This report also provides information on the support given by the County Council to providers of care during the Covid-19 pandemic and identifies the ways in which the Council is managing the risk to the future sustainability of the care market.

Recommendations

3. It is recommended that:
 - a) The requirement for Leicestershire County Council to produce and approve a Winter Plan by 31 October 2020 be noted;
 - b) The Chief Executive and Director of Adults and Communities, following consultation with the Cabinet Lead Member, be authorised to approve the Winter Plan by 31 October 2020;
 - c) The support given by the Council to providers of care during the Covid-19 pandemic and the plans in place to manage the risk to the sustainability of the care market over the winter be noted.

Reasons for Recommendations

4. The County Council is required to write to the Department of Health and Social Care by 31 October 2020 confirming it has put in place a Winter Plan and that the Council is working with care providers in their area on their business

continuity plans, highlighting any key issues if needed, in order to receive the second instalment of the Infection Control Fund. The local plan should consider the recommendations of the national Winter Plan and involve NHS and voluntary and community sector organisations where possible.

5. Publication and approval of the Winter Plan by 31 October 2020 ensures the Council will be able to access the extended Infection Control Funding from December 2020.
6. The Winter Plan requires the Council to work with local partners to engage with the Service Continuity and Care Market Review and complete a self-assessment of the health of local market management and contingency planning leading into winter.
7. All providers of adult social care and support have faced significant challenges during the Covid-19 emergency and the sector has shown resilience and dedication in keeping Leicestershire people safe at a time of great change and uncertainty.

Timetable for Decisions (including Scrutiny)

8. The Council must put the Winter Plan for Leicestershire in place and confirm with the Department of Health and Social Care that this has been completed by 31 October 2020.
9. The Adults and Communities Overview and Scrutiny Committee will be given the opportunity to comment on the Winter Plan, during 14-26 October 2020, prior to its approval.

Policy Framework and Previous Decisions

10. The activities described within this report are underpinned by the Council's Strategic Plan 2018-22 and the Adults and Communities Department Strategy 2020-24, the latter of which was approved by the Cabinet on 18 September 2020. The Department's Strategy seeks to ensure that services are delivered that meet the eligible needs of the citizens of Leicestershire to maximise their opportunities and wellbeing.
11. The Winter Plan is being produced as part of the Government's wider agenda to support adult social care during the Covid-19 pandemic. The Winter Plan builds on the Adult Social Care, Care Home Support Plans which were submitted to the Department of Health and Social Care (DHSC) on 29 May 2020.
12. The actions in the Winter Plan are also reflected in the Council's emerging corporate and departmental recovery plans.

Resource Implications

13. The Council's Medium Term Financial Strategy (MTFS) ensures that the support provided to adult social care providers is affordable and minimises any additional financial risk to the Council.
14. The extension to the ICF until 31 March 2021 will provide additional funding to meet the additional costs being incurred by providers. The Council has been allocated £6.1m to be allocated to adult social care providers in the County, provided that certain conditions (specified in the Government Policy Paper) are met, including the production of the Winter Plan.
15. There has been a significant financial impact due to Covid-19 on adult social care which includes making additional payments in the region of £27m to care providers to cover additional costs (£9m), assistance with cashflow (£11m) which will need to be repaid by providers and passporting the first ICF grant (£6.7m). These are detailed further in the report.
16. Other additional Covid-19 expenditure (£3m) includes supporting shielding, PPE purchases for council services, supporting the management of Covid-19 and providing food packages for service users being discharged from hospital.
17. Some of these costs are offset by additional income of approximately £15m from the NHS to support service users being discharged from hospital.
18. The level of demand from the service users for commissioned services is constantly changing with lower numbers for some services and increased costs. As the approach to Covid-19 management changes nationally, the NHS changed the current basis of arrangements for those being discharged from hospital from 1 September 2020 with only the first six weeks of reablement care being funded. The impact of all of these changes is being quantified.
19. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the content of this report.

Circulation under the Local Issues Alert Procedure

20. None.

Officers to Contact

Jon Wilson – Director of Adults and Communities
 Adults and Communities Department
 Telephone: 0116 305 7454 Email: Jon.Wilson@leics.gov.uk

Sandy McMillan – Assistant Director (Strategic Services)
 Adults and Communities Department
 Telephone: 0116 305 7320 Email: Sandy.McMillan@leics.gov.uk

PART B

Background

The National Context – The Winter Plan

21. The Government published its Adult Social Care Covid-19 Winter Plan 2020-2021 policy paper on 18 September 2020. The Plan sets out the key elements of national support available for the social care sector during winter 2020 to 2021, as well as the main actions to be taken by local authorities, NHS organisations, and social care providers, including those in the voluntary and community sector.
22. The Plan sets out provision for free PPE for social care providers through a government portal with exceptions funded via the local authority and a government £546m Infection Control Fund.
23. In the Plan, the Government has given the commitment to adult social care providers that it will:
 - i. continue to engage, across the sector, including with local authorities, care providers, people with care and support needs and carers;
 - ii. continue to provide financial support to the sector;
 - iii. appoint a chief nurse for social care to the Department of Health and Social Care;
 - iv. develop a designation scheme with the Care Quality Commission for premises that are safe for people leaving hospital who have tested positive for Covid-19 or are awaiting a test result;
 - v. continue to develop and publish relevant guidance;
 - vi. ensure sufficient appropriate Covid-19 testing capacity;
 - vii. improve the flow of testing data to everyone who needs it;
 - viii. provide free PPE for Covid-19 needs in line with current guidance to care homes and domiciliary care providers, via the PPE portal, until the end of March 2021;
 - ix. provide free PPE to local resilience forums (LRFs) who wish to continue PPE distribution, and to local authorities in other areas, to distribute to social care providers ineligible for supply via the PPE portal, until the end of March 2021;
 - x. make available for free and promote the flu vaccine to all health and care staff, personal assistants and unpaid carers;
 - xi. publish the new online Adult Social Care Dashboard.
24. The Winter Plan identifies 75 actions to be undertaken by local authorities under four key themes:
 - Theme 1 - Preventing and controlling the spread of infection in care settings;
 - Theme 2 - Collaboration across health and care services;
 - Theme 3 - Supporting people who receive social care, the workforce, and carers;

- Theme 4 - Supporting the system.
25. The Leicestershire Winter Plan which will cover the period October 2020 to March 2021 is currently in preparation for completion by 31 October. Work is currently underway to address the requirements and plan future activity for each of the required actions that the Government has detailed in the Winter Plan. Appendix A sets out examples of some of the required actions under each theme and the actions taken by the County Council in meeting them.

Leicestershire's Winter Plan

26. When the Government's Winter Plan was launched on 18 September 2020, all local authorities were required to confirm by letter to the Minister for Care that they have a Winter Plan in place by the 31 October 2020. This Winter Plan needs to set out how the County Council will deliver all of the 75 Actions for local authorities outlined in the Government's Winter Plan. No specific timeline for the Plan's coverage period or guidance on the format and publication of Winter Plans have been given to local authorities. It is assumed that the Winter Plan will cover 1 November 2020-31 March 2021.
27. The Winter Plan is currently being collated by staff across the Adults and Communities Department and Public Health to fulfil the requirements for all of the 75 actions. The Government's Winter Plan will be used as a template for the format of the Leicestershire Winter Plan, setting out current and planned activity against of the 75 actions that are required to be delivered. Timelines for the completion of the Plan are:
- Invitation to Health Partners, sector representative bodies, Healthwatch and Adult and Communities Overview and Scrutiny Committee to comment on draft plan 14–26 October 2020;
 - Final document produced for approval by the Chief Executive and the Director of Adults and Communities, following consultation with the Cabinet Lead Member, by 28 October 2020.
 - Letter submitted to Department of Health and Social Care from the Chief Executive and Director of Adults and Communities confirming the Plan is in place by 30 October 2020.

Financial Support for Providers

28. During the Covid-19 crisis response over the spring and summer of 2020, the Government provided some additional financial support to the adult social care sector through the Infection Control Fund (ICF).
29. The ICF aimed to fund measures that improved infection prevention and control. The Government funding was principally for care homes, with at least 75% of the allocation mandated to be spent in this way, and local authorities given discretion in allocating the remaining 25%. The County Council had to submit its own Infection Prevention and Control Plan to Government for approval to receive the funds and was then required to monitor delivery of the

Plan by the County's care homes and other social care providers and report back to the Department of Health and Social Care.

30. In order to be able to access the funding, care homes and other social care providers had to report regularly on infections, occupancy and PPE supplies via national trackers and have also had to produce expenditure returns to the County Council. The Council received £6.7m in total in two tranches, of which 75%, £5m, went to residential care homes as per the Government's instructions. The balance was mainly allocated to home care, extra care and supported living, providers, and a small contingency was held to support additional or exceptional expenditure. The funding was primarily aimed at measures to reduce infection with spending as follows:
 - 36% on measures to isolate residents within their own care homes;
 - 23% on actions to restrict staff movement within care homes;
 - 7% paying staff full wages while isolating following a positive test;
 - 34% on additional staffing, onsite accommodation and travel for residential providers; and on measures to isolate service users, actions to restrict staff movement, travel, training and cleaning for all other providers.
31. The majority of the ICF funding allocated to care homes could not be used for purchasing PPE, but there was flexibility with the 25% discretionary element. The original ICF programme ended in September and funds had to be used and spend reported to the County Council. The information was collated and reported to Government by 30 September 2020.
32. In addition to the distribution of the £6.7 million ICF, the County Council has made available to providers substantial additional funding totalling £3.5 million to support them through the increased cost pressures caused by the pandemic. Payments were made monthly.
33. To understand the financial challenges faced by providers the Council commissioned work to review the impact of the pandemic on residential providers' costs to inform the level of its additional payments. PPE was found to be the largest additional expense faced by registered providers.
34. At the start of the crisis in April, in addition to the additional funding provided by the Government, the County Council made funding available to all care providers through a repayable forward payment to help them with, or prevent, cashflow issues. To minimise the impact of paying back the advance payment the provider has the option of paying it back over three monthly instalments.
35. Unfortunately, the Council's financial position, already extremely serious and challenging, has worsened as a result of the pandemic. The latest estimate of net additional costs due to Covid-19 for the current financial year (2020/21), as presented to the Cabinet on 18 September 2020, is £18m after Government grant support. The Authority has therefore requested repayment of the loans made to providers in April 2020.

36. It is anticipated that the new national free PPE scheme and the new round of ICF payments will reduce the need for additional funding by the Council for providers going forward. Further analysis will be undertaken to determine whether additional monthly payments to providers are required from October onwards, balancing this carefully against the financial pressures likely to be faced by the County Council for some years to come.

Existing Support for Care Home Providers

37. The Authority has already taken action to mitigate problems with provision of PPE. Providers have received other support from the Government and Council to help with PPE, both paying for increased costs and accessing supplies, including LRF emergency supply stocks that could be accessed in the event that care homes were about to run out. Providers were also provided with extensive guidance which is made available through the regular bulletins and conference calls.
38. Substantial work has also taken place locally to support care homes with infection prevention and control and testing. The County Council's Public Health Department has led on the development of a helpline and support service to provide Covid-19 specific infection prevention and control advice to care homes across Leicester City, Leicestershire and Rutland (LLR). The scope of the service is to:
- i. Provide a programme of rapid testing for frontline social care workers, which will help reduce the need for social isolation of staff who test negative;
 - ii. Infection prevention and control advice relating to the safe management of Covid-19 in LLR care homes;
 - iii. Respond to calls and emails from care homes who have a concern or query relating to infection prevention and control and Covid-19;
 - iv. Undertake regular monitoring calls to care homes with an active outbreak following notification from Public Health England;
 - v. Support the consistent dissemination of up to date local and national guidance across the three local authorities within LLR;
 - vi. Contact and support care homes that have not had an outbreak of Covid-19 by:
 - Providing care home staff with the latest guidance relating to Covid-19 and best practice relating to infection prevention and control and outbreak management;
 - Providing care homes with signposting information to relevant partner organisations and national guidance should they suspect an outbreak of Covid-19 in the future.
39. All care home staff and associated professionals can access infection prevention and control advice and support relating to Covid-19 in care homes. The service has received positive feedback on the level of support provided.
40. During the height of the emergency, the Authority established a bespoke adult social care recruitment team through its Inspired to Care initiative to assist

external providers in ensuring that they had sufficient workforce to meet the demand generated by the crisis. The team attracted, recruited and trained staff on behalf of the external market giving them staff who were ready to start work. The Inspired to Care team continue to support providers with recruitment and are running awareness campaigns to encourage entrants to the sector. The service provided has been received very favourably by the market.

41. The team's key achievements during its period of operation include:
- i. 57 candidates who were taken through the Inspired to Care project, have started new roles;
 - ii. More candidates continue to be recruited through Inspired to Care CV's sent to the external market on a daily basis;
 - iii. Over 3,000 applications, CVs or candidate enquiries have been received to date;
 - iv. Reduced time to hire, averaging at below 20 days;
 - v. Media coverage on BBC East Midlands Today, Leicester Mercury, local newspapers, BBC Radio Leicester and Fosse 107;
 - vi. Facebook content has included a clap for #socialcareleics video and 'Keep Leicestershire safe and well at home' recruitment campaign which has reached 10,000 people so far, and a range of 'good news' stories, including video interviews with care professionals and people using services.

Risk Assessment for Winter 2020/2021

42. As part of the Winter Plan requirements, the Department of Health and Social Care requires councils to review their preparedness for service continuity through the winter of 2020/21, including councils' assessment of risks, their contingency plans, and their support needs.
43. Each local authority must complete an extensive self-assessment questionnaire which covers:
- risks to adult social care continuity of care arrangements in all settings and for all providers up to the end of March 2020 and arrangements to mitigate these risks;
 - local needs for targeted and intensive support through national or regional arrangements;
 - examples of innovation and good practice which can be shared.
44. The draft of the key themes from the self-assessment questionnaire for the County Council is attached as Appendix B to this report. Comments and text boxes and their contents have been omitted from the standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to Department of Health and Social Care.
45. The Council has worked very closely with providers to minimise the risk to the Leicestershire social care market. There are, however, some areas of concern

such as the availability of nursing staff in nursing homes, the impact of Covid-19 on people and services, staffing levels and the financial viability of some residential care providers due to decreased occupancy levels.

Challenges faced by care homes during Covid-19

46. All providers of adult social care and support have faced significant challenges and the sector has shown resilience and dedication in keeping Leicestershire people safe at a time of great change and uncertainty.
47. The Authority's commissioning responsibilities includes market oversight, which involves understanding financial pressures and other issues arising from the circumstances which may impact on providers. At the present time the greatest concerns nationally, regionally and locally relate to the sustainability of the care home sector and individual businesses operating within it.
48. The Council currently has 171 commissioned care homes, comprising:
 - 86 older adults' residential care homes;
 - 27 older adults' residential nursing care homes;
 - 57 working age adults care homes;
 - 1 residential care home which caters for both working age and older adults.
49. The Council has engaged extensively with the care home sector during the pandemic through regular conference calls with providers and individual care homes, establishing a Provider Communication Line providing one route for departmental support, setting up a triage service for urgent PPE supplies and providing targeted virtual and in-situ support for providers in difficulty.
50. Challenges and pressures faced by care homes during Covid-19 have included a reduction in overall occupancy but an increase in temporary admissions, and increased pressure to accommodate discharges from hospital as quickly as possible. Care homes have struggled to access testing and obtain speedy results and have seen increased cost pressures for this as well as for PPE, staffing (recruitment/retention and absences) and insurance.
51. The County Council has developed and is constantly refining surveillance methods to understand the risk status of providers to better target quality improvement and other types of support at certain providers, identify any impact on key supply (such as capacity in geographical areas or service type) if one or more providers were to face instability, and undertake its market oversight duties.

Identifying and Responding to Provider Instability

52. The intelligence above allows the Council to work proactively with care home providers to identify and manage risk, and help prevent market instability or provider failure. The Adults and Communities Department's Quality and Contracts service works with care businesses on quality and to drive improvement.

53. However, given the level of challenges faced by care home providers nationally, it is likely that some will face instability or potentially some service failure over the coming months and years. The Authority will work with those businesses to ensure that residents are kept safe, and that where services are unviable their exit from the market is supported in a timely and managed way based on Association of Directors of Adult Social Services guidance.
54. The options for responding to provider failure in such circumstances are set out in Appendix C. The range of options available, cover direct intervention by the Council, or commissioning additional emergency support, or working with existing providers.
55. Different options may be appropriate for different circumstances, and therefore a tailored and proportionate approach will be needed which calls upon one or more of the options, for example, a large-scale provider failure which threatens to destabilise the entire market, or the failure of a significantly specialised segment of the market may necessitate either high or medium intervention level, whereas a small, non-specialist care home closure may best fit the current, low-intervention offer.

Engagement on the Draft Winter Plan

56. The issues covered above and plans for the winter period been discussed at length with care home providers. Providers have stated that challenges have been the increasing costs of PPE and ensuring that staff are adequately paid whilst self-isolating. They have welcomed the measures already put in place by the County Council to support providers and the uptake of the ICF has been strong. The draft Winter Plan will build on this feedback.
57. The draft of the Winter Plan will be shared for comment with providers, Healthwatch and with the Chief Officers of the Clinical Commissioning Groups and University Hospital of Leicester Trust during 14-26 October 2020.
58. The Adults and Communities Overview and Scrutiny Committee will be given the opportunity to comment on the Winter Plan, again during 14-26 October 2020.

Equality and Human Rights Implications

59. The Government has completed an Equalities and Human Rights Impact Assessment (EHRIA) for the national Winter Plan and locally an EHRIA will be completed on Leicestershire's Winter Plan as it is developed. Previously, an EHRIA has been completed on the impact of Covid-19 on Council services and one is currently being completed for the impact of Covid-19 on the Adults and Communities Department .

Environmental Implications

60. There are no environmental implications arising directly from the recommendations in this report. It is recognised that PPE disposal does have an environmental impact and recycling/environmentally friendly PPE are a medium-term aspiration, however of primary concern at present is that PPE is used appropriately to keep carers and individuals safe.

Partnership Working and Associated Issues

61. The Department is working closely with Leicester City and Rutland Councils, alongside partners in the NHS, to ensure that the three Winter Plans are complementary and provide a consistent offer for Adult Social Care Providers across LLR, as far as possible.

Background Papers

Adult social care: coronavirus (COVID-19) winter plan 2020 to 2021

<https://www.gov.uk/government/publications/adult-social-care-coronavirus-covid-19-winter-plan-2020-to-2021>

Social Care Sector COVID-19 Support Taskforce: report on first phase of COVID-19 pandemic

<https://www.gov.uk/government/publications/social-care-sector-covid-19-support-taskforce-report-on-first-phase-of-covid-19-pandemic>

Adult social care winter plan: letter from Minister for Care to local authorities

<https://www.gov.uk/government/publications/adult-social-care-winter-plan-letter-from-minister-for-care-to-local-authorities>

Appendices

Appendix A – Four themes identified in the Winter Plan

Appendix B - Completed Self-Assessment Questionnaire for the Department of Health and Social Care

Appendix C – Options for responding to provider failure

This page is intentionally left blank

Four themes identified in the Winter Plan

Theme 1: Preventing and controlling the spread of infection in care settings	
Required Action	Action taken in Leicestershire
Continue to implement relevant guidance and circulate and promote guidance to adult social care providers in their area, including for visitors.	<ul style="list-style-type: none"> • Regular bulletins are produced for providers; - 48 editions since March. • The County Council's website has a dedicated provider section where all of the latest guidance and information is held in an easy to search format.
To communicate to social care providers regarding the importance of implementing workforce measures to limit COVID-19 infection.	<ul style="list-style-type: none"> • Fortnightly conference calls are held where providers can raise any issues of concern.
To distribute money from the Infection Control Fund, and submit returns on how the funding has been used in line with the grant conditions.	<ul style="list-style-type: none"> • The Council has distributed over £6m ICF since May and has a process for distribution of the further £5.3m by March 2021.
Work with relevant partners including Public Health England and local health protection boards to control local outbreaks.	<ul style="list-style-type: none"> • The Public Health team are supporting providers with the testing process, providing a helpline and FAQs. A short phone survey has been produced for providers to feedback to the Council any positive tests.
To ensure positive cases are identified promptly, make sure care providers, as far as possible, carry out testing as per the testing strategy.	<ul style="list-style-type: none"> • The Public Health team have implemented a rapid testing service to ensure social care staff are tested quickly and guidance produced to help in the correct administering of tests to reduce null returns
Provide PPE for Covid-19 needs when required, either through the LRF, or directly to providers.	<ul style="list-style-type: none"> • PPE will be distributed through the LRF to non-regulated providers.
To support communications campaigns encouraging eligible staff and people who receive care to receive a free flu vaccine.	<ul style="list-style-type: none"> • A programme of communications to providers has commenced through Public Health to promote the flu vaccine

Theme 2: Collaboration across health and care services	
Required Action	Action taken in Leicestershire
The local authority should be the lead commissioner of care packages for those discharged from hospital.	<ul style="list-style-type: none"> Local arrangements are in place to facilitate discharges.
Ensure that they have safe accommodation for people who have been discharged from hospital with a positive or inconclusive Covid-19 test result	<ul style="list-style-type: none"> Work is underway with providers and partners to identify appropriate cohorting and isolation facilities.
Establish efficient processes to manage Continuing Healthcare (CHC) assessments and to rapidly complete deferred assessments.	<ul style="list-style-type: none"> Plans with local Clinical Commissioning Groups to complete all CHC and deferred assessments by March 2021 are in place.

Theme 3: Supporting people who receive social care, the workforce, and carers	
Required Action	Action taken in Leicestershire
To give a regular assessment of whether visiting care homes is likely to be appropriate, within their local authority, or within local wards, taking into account the wider risk environment. if necessary, impose visiting restrictions if local incidence rates are rising.	<ul style="list-style-type: none"> Guidance and support has been provided to providers in managing visits safely, particularly where local transmission rates are occurring.
Ensure that people receiving direct payments, their families and carers are able to meet their care and support needs this winter.	<ul style="list-style-type: none"> There is a dedicated Direct Payment advice line in place and those receiving a Direct Payment on topics such as employment issues during Covid-19, PPE and accessing training for Personal Assistants have been written to.

Theme 3: Supporting people who receive social care, the workforce, and carers contd	
Required Action	Action taken in Leicestershire
Make sure carers, and those who organise their own care, know what support is available to them and who to contact if they need help work with services that may have closed, over the pandemic, to consider how they can reopen safely	<ul style="list-style-type: none"> Information is available on the County Council's website and through a team of dedicated care support officers.
Where people who use social care services can no longer access the day care or respite services that they used before the pandemic, work with them to identify alternative arrangements that meet their identified needs	<ul style="list-style-type: none"> Support is being provided to providers to ensure services can operate in a Covid secure way. Over 1200 individual reviews are being undertaken to identify the best way to meet the individual outcomes of people who utilise day and respite care services.
To ensure that their social work teams are applying legislative and strengths-based frameworks (including those based on duties under the Care Act and Mental Capacity Act).	<ul style="list-style-type: none"> Social Work Teams have been supported to continue to use strength-based approaches with service users and regular staff bulletins keep teams informed of best practice

Theme 4: Supporting the system	
Required Action	Action taken in Leicestershire
To continue to champion the Capacity Tracker and the Care Quality Commission community care survey and promote their importance as a source of data to local providers and commissioners;	<ul style="list-style-type: none"> Work has taken place with providers to help them complete the capacity tracker. If an issue of concern is flagged in the tracker providers receive a follow up phone call to discuss the issue in more detail
To work with local partners to engage with the Service Continuity and Care Market Review, and complete a self-assessment of the health of local	<ul style="list-style-type: none"> An assessment has been made of the local care market.

market management and contingency planning leading into winter.	
Theme 4: Supporting the system cont'd	
Required Action	Action taken in Leicestershire
To continue to maintain the information they have published on their websites about the financial support they have offered to their local adult social care market	The Provider support area of the authority's website is easy to navigate, accessible and provides the most up-to-date guidance available. The materials on the site are regularly reviewed and updated.

Service Continuity and Care Market Review: Self-Assessment by Councils

Service Continuity and Care Market Review: Self-Assessment by Councils

The Government's Adult social care: [coronavirus \(COVID-19\) winter plan 2020 to 2021](#), says that the Department of Health & Social Care (DHSC), in partnership with the Association of Directors of Adult Social Services (ADASS) and the Local Government Association (LGA), will carry out a **Service Continuity and Care Market Review** this Autumn.

This self-assessment questionnaire (SAQ) is the essential building block of this review. It will provide an invaluable understanding on a council by council basis of your analysis of the risks to the continuity of services in the provider sector across each care setting. It will explore the plans that you have to mitigate these risks particularly with regard to the impact of COVID-19 and EU transition alongside your winter planning arrangements.

An important feature of this questionnaire is that it gives you a full opportunity to share examples of good practice and what works well both at individual council and regional level. I am aware of the very significant work and developments both in councils and in regions to support and develop your commissioning activities particularly as these impact on market sustainability and capacity. Many of these plans are well advanced.

You are asked in this questionnaire to specifically set out, based on your own analysis, where additional support could be targeted. We are already working with the LGA, ADASS and with the Care and Health Improvement Programme (CHIP) to consider targeted intensive support as part of the response to these challenges.

The date to complete the guided self-assessment questionnaire is midnight Wednesday 21st October. We are encouraging councils to share their self-assessments with other councils in your region. As part of the partnership approach that we are taking, ADASS regions and CHIP will also provide support you during the process, as well as adding a regional picture and overview as part of the feedback to DHSC.

The questionnaire and process are designed to enable you to enter information and then update or develop your responses up until your final submission is made. Once the final submissions have been made both the SAQ and regional overview will be available in full for DHSC to draw the information together alongside other sector and market information and to produce a final report in mid-November. This report will be shared with the LGA, ADASS and councils. It is anticipated that an overview and summary will be published.

Throughout the next three weeks the LGA, ADASS and DHSC will be working together to support you in getting the very best outcomes from this questionnaire. For information and support about the purpose and use of the self-assessment please contact servicecontinuitysaq@dhsc.gov.uk. If you have any other questions that relate to this process, please email adass.lga.covid@local.gov.uk. All questions to this email account will be anonymised and responded to by DHSC, LGA or ADASS, as appropriate. This could include technical questions or anything in relation to the requirements of this self-assessment. All questions and responses will be included in a [Frequently Asked Questions \(FAQ\) document](#).

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

Thank-you for taking the time to complete this questionnaire particularly in this time of unprecedented demand on services.

Ian Winter CBE,
DHSC, Service Continuity and Care Market Review Project Delivery Director
30th September 2020

Section 1 - Understanding Risk

The purpose of this question is to understand the council's assessment of risk across different service types for both council funded and self-funded people. You will be asked to assess risks to capacity and sustainability in all types of service provision.

Using local intelligence and your knowledge of the market and current challenges, what is your level of concern about the ability of the local care market to provide the capacity needed between now and the end of March 2021? Each level of concern relates to the council's ability to ensure service continuity and / or secure appropriate alternative provision where needed. This includes the provision for both council commissioned services and self-funded care.

Please use the following guidelines to indicate your level of concern:

Extremely concerned – A point of crisis that compromises our ability to ensure continuity of care has already been reached, or is expected to be reached before Christmas (between now and 15/12/2020)

Moderately concerned – Expect to reach a point of crisis that compromises our ability to ensure continuity of care between Christmas and the end of March 2021 (between 15/12/2020 and 31/03/2021)

Somewhat concerned – Expect serious challenges which may compromise our ability to ensure continuity of care between now and the end of March 2021

Slightly concerned – Expect serious challenges between now and the end of March 2021, but are confident that these will be addressed through our plans to ensure continuity of care is not compromised.

Not at all concerned – Given current knowledge, intelligence and plans we don't expect to face a crisis or serious challenges in relation to continuity of care before the end of March 2021

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

	Levels of concern				
	Extremely concerned	Moderately concerned	Somewhat concerned	Slightly concerned	Not at all concerned
Nursing care				X	
Residential care - older people			X		
Residential care – working age adults				X	
Home care				X	
Home based reablement			x		
Supported living or extra care housing				X	
Support provided through direct payments				X	
Community / day opportunities			X		

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

The purpose of this question is to understand the council's view on the underlying causes of the risks highlighted in Q1. The key measurement relates to the requirements of the Care Act as it applies to continuity of care for the provision for both council commissioned services and self-funded care.

Using the prompt list of challenges, please assess the extent to which you feel they will present a risk to your council meeting its duties and responsibilities under the Care Act, between now and end of March 2021. Please provide a number between 1 and 3 for each challenge and for each type of care, where the numbers signify the following:

- 1-** It will present a risk to the service area in question **to a great extent.**
- 2-** It will present a risk to the service area in question **to a moderate extent.**
- 3-** It will present a risk to the service area in question **to a small extent.**

Please leave any of the boxes blank where you feel there is no notable risk to the service area.

	Nursing care	Residential care - older people	Residential care – working age adults	Home care	Home based reablement	Supported living or extra care housing	Support provided through direct payments	Community based & day services
Recruitment of care staff	2	2	2	2	2	2	3	3
Retention of care staff	2	2	2	2	1	2	3	3
COVID-19 - Staffing	3	3	3	2	2	3	3	3
COVID-19 - Infection control	3	2	2	3	3	3	3	2
COVID-19 - Access to testing	2	2	2	2	2	2	3	3
COVID-19 - Zoning and cohorting	2	1	1	3	3	1	2	1
Fee rates	3	3	3	2		3	3	3
Provider costs	1	1	1	2	3	1	3	2
Safeguarding issues	2	2	2	2	3	2	3	3
Quality issues	2	2	2	2	3	2	3	3
Insufficient local provision	3			2	3	3	3	3
Insurance issue	2	2	2	3		3	3	3
Voids	2	2	2			3		1
Other (please specify)								

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

Section 2 - Contingency Planning

The purpose of this question is to understand the specific steps councils have taken in relation to policy and practice, to prepare for provider service change or closure.

To what extent do you have in place or use the following measures, plans and contingency approaches to reduce the risks to continuity of care from provider failure?

Please provide a number between 1 and 3 for each measure and for each type of care, where the numbers signify the following:

- 1- The measure is in place within the service area **to a great extent.**
- 2- The measure is in place within the service area **to a moderate extent.**
- 3- The measure is in place within the service area **to a small extent.**

Please leave any of the boxes blank where the measure is not in place at all within the service area. Where a measure has been used in different service areas, please use the numbers to help differentiate the scale of support provided.

a. Local authority funded care and support

	Nursing care	Residential care - older people	Residential care – working age adults	Home care	Home based reablement	Supported living or extra care housing	Support provided through direct payments	Community Services /Day services
Use of IPC funding	1	1	1	1	1	1		
Other financial support	1	1	1	1	1	1	2	1
Contractual support	1	1	1	1		1	2	1
Other support	1	1	1	1	1	2	2	2
Access to additional provision	2	2	2	2	2	2	2	2
Changes to how people are supported		2	2	2	2	2	2	1
Other (Please specify)								

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

b. Self-funded care

	Nursing care	Residential care - older people	Residential care – working age adults	Home care	Home based reablement	Supported living or extra care housing	Support provided through direct payments	Community Services / Day services
Use of IPC funding	1	1	1	1	1	1		
Other financial support	3	3	3	3	3	3		
Contractual support								
Other support	2	2	2	2		2		
Access to additional provision	2	2	2	2	2	2		3
Changes to how people are supported	3	2	2	2	2	2		2
Other (Please specify)	1	1	1	1	1	1		

Commissioned support funded by NHS D2A funding

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

The purpose of this question is to understand the steps the council has taken in developing their contingency plans and, crucially, partners' involvement.

What policy and practice arrangements do you have in place in the event where a provider closes, or alternative provision needs to be made for other reasons?

This includes the provision for both council commissioned services and self-funded care

	People supported through council commissioned care			People supported through self-funded care		
	Yes, already in place	Arrangements in progress	No, not in place	Yes, already in place	Arrangements in progress	No, not in place
Policy (e.g. transfer arrangements)	X			X		
Partnership (e.g. data sharing agreement with providers)	X				X	
Other (please specify)						

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

The purpose of this question is to understand the council's view of risk to service continuity, in light of the actions they are taking.

To what extent have the following local or partnership arrangements for managing and responding to risks been part of your contingency planning approach?

	To a great extent	To a moderate extent	To a small extent	Not at all
Working with partners (e.g. other councils, the region, service users, providers, Healthwatch, HWB, LRF)	X			
Information and intelligence (e.g. regional market intelligence, CQC, safeguarding, QA, etc.)	x			
Other (Please specify)				

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

Section 3 - Support

The purpose of this question is to give councils an opportunity to highlight the three issues of greatest concern and explain likelihood, timing and support plans.

What are the three most significant issues that cause you concern as a risk to your ability to deliver on Care Act responsibilities / continuity of care between now and the end of March 2021?

Please describe below the issues that cause you most concern.

	How confident are you that your mitigation and contingency plans will minimise / address this risk?			
	Very confident	Fairly confident	Not very confident	Not at all confident
Concurrent incidents (i.e. failure plus bad weather, winter flu)		X		
Financial stability			X	
Carers / Family strain		x		

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

The purpose of this question is to understand what type of support a council would most want and when this may be required.

What further support would you want to see in place to help you deal with the expected service continuity challenges between now and the end March 2021?

Please include support from, for example the Care and Health Improvement Programme (CHIP), including the LGA and ADASS, neighbouring councils and others within your region, the Department for Health and Social Care. If there is a specific delivery channel that is not clear in the type of support detailed, please expand in the comments alongside.

	When will this support be needed?			
	Needed urgently	Needed within the next three months	Needed in response to a specific event (e.g. a tipping point)	Not needed
Legislative (e.g. Market oversight)				X
Flexible funding		X		
Peer support			X	
Market Intelligence		X		
Other (Please specify)				

Note: Comments and text boxes and their contents have been omitted from this standard template for publication to Cabinet as they may contain sensitive or commercially confidential information. The scorings attributed to each question are draft and may change on submission to DHSC

Options for responding to provider failure

Intervention level	Option	Description	Risks	Benefits
High	Council as provider of last resort	Council intervenes directly by Transfer of Undertaking or taking on the employment of staff and potentially placing some its own existing staff into the care home. This could be for a temporary period pending transfer to a new provider.	<ul style="list-style-type: none"> • The Council would in effect take on the business • The Council would acquire the legal, contractual and financial responsibility of the employer • Requires additional staffing for Direct Services, running over establishment • Possible confusion of responsibilities and liability where the council employs staff but does not own or control the building • Potentially significantly increased cost for the Council. 	<ul style="list-style-type: none"> • May be the only realistic option if no independent sector provider is willing or able to take on the service • Staffing and the delivery response are within the direct control of the authority, thereby ensuring clear oversight service quality and user safety
Medium	Commission provider of last resort	Council commissions a standby provider which can take over the operation of the business or supply staff to a failing care home	<ul style="list-style-type: none"> • Possible confusion of responsibilities and liability • Very high cost model • Likely to be limits on how large a provider failure could be taken on. • May not accommodate multiple concurrent failures • Creates requirement to quality manage another provider. 	<ul style="list-style-type: none"> • Potentially offers the opportunity to share risks with the new provider • Additional flexible workforce capacity can be sourced and deployed at relatively short notice.
Low	Enhanced delivery of the current provider failure model	Support the provider financially and/or with staffing inputs to stay in business whilst a transfer of business or planned closure takes place	<ul style="list-style-type: none"> • May keep services which are unsustainable and/or of poor-quality operating for a longer time 	<ul style="list-style-type: none"> • Lower cost for the options 1 and 2 authority • Provider required to supervise staff, embedding them within their own operations

This page is intentionally left blank



CABINET – 20 OCTOBER 2020

AIR QUALITY AND HEALTH JOINT ACTION PLAN 2020-2024

REPORT OF THE DIRECTOR OF PUBLIC HEALTH

PART A

Purpose of the Report

1. The purpose of the report is to inform the Cabinet of the Council's ongoing work with partners to improve air quality across the County and seek approval for the Leicestershire Air Quality and Health Joint Action Plan.
2. The Leicestershire Air Quality and Health Joint Action Plan is a partnership Plan, owned by the County Council and delivered in partnership with the Leicester, Leicestershire and Rutland Clinical Commissioning Group, University of Leicester and the following district councils - Blaby, Charnwood, Harborough and North West Leicestershire. It will be overseen by the Air Quality and Health Action Plan Partnership, of which the above are members.

Recommendations

3. It is recommended that the Cabinet
 - a) Notes the Council's continued work with partners to improve air quality across the County;
 - b) Approves the Leicestershire Air Quality and Health Action Plan 2020-2024.

Reasons for Recommendation

4. Air pollution has a significant impact on public health and wellbeing, and poor air quality is the largest environmental risk to public health in the UK. The public need to be aware of the impact their behaviours have on air pollution and measures that could be put in place to address these.
5. The Environment Act 1995 (Part IV) places obligations on both county and district councils to work together to develop their approach to addressing air quality and, with respect to Action Plans, ensure that all necessary measures to address air pollution in their local area are included. Whilst statutory responsibilities for addressing air quality rest with the district councils, some County Council functions such as Highways and Transportation will impact air

pollution. and improving the health of the population is also a County Council function. It is therefore beneficial to have a partnership approach.

Timetable for Decisions (including Scrutiny)

6. The Scrutiny Commission considered a report on 2 September 2020 and its comments are set out in Part B below.
7. Subject to approval of the Action Plan, the Health and Wellbeing Board will consider a progress update at its meeting on 28 January 2021.
8. Actions included within this plan have also been incorporated within the majority of district council air quality strategies and plans where they exist, and these will be approved through their own governance processes. It is expected that this process will be completed by December 2020 and the joint Action Plan will then be considered live. The Joint Action Plan will then be publicised and launched early 2021.

Policy Framework and Previous Decisions

9. In November 2016, the Health and Wellbeing Board approved the Leicestershire's Joint Health and Wellbeing Strategy for 2017 – 2026. This document sets out the vision to “improve health outcomes for the local population, manage future demand on services and create a strong and sustainable health and care system by making the best use of the available resources”. Improving health outcomes is reliant on understanding and tackling the causes of ill-health of which poor air quality is one.
10. On 15 May 2019 the County Council declared a climate emergency, resolving to work with partners and other public bodies across the County and region to deliver ambitious goals such as reducing the Council's carbon emissions by 38% by 2030.
11. Following the declaration of a climate emergency, the Council at its meeting on 8 July 2020 approved the revised Strategic Plan for 2018 – 22 to incorporate new environmental commitments to ensure future growth is considered within a robust environmental framework. It also approved the revised Environment Strategy 2018-2030, which aims to reduce pollution and the environmental impacts of travel and transport and seeks to protect people from harm caused by the deteriorating condition of the environment and a target of net zero carbon emissions by 2030.
12. The Director of Public Health has a statutory duty under the Health and Social Care Act to ensure that plans are in place to protect the health of the local population.

Resource Implications

13. There are no direct financial implications arising from this report. Partners are asked to support the delivery of the Action Plan using existing resources. The Director of Law and Governance has been consulted on the content of this report.

Circulation under the Local Issues Alert Procedure

14. As air quality is a matter that affects all areas of the County, this report is being circulated to all members of the County Council.

Officers to Contact

Mike Sandys, Director of Public Health
Tel. (0116) 305 4239
Email: mike.sandys@leics.gov.uk

Kelly Evans, Consultant in Public Health
Tel. (0116) 305 1995
Email: Kelly-Marie.Evans@leics.gov.uk

PART B

Background

15. Air pollution has a significant impact on public health and wellbeing, and poor air quality is the largest environmental risk to public health in the UK.
16. Air pollution is a complex mix of particles and gases, both natural and of human origin. Particulate matter (PM) and nitrogen dioxide (NO₂) are major components of urban air pollution. Other pollutants include Sulphur dioxide, Ammonia, Ozone and Non-methane volatile organic compounds (NMVOCs).
17. Health effects from air pollution occur throughout life - from conception to older age. Conditions caused by air pollution not only cause deaths but also significantly reduce quality of life. They also mean people are less able to work and need more medical and social care support, resulting in higher social costs and greater burden on the Health and Care System.
18. Road vehicles are the main pollution source that people are exposed to in the most populated urban environments and the pollutants they cause and emit have the greatest health impacts. Combustion for heating, farming activities and certain industrial processes also contribute to air pollutant emissions, but these tend to be more diluted, contributing to background levels of air pollution.
19. There are considerable differences in emissions between different vehicles and fuels. In general, diesel exhausts contain up to 30 times more PM than petrol or liquefied petroleum gas (LPG) / compressed natural gas (CNG), but all vehicles generate additional PM from friction of brakes and tyres and through re-suspension of dust from road surfaces.

National and local context

20. The UK Government and the devolved administrations have policy responsibility for air quality in England, Scotland, Wales and Northern Ireland respectively.
21. The Government published a Clean Air Strategy in January 2019 which constitutes the Government's main plan to curb emissions of nitrogen oxides (NO_x), sulphur dioxide, volatile oxide compounds, ammonia and particulate matter (PM_{2.5}) emissions as required by the National Emissions Ceilings Directive and the Gothenburg Protocol underpinning it.
22. Local authorities in Great Britain have powers to address local air pollution via the Clean Air Act 1993, the Road Traffic (Vehicle Emissions) (Fixed Penalty) (England) Regulations 2002 and equivalent legislation in Scotland and Wales. The latter includes enforcement powers for stationary idling offences.
23. Local authorities are required to review and assess local air quality, in accordance with the statutory Local Air Quality Management (LAQM) guidance. Where a local authority identifies areas exceeding statutory limits and there is

relevant public exposure, it is required to declare the geographic extent of exceedance as an Air Quality Management Area (AQMA). It must then draw up an Action Plan detailing remedial measures to address the problem.

24. In two-tier authority areas, the duties placed on local government associated with air quality management are the responsibility of district authorities. This includes identification of AQMAs, monitoring and reporting on air quality, producing and delivering Action Plans, and assessing the impact of development on air quality through the planning process.
25. There are 16 Air Quality Management Areas (AQMA) due to exceedance in Leicestershire:
 - 14 of these monitor Nitrogen Dioxide (NO₂).
 - One AQMA monitors Sulphur Dioxide (SO₂) and covers the Great Central Railway area and one AQMA monitors particulate matter (PM₁₀) and covers the Mountsorrel Quarry area.
 - Melton Borough Council, Hinckley and Bosworth Borough Council and Oadby and Wigston Borough Council have currently no declared AQMAs.
26. Prevalence of asthma across Leicestershire was 6.3% in 2018/19, this is significantly higher than the England average of 6%.
27. Background levels of PM are found to be higher in North West Leicestershire, Loughborough and Kegworth with quarries and the airport considered as the main cause. The quarry at Croft in Blaby District is also a potential source of PM.
28. There are also higher levels of Nitrogen Oxide – found in car exhaust fumes and when coal and oil is burnt, leading to Particle Matter 2.5 and Particle Matter 10 - dust, soot and smoke. The numbers 2.5 and 10 refer to the size of the particles. The higher levels of both pollutants are found around the main road routes in the County; namely the M69, A42, A46, A6 and the M1.
29. However, there are obligations on both the County Council and the district councils within Part IV of the Environment Act 1995 in relation to air quality. The Secretary of State expects lower and upper-tier councils to work together to develop their approach and, with respect to Action Plans, ensure that all necessary measures to address air pollution in their local area are included. Each district with an AQMA will have an Action Plan that looks to manage air quality in that area.
30. In Leicestershire, the Air Quality and Health Action Plan Partnership has been established to oversee and monitor delivery and implementation of the Leicestershire Air Quality and Health Joint Action Plan. Members of the Partnership are: Leicestershire County Council; Leicester, Leicestershire and Rutland Clinical Commissioning Group; the University of Leicester and the following district councils - Blaby, Charnwood, Harborough and North West Leicestershire. Other district councils will be encouraged to join the partnership as the Plan is delivered.

Proposal

31. In light of the above, it is proposed that an Air Quality and Health Action Plan 2020 – 2024 be introduced which aims to improve air pollution across Leicestershire through joint working across organisational boundaries, with professionals in environment and transport and public health in the County Council and Regulatory Services in the district council and the public to improve air quality in the county and reduce the impact of air pollution on the environment and human health, contributing to the reduction in health inequalities. A copy of the Action Plan is appended to this report as Appendix A.
32. The key aims of the Action Plan are to:
 - i. Reduce the impact of poor air quality on the health of residents, workers and visitors, and the environment.
 - ii. Raise public awareness of air quality, its impact on health and personal protection measures to promote sustainable behaviour change.
 - iii. Increase our understanding of the state of air quality in Leicestershire and the impact of measures to improve air quality.
 - iv. Meet and exceed statutory obligations and national targets on air quality.
33. In addition, the following three priorities were determined by partners as the focus of collaborative action over the next 4 years:
 - i. Active and sustainable travel: This work should act as a catalyst for behaviour change and modal shift to green travel. Each authority with support from the Counties active and sustainable travel team will be expected to promote active travel to their residents and workforce.
 - ii. Planning and development strategies and proposals: Guidance and frameworks should be developed with and for planners to support measures to improve air quality and identify and address developments which may worsen air quality. Each authority will be expected to contribute to the healthy design guide programme of work.
 - iii. Information sharing and campaigns: It is important that steps are taken to understand the public's views, knowledge, attitudes and motivations, in order that they can be engaged in developing actions which are aligned with their priorities. Each authority will be expected to promote county-wide campaigns.

Engagement with Key Stakeholders

34. A workshop was held in October 2019 to engage with partners and develop an initial draft of the proposed Air Quality and Health Action Plan. Partners included county and district council officer representatives, East and West Leicestershire Clinical Commissioning Groups, health colleagues in acute care and community providers such as Leicestershire Partnership Trust.

Views of the Scrutiny Commission and Officer Response

35. The Scrutiny Commission considered a report at its meeting on 2 September 2020 as part of the consultation and a detailed minute of the discussion is attached at Appendix B. In summary, members welcomed the Plan and recognised that both nationally and locally air pollution was the biggest environmental hazard in terms of mortality impacts.
36. Members also welcomed more monitoring of air quality levels across the county and the sharing of this data to drive the need for change, whilst recognising that district councils often had insufficient resource to do so. The work of the Strategic Planning Group to improve developer understanding of expectations in respect of air pollution as part of a development was also welcomed. Members said they would like more insight into work by surrounding councils, which would likely impact air pollution in some boundary areas.
37. The Scrutiny Commission noted that no single body had oversight or control of air pollution and suggested that the Plan be strengthened to address the challenge between the impact of growth on air pollution and other environmental considerations. Concern was expressed that there was currently no member involvement in the development of the Plan or its delivery. The Director agreed and undertook to revisit the governance structure to ensure political oversight was properly reflected in the Plan and this has been done by inviting members of the Health and Wellbeing Board to attend the Air Quality and Health Action Plan Partnership.
38. Following the comments of the Scrutiny Commission, the Action Plan has been modified to include actions regarding consistent monitoring across Leicestershire. An interactive dashboard has also been developed incorporating all NO₂ and PM monitoring sites, so monthly data by site can be seen across the county.
39. Membership of the Air Quality and Health Partnership Group has also been reviewed to ensure all key partners are included. Member input is welcomed, and members of the Health and Wellbeing Board will be invited to attend. The Health and Wellbeing Board will also receive regular progress reports.

Performance Monitoring and Governance

40. The overall measurement of success will be reducing mortality attributable to air pollution. However, the detailed outputs to achieve this will be developed with partners through the Air Quality and Health Action Plan Partnership, which will oversee delivery of the Action Plan. The Partnership includes Leicester, Leicestershire and Rutland Clinical Commissioning Group, officers from the County Council's Environment and Transport, Strategic Planning and Public Health departments, the University of Leicester and also officers from district councils who will implement the plan. Following comments from the Scrutiny Commission, Members will now be invited to be part of this partnership.

41. The Air Quality and Health Action Plan Partnership will meet six weekly to monitor progress against the plan.

Equality and Human Rights Implications

42. An Equality and Human Right Impact Assessment (EHRIA) screening of the Action Plan has been completed and concluded that a full impact assessment is not required.

Background Papers

Meeting of the County Council – 8 July 2020 – Revised Strategic Plan 2020-2023
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=134&MId=6040&Ver=4>

Meeting of the County Council – 8 July 2020 - Revised Environment Strategy 2018-2030
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=134&MId=6040&Ver=48>

Meeting of the County Council – 15 May 2019 – Notice of Motion – Climate Emergency
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=134&MId=5112&Ver=4>

Meeting of the Health and Wellbeing Board – 11 November 2016 – Joint Health and Wellbeing Strategy
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1038&MID=4635#A14953>

Air Quality joint strategic needs assessment
<https://www.lsr-online.org/uploads/jsna-air-quality-2019-v10-final.pdf?v=1561477116>

Appendices

- Appendix A – Draft Air Quality and Health Action Plan
- Appendix B – Minute of the Scrutiny Commission 2 September 2020

Improving Air Quality and Health across Leicestershire 2020- 2024: a multiagency partnership for joint action

Developed by leading public sector organisations in Leicestershire, convened by Leicestershire County Council

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

Document Control

Authors

Julia Knight (Senior Specialty Registrar in Public Health, LCC), Kelly Evans (Consultant in Public Health, LCC)

Multiagency partners and lead personnel representing each

<i>Organisation/ network</i>	<i>Representative(s) (role)</i>
Leicestershire County Council	Mike Sandys (Director of Public Health), Anne Carruthers (Director of Environment and Transport), Ian Vears (AD Environment and Transport) Nic Thomas (Head of Planning, Historic and Natural Environment), Lorna Dellow (Senior Communications Officer)
Blaby District Council	Jane Toman (Chief Executive)
Charnwood Borough Council	Rob Mitchell (Chief Executive)
Harborough District Council	Norman Proudfoot and Beverley Jolly (Joint Chief Executives)
Hinckley & Bosworth Borough Council	Bill Cullen (Chief Executive)
Melton Borough Council	Edd de Coverly (Chief Executive)
North West Leicestershire District Council	Bev Smith (Chief Executive)
Oadby & Wigston Borough Council	Tony Cawthorne (Health and Safety)
Leicester, Leicestershire and Rutland Air Quality forum	David Gould (Chair and Senior Environmental Health Officer)
Leicestershire Clinical Commissioning Groups (CCGs)	Andy Williams (Joint Chief Executive)
Leicester, Leicestershire and Rutland Sport (LRS)	Dave Stock (Strategic Relationships Manager)
University Hospitals Leicester NHS Trust	TBC
East Midlands Ambulance Service	TBC
Leicestershire Fire and Rescue Service	TBC

<i>Version/ Timeline</i>	<i>Amendment Detail</i>	<i>Author</i>	<i>Date completed OR to be completed by</i>
1.0	Initial skeleton report produced	Julia Knight	October 2019
2.0	Revised following "Leicestershire Air Quality and Health Partnership Action Plan"		
3.0	Revised following further engagement with partners and detail added		December 2019
4.0	Revised following partner feedback	Kelly Evans	July 2020
5.0	Revised following scrutiny commission	Kelly Evans	September 2020

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

Foreword

“In May 2019, Leicestershire County Council declared a Climate Emergency. We recognised that we need to work more closely with partners and other public bodies across the county and region to deliver ambitious goals if we are to halt further changes to the climate and deliver sustainable solutions. Air pollution and climate change are often said to be “two sides of the same coin”: both are largely caused by the same sources and have similar solutions. This ambitious multiagency partnership plan on Air Quality and Health demonstrates this commitment and a tangible response to tackle the pressing climate issues we are facing.

Good air quality is essential for our health, quality of life and the environment. This document sets out how we will deliver against the recommendations of the comprehensive joint strategic needs assessment (JSNA) on Air Quality and Health in Leicestershire, which we published in May 2019...”

Mr Lee Breckon

Lead Member for Health and Wellbeing

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

Executive summary

Air pollution has a significant impact on public health and wellbeing, and poor air quality is the largest environmental risk to public health in the UK.

Health effects from air pollution occur across the life course - from conception to older age. Conditions caused by air pollution not only cause deaths but also significantly reduce quality of life. They also mean people are less able to work and need more medical and social care support, resulting in higher social costs and greater burden on the Health and Care System.

This call to action aims to improve air pollution across Leicestershire through joint working across organisational boundaries, with professionals and the public to improve air quality in the county and reduce the impact of air pollution on the environment and human health, contributing to the reduction in health inequalities.

The key aims of the action plan are to:

- Reduce the impact of poor air quality on the health of residents, workers and visitors, and the environment.
- Raise public awareness of air quality, its impact on health and personal protection measures to promote sustainable behaviour change.
- Increase our understanding of the state of air quality in Leicestershire and the impact of measures to improve air quality.
- Meet and exceed statutory obligations and national targets on air quality.

Priorities set out in the Joint Strategic Needs Assessment suggest key deliverables to achieve the vision and aims to improve air quality. It reflects the evidence base for what works in relation to particulate matter and nitrogen dioxide.

In addition to these objectives the following three priorities were determined by partners as the focus of collaborative action over the next 3 years:

A) Active and sustainable travel: This work should act as a catalyst for behaviour change and modal shift to green travel.

B) Planning and development strategies and proposals: Guidance and frameworks should be developed with and for planners to support measures to improve air quality and identify and address developments which may worsen air quality.

C) Information sharing and campaigns: It is important that we take steps to understand the public's views, knowledge, attitudes and motivations, in order that they can be engaged in developing actions which are aligned with their priorities.

All organisations, professionals and the public have a role to play to in improving air quality across Leicestershire.

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

Contents

Section	Sub-section	Page No.
1. Background		
	1.1 Air pollutants and their sources	6
	1.2 Air quality and public health	6
	1.3 Purpose of this document	8
2. Context		
	2.1 Policy framework and previous decisions	8
	2.2 Scale of the air quality problem in Leicestershire	9
	2.3 Estimating the health burden of poor air quality in Leicestershire	10
	2.4 Estimating the mortality burden of poor air quality in Leicestershire	11
	2.5 Existing air quality focused partnerships	11
3. Progress		
	3.1 Comprehensive assessment of need	12
	3.2 Stakeholder engagement	12
4. Vision, priorities and action	4.1 Vision	
	4.2 Aims	
	4.3 Focus areas	
	4.3 Activities to deliver against our commitments by 2023	
5. Governance		
	5.1 Overview	
	5.2 Resources	

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

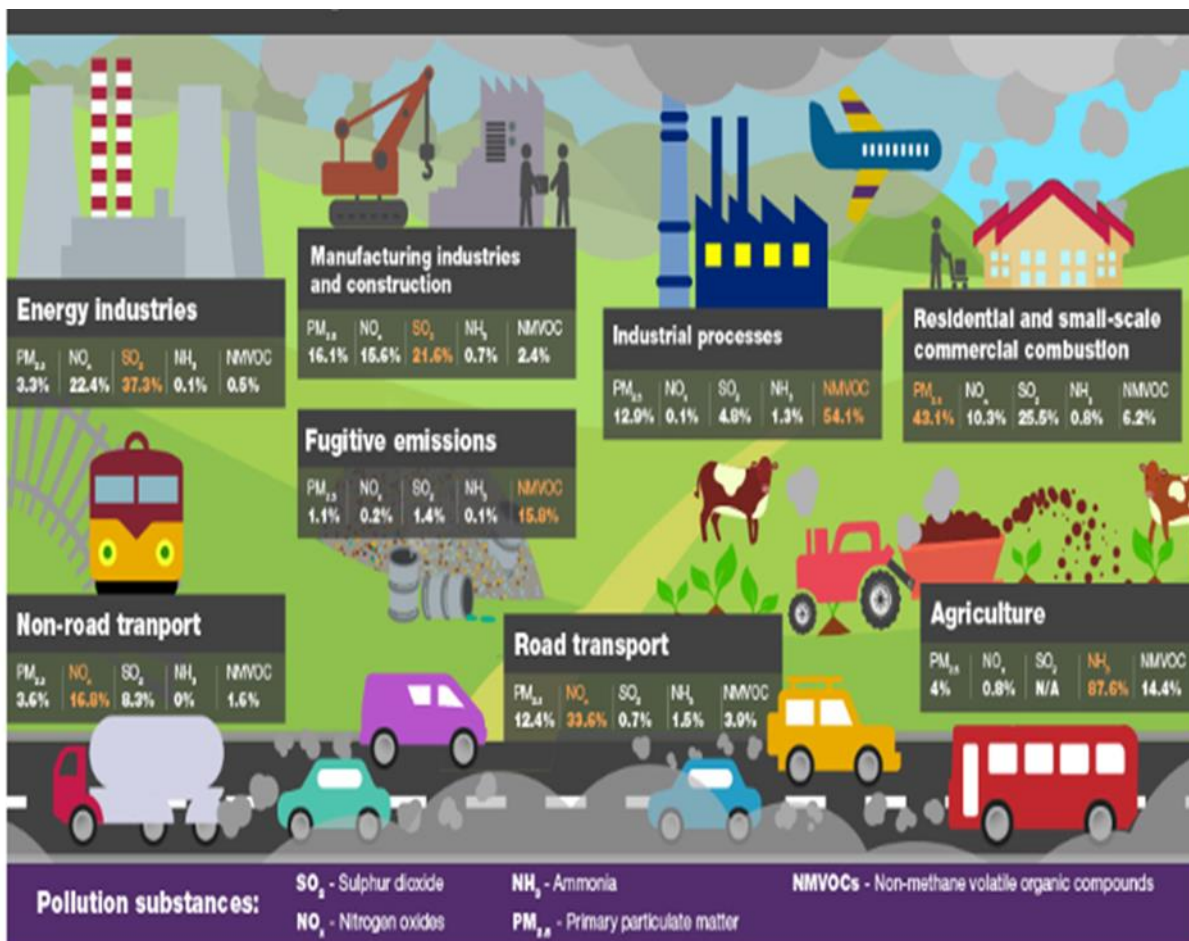
1. Background

Air pollution has a significant impact on public health and wellbeing, and poor air quality is the largest environmental risk to public health in the UK.

1.1 Air pollutants and their sources

Air pollution is a complex mix of particles and gases; both natural and of human origin. Particulate matter (PM) and nitrogen dioxide (NO₂) are major components of urban air pollution; other pollutants include Sulphur dioxide, Ammonia, Ozone and Non-methane volatile organic compounds (NMVOCs).

Road vehicles are the main pollution source that people are exposed to in the most populated urban environments and the pollutants they cause and emit have the greatest health impacts. Combustion for heating, farming activities and certain industrial processes also contribute to air pollutant emissions, but these tend to be more diluted, contributing to background levels of air pollution. There are considerable differences in emissions between different vehicles and fuels. In general, diesel exhausts contain up to 30 times more PM than petrol or liquefied petroleum gas (LPG) / compressed natural gas (CNG), but all vehicles generate additional PM from friction of brakes and tyres and through re-suspension of dust from road surfaces.



1.2 Air quality and public health

In the UK, the burden of air pollution on health ranks alongside those arising from cancer, heart disease and obesity. Recent research has estimated that long term exposure to man-made air pollution in the UK has an annual effect equivalent to 28,000 to 36,000 deaths.

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

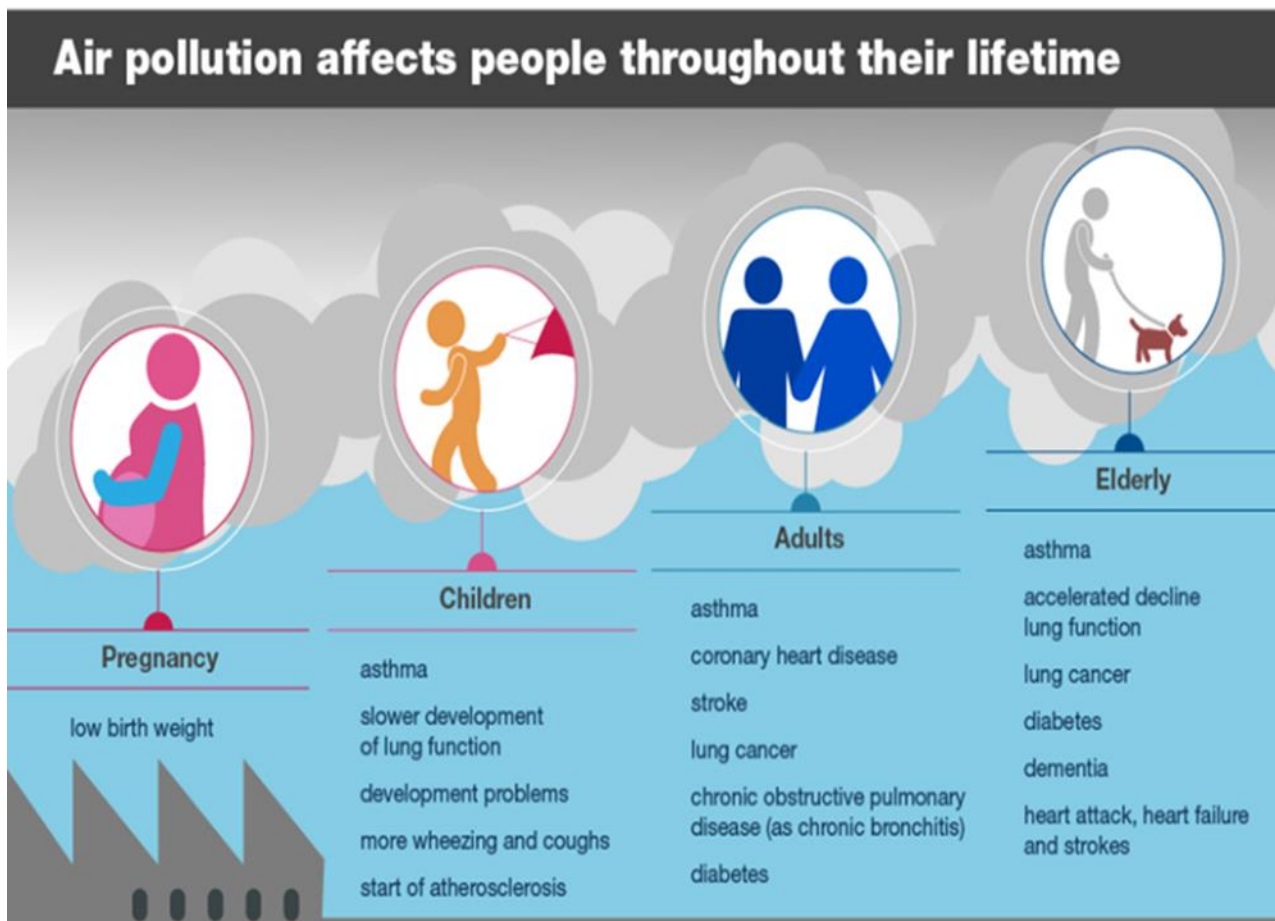
The strongest evidence for effects on health is associated with fine particulate matter (PM2.5). Long-term exposure from PM2.5 increases poor health, deaths from heart and lung diseases and incidence of lung cancer.

NO2 is known to be a respiratory irritant, there are associations between this pollutant and reduced lung development and respiratory infections in early childhood as well as effects on lung function in adulthood. Some studies have also shown associations of outdoor NO2 with adverse effects on health, including reduced life expectancy.

Currently there is no clear evidence of a safe level of exposure to PM or NO2 below which there is no risk of adverse health effects.

There are gaps in evidence (and measures) about the relationships and interrelationships of other air pollutants and health.

Health effects from air pollution occur across the life course - from conception to older age. Conditions caused by air pollution not only cause deaths but also significantly reduce quality of life. They also mean that people are less able to work and need more medical care, resulting in higher social costs and burdens to the National Health Service. Some people are more affected because they live in a polluted area, are exposed to higher levels of air pollution or are more susceptible to health problems.



LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

1.3 Purpose of this document

By its nature, air quality cannot be controlled by geographical boundaries or by a single individual alone. Instead collective, systematic efforts are required to reduce air pollution and its harmful effects on health. This document sets out an approach for joint action to improve air quality and health in Leicestershire.

2. Context

2.1 Policy framework and previous decisions

On 15 May 2019 Leicestershire County Council declared a Climate Emergency, resolving to work with partners and other public bodies across the county and region to deliver ambitious goals to reduce carbon and other greenhouse gas emissions. Actions to reduce these emissions will in many or most cases also help to reduce other air pollutants.

The UK Government and the devolved administrations have policy responsibility for air quality in England, Scotland, Wales and Northern Ireland respectively.

- The Clean Air Strategy, published January 2019, constitutes the Government's main plan to curb emissions of nitrogen oxides (NO_x), sulphur dioxide, volatile oxide compounds, ammonia and particulate matter (PM_{2.5}) emissions as required by the National Emissions Ceilings Directive and the Gothenburg Protocol underpinning it.

Local authorities in Great Britain also have powers to tackle local air pollution via the Clean Air Act 1993, the Road Traffic (Vehicle Emissions) (Fixed Penalty) (England) Regulations 2002 and equivalent legislation in Scotland and Wales. The latter includes enforcement powers for stationary idling offences.

Local authorities are required to review and assess local air quality, in accordance with the statutory Local Air Quality Management (LAQM) guidance. Where a local authority identifies areas exceeding statutory limits and there is relevant public exposure, it is required to declare the geographic extent of exceedance as an Air Quality Management Area (AQMA). It must then draw up an action plan detailing remedial measures to address the problem.

In two-tier authority areas, such as Leicestershire the duties placed on local government associated with air quality management are the responsibility of district authorities. This includes identification of AQMAs, monitoring and reporting on air quality, producing and delivering action plans, and assessing the impact of development on air quality through the planning process.

However, there are obligations on both the county and district councils within Part IV of the Environment Act 1995 in relation to air quality. The Secretary of State expects lower and upper-tier councils to work together to develop their approach and, with respect to action plans, ensure that all necessary measures to address air pollution in their local area are included.

The Director of Public Health has a statutory duty to ensure that plans are in place to protect the health of the local population.

Leicestershire's Joint Health and Wellbeing Strategy 2017 – 2026 sets out the vision to “improve health outcomes for the local population, manage future demand on services and create a strong and sustainable health and care system by making the best use of the available resources”. Improving health outcomes is reliant on understanding and tackling the causes of ill-health; of which poor air quality is one.

The Council's Environment Strategy 2018-2030, which was approved by Cabinet on 6 July 2018, and subsequently reviewed, following the declaration of the Climate Emergency in May 2019, and approved by Full Council on 8 July 2020, it aims to reduce pollution and the environmental impacts of travel and transport. There is also an aim to protect people from harm caused by the deteriorating condition of the environment.

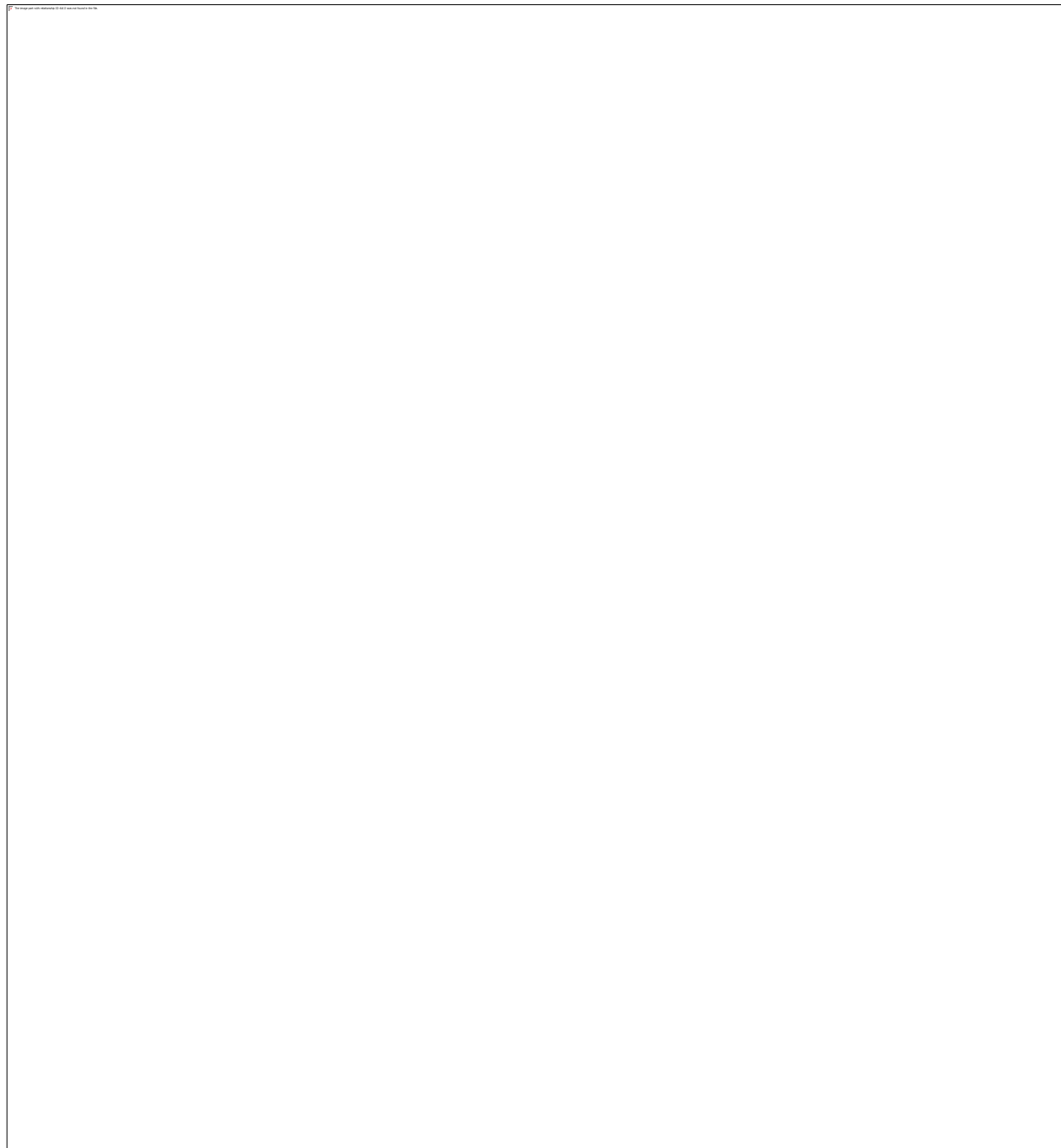
LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

2.2 Scale of the air quality problem in Leicestershire

There are 16 Air Quality Management Areas (AQMA) in Leicestershire:

- 14 of these monitor Nitrogen Dioxide (NO₂).
- One AQMA monitors Sulphur Dioxide (SO₂) and covers the Great Central Railway area and one AQMA monitors particulate matter (PM₁₀) and covers the Mountsorrel Quarry area.
- Melton Borough Council, Hinckley and Bosworth Borough Council and Oadby and Wigston Borough Council have currently no declared AQMAs.

The majority of AQMAs appear to fall, roughly, along or around the central North / South spine of Leicestershire. It is estimated that over 0.6% (>4000) of the Leicestershire population live in an AQMA area.



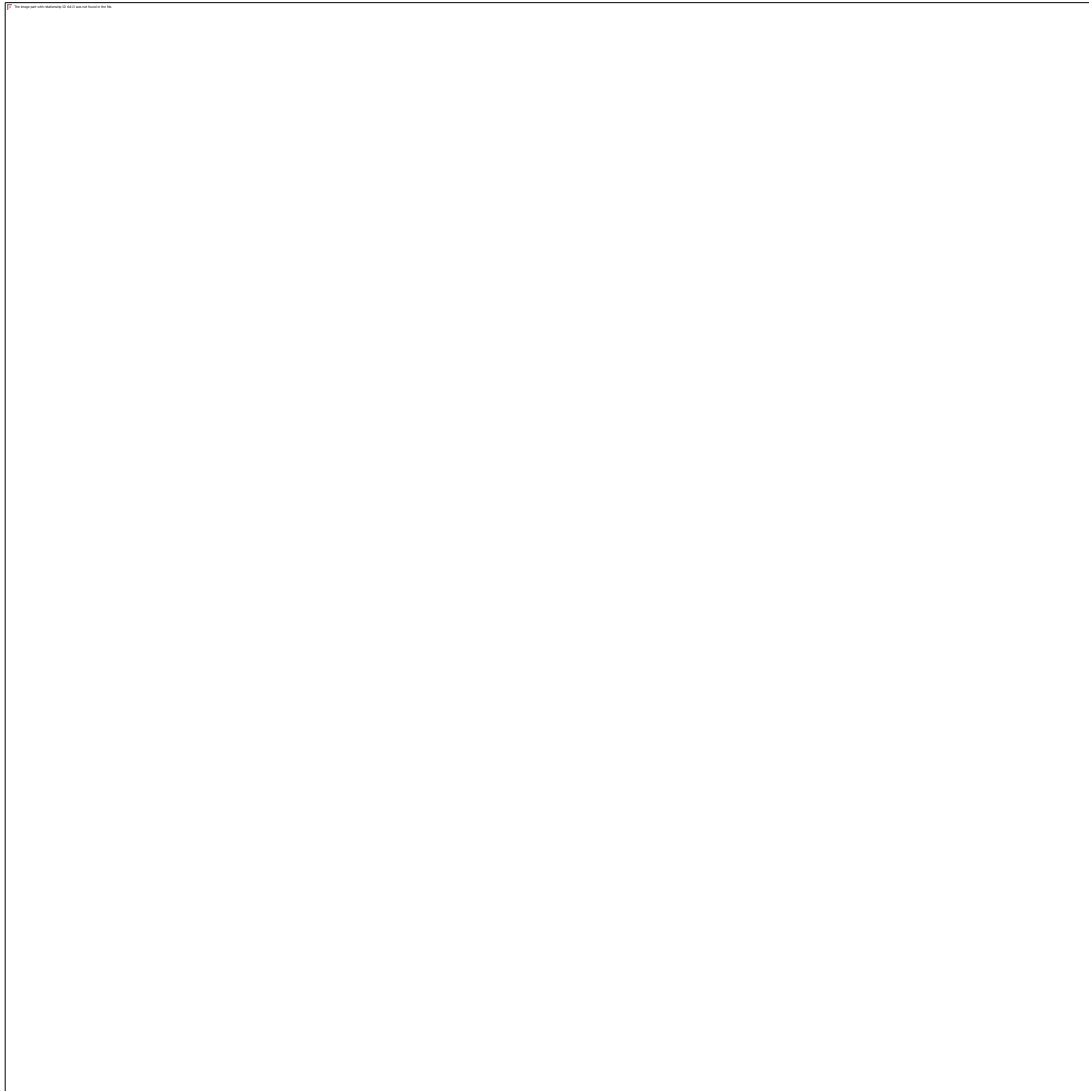
There are 5 continuous monitoring stations and 207 passive monitoring sites for NO₂ across Leicestershire:

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

- In 2018 there were 11 recorded exceedances for NO₂ annual mean concentration above the objective of 40µg.m⁻³,
- Monitoring of PM₁₀ and SO₂ show no exceedances for 2018.

Background levels of PM are found to be higher in North West Leicestershire, Loughborough and Kegworth. Quarries and the airport considered as the cause.

There are also higher levels of NO₂, PM_{2.5} & PM₁₀ around the main road routes in the county; namely the M69, A42, A46, A6 and the M1.



2.3 Estimating the health burden of poor air quality in Leicestershire

Leicestershire has higher population densities in urban centres. There are pockets of high deprivation, measured using the Index of Multiple Deprivation (IMD) 2015, in areas of Loughborough, North West Leicestershire and Hinckley & Bosworth.

Additionally, there is deprivation around outdoor environment, measured using the specific IMD 2015 indicator, in Loughborough as well as the fringes of Leicester in Oadby and Wigston. The Loughborough Bell Foundry area falls into the lowest quintile nationally for both IMD 2015 as well as outdoor environment indicator. The Access Healthy Assets and Hazards tool demonstrates that Leicestershire is less conducive to health than the England average. All these findings are important because there is a known relationship between deprivation and burden of ill health due to poor air quality.

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

In Charnwood there are lower GP reported prevalence of hypertension. This was at odds with findings that cardiovascular disease rates are significantly higher in Leicestershire in comparison to England. This could suggest higher levels of undiagnosed disease in this area.

Whilst Leicestershire was found to have high GP reported rates of asthma and Chronic Obstructive Pulmonary Disease (COPD) but lower levels of respiratory infections than the England average, this finding was not observed for Charnwood. This gives rise to concern about gaps in the figures reported. This view is further confounded by significantly higher admission rates for COPD in urban centres, including within Loughborough.

10% of Leicestershire's working population is at risk from higher levels of air pollutants due to occupational exposure.

Leicestershire was found to have significantly lower walking and cycling rates for travel in comparison to England rates.

It is estimated that cases (per 100,000 population) attributable to the pollutants PM2.5 and NO2 will increase by 2035 in Leicestershire if no action or additional action on air quality is taken.

2.4 Estimating the mortality burden of poor air quality in Leicestershire

Air pollution is the biggest environmental hazard in terms of mortality.

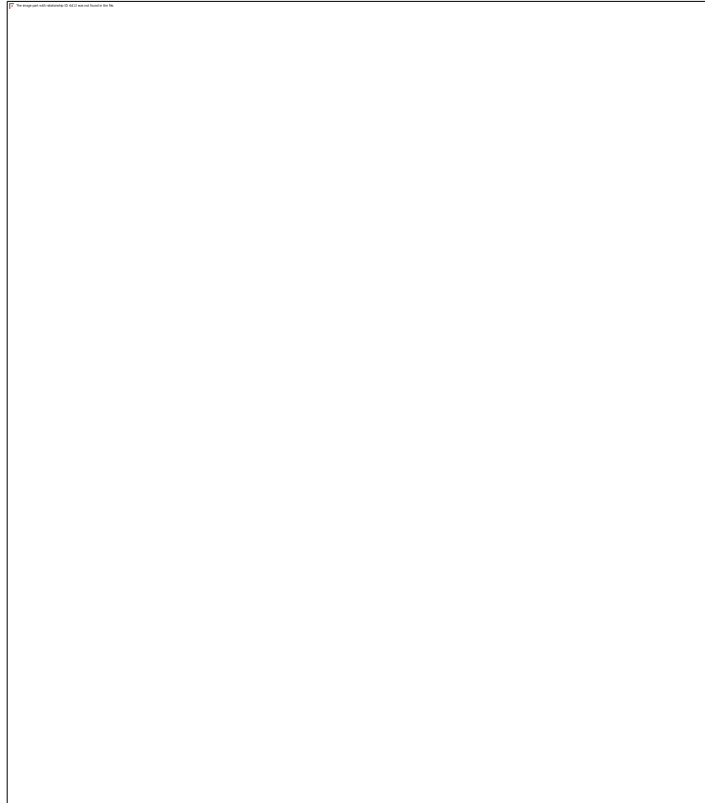
Preventable deaths due to PM2.5 is the 3rd leading cause of preventable deaths in Leicestershire and approximately 88 deaths in 2018 could be attributed to it.

3. Progress

3.1 Comprehensive assessment of need

Air quality and health related issues in Leicestershire have been appraised in detail and findings delivered as a Joint Strategic Needs Assessment (JSNA) chapter¹ - published in May 2019. Six objectives for improving air quality and health were determined. These are:

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)



- Clear leadership, vision and strategic direction
- Collaborative partnership working.
- Consideration of air quality and health in planning and development,
- Alignment of air quality and health with environment and transport decisions
- General communication with the public and organisations about air quality and health
- Targeted communication and campaigns with priority, groups and key organisations about air quality and health

3.2 Stakeholder engagement

To mark the publication of the JSNA chapter, LCC Public Health, Environment & Transport and communication teams delivered an active and sustainable travel campaign. This aimed to empower members and employees, of every level, to make sustainable or active travel choices in support of World Environment Day on 5th June and Clean Air Day on 20th June 2019. District Councils were invited to take part in this initiative. The campaign was reported to be well received by County Council employees.

Findings from the JSNA have been presented to the Leicestershire Health & Wellbeing Board. Lead authors were asked to develop a multiagency action plan for air quality and health which champions engagement of a wide range of stakeholders.

Findings from the JSNA, and next steps, have been presented at the District Council Chief Executives meeting, District Council scrutiny committees and the Environmental Health managers group.

A workshop session, attended by public sector strategic leads including NHS representatives, to build support and scope the focus of a multiagency partnership has been held. The content of this plan reflects the discussions in that meeting.

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)



LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

4. Vision for Air Quality and Health across Leicestershire

To improve air pollution in the county and reduce the impact of air pollution on the environment and human health, contributing to the reduction in health inequalities.

4.1 Aims

The key aims of the action plan are to:

- Reduce the impact of poor air quality on the health of residents, workers and visitors, and the environment.
- Raise public awareness of air quality, its impact on health and personal protection measures to promote sustainable behaviour change.
- Increase our understanding of the state of air quality in Leicestershire and the impact of measures to improve air quality.
- Meet and exceed statutory obligations and national targets on air quality.

4.2 Priorities for joint action

Priorities set out in the JSNA suggest key deliverables to achieve the vision and aims of the partnership action plan. It reflects the evidence base for what works to improve air quality related to particulate matter and nitrogen dioxide. In addition to this member of the multiagency partnership have agreed the following three priorities as the focus of collaborative action over the next 3 years:

A) Active and sustainable travel:

Switching journeys from cars to walking, cycling and public transport not only has a large beneficial impact on the individual's health, but a wider benefit to the population health as there are corresponding decreases in overall air pollution levels. There are also subsequent impacts in term of health improvement from increased activity levels. COVID 19 has created additional challenges to promoting public transport, but also created huge opportunities to develop walking and cycling infrastructure.

Public and private sector organisations as well as the public should be communicated with to support their understanding and uptake of active travel. This communications plan should focus on actions to support behaviour change to improve the uptake of active travel. This work should act as a catalyst for behaviour change and modal shift to green travel.

B) Planning and development strategies and proposals:

Measures to improve air quality are highly cost-effective when integrated into the planning and policy process. Planning and policy will be critical to providing an environment which promotes the uptake of active travel and ULEVs as an alternative to other options.

Guidance and frameworks should be developed with and for planners to support measures to improve air quality and identify and address developments which may worsen air quality. This should also look at how to promote investment in active travel and electric vehicle charging infrastructure and be part of a joined-up approach with other green infrastructure planning initiatives including the Building with Nature benchmark and low carbon construction - ensuring planning regulations require more sustainable building requirements to help reduce carbon emissions.

C) Information sharing and campaigns:

It has been acknowledged throughout the development process that relatively little is known about the views and understanding of the public in Leicestershire regarding air quality and health. It is important that we take steps to understand the public's views, knowledge, attitudes and motivations, in order that they can be engaged in developing actions which are aligned with their priorities.

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

These have been chosen as they are supported by evidence in recent NICEⁱⁱ and PHEⁱⁱⁱ guidance.

4.3 Challenges

Notwithstanding the aims outlined above it should also be recognised that there are several on-going challenges addressing air quality at a local level that need to be considered;

- the level of government funding available to tackle air quality issues is, in relative terms, small. The emphasis of most of the available government funding is instead on economic growth and housing delivery. These policies need to be influenced locally to address poor air quality.
- Leicestershire continues to be heavily trafficked in many areas, with additional traffic pressures likely to be brought about as a result of population and economic growth. Meeting these future housing and employment needs without increasing congestion and reducing air quality will need to consider locally
- Lack of national clarity on roles and responsibilities in two tier authorities such as Leicestershire.

4.3 Activities to deliver against our commitments by 2023

<i>JSNA objective</i>	<i>Focus area</i>	<i>Multiagency commitments</i>	<i>Partnership actions</i>
Clear leadership, vision and strategic direction	Consistent monitoring and measurement of air pollution across Leicestershire	Local authorities to work together through the LLR Air Quality forum and East Midlands Air Quality network.	Integrate action plans across the partnership and dedicate resources (where appropriate) to reduce harmful emissions and the impacts to public health from poor air quality
Collaborative partnership working	Planning and development strategies and proposals	<ul style="list-style-type: none"> - Consider the impact on air quality and health of all relevant organisational and cross Leicestershire strategies such as Transport plan - Integration of sustainability and health into local planning and design frameworks 	Resource to routinely deliver specialist public health support for strategic spatial planning, local area plan development and work on major developments will be formalised.
Consideration of air quality and health in planning and development		<ul style="list-style-type: none"> - Develop a joined-up process to ensure all appropriate planning and development proposals that have an impact on air quality are rigorously and systematically scrutinised - using Health Impact Assessments for major developments, and using a Health in All Policies approach to influence wider policies and plans 	<ul style="list-style-type: none"> - Air quality issues will be considered as part of planning policy as well as policies that influence strategic and local development plans - A programme to support local planners to consider the health impacts of planning proposals and urban re-development will be scoped, designed, delivered and evaluated - Public Health to formalise its commitment to provide support to Planning and Highways Authorities within the planning process - Consider areas for planting nitrogen dioxide reducing trees
Alignment of air quality and health with environment and transport decisions	Active and Sustainable Travel	<ul style="list-style-type: none"> - Prioritise investment in walking and cycling infrastructure to enable modal change, especially where this would encourage and facilitate active travel to 	<ul style="list-style-type: none"> - Opportunities to make the case for investment and obtain further funding for infrastructure that promotes the use of active travel and electric vehicles will be identified and optimised - Development of a Cycling and Walking Strategy for Leicestershire; which will set out LCC's overarching

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

		<p>schools (consider 20 mph zones) and workplaces in areas of high urban density</p> <ul style="list-style-type: none"> - Optimisation of green spaces to reduce people's exposure to poor air quality and encourage active and sustainable travel for air quality and health benefits 	<p>strategy for cycling and walking in Leicestershire, in support of meeting targets set out in the Government's Cycling and Walking Investment Strategy (CWIS) and LCC's Environment Strategy</p> <ul style="list-style-type: none"> - Planning and Highways Authorities should seek to consider a hierarchy of transport provision prioritising walking and cycling where appropriate - Consider air quality alerting systems in areas with poorer air quality - Look at the Council own fleet vehicles including grey fleet vehicles - Consider increasing secure cycle parking
		<ul style="list-style-type: none"> - Scale up activity to adopt sustainable and active travel solutions in Leicestershire. - Develop organisational travel plans, support staff to use sustainable forms of transport and promote active and sustainable travel by customers and the public. 	<ul style="list-style-type: none"> - A network of sustainable travel planners will be established. - Opportunities to promote active and sustainable travel of staff, customers and the public will be identified and optimised
<p>General communication with the public and organisations about air quality and health,</p>	<p>Information sharing, and behaviour change campaigns</p>	<ul style="list-style-type: none"> - Standardise communication with the public, professionals and other organisations on the short and long-term impacts on health of poor air quality - Alignment of public health messages across the partnership around air quality and active and sustainable travel choices - Increase knowledge about the prevalence of multi fuel stoves across Leicestershire and negative impacts on air quality and health. 	<ul style="list-style-type: none"> - Provision of clear and consistent messages about air quality and health across a range of communication channels - Key messages on air quality and health will be included on existing (relevant) partner branded information sheets, websites and other mediums - A series of behaviour change campaigns to promote active and sustainable travel, anti-idling, Clean Air Day and reduced multi fuel stove use will be scoped, designed, delivered and evaluated - Work with communities to understand the barriers to improving air quality in their areas.
<p>Targeted communication</p>		<ul style="list-style-type: none"> - Empower local people and 	<ul style="list-style-type: none"> - Information about air quality and health will be shared

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

<p>and campaigns with priority, groups and key organisations about air quality and health</p>		<p>businesses to take action to reduce their emissions.</p> <ul style="list-style-type: none"> - Clearer methods for engaging regularly with the public or organisations 	<p>with residents, local businesses, health organisations, local early year's settings, schools' colleges and universities in a variety of formats; as appropriate to the audience. This will explain how people and organisations can minimise emissions of pollutants and exposure to poor air quality</p> <ul style="list-style-type: none"> - A programme to support front line staff to deliver messages around air quality and health (as part of their daily roles) will be scoped, designed, delivered and evaluated.
---	--	---	--

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

5. Governance:

Existing air quality partnerships: Authorities across Leicester, Leicestershire and Rutland collectively contribute to the “LLR Air Quality Forum”, which was formed in the late 1990s. This provides the mechanism to collectively discuss and investigate potential initiatives to improve air quality as well as collaborate on areas of difficulty. This forum meets at least quarterly and is chaired by a Senior Environmental Health Officer from Blaby District Council. In recent years the active membership of the Forum has broadened to include PHE, the County Council’s Public Health Department, and Academics. A planning officer from one of the Borough Councils has started to attend the meetings. Additionally, the East Midlands Air Quality Network meets twice a year and seeks to improve understanding and consistency of approach across the Region.

Formalising ways of working together on air quality and health issues as a multiagency team is crucial to achieving success. The work of the multiagency partnership will be a standing item of the LLR Air Quality forum and updates delivered at least quarterly by DLs or their nominees. A progress report will be presented to the Leicestershire Unified Prevention board biannually by the chair or a nominated member of the Air Quality and Health Strategic Partnership Group (SPG); members of the board will be invited to scrutinise gaps and discuss any barriers to success.

A “round-up” of actions taken will be presented at the Leicestershire Health and Wellbeing board annually by the chair or a nominated member of the SPG; members of the board will be invited to scrutinise progress.

6. Resources

There are currently no new financial resources available to support the delivery of the action plan. Each partner organisation will be expected to contribute staff time and other in-house resources to support the activities and optimise existing resources to support multiagency action.

Members of the SPG are sufficiently senior to identify new resources, as and when they come available.

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

Acronyms and definitions

Acronym	Name
AQMA	Air Quality Management Area
COPD	Chronic Obstructive Pulmonary Disease
CNG	Compressed Natural Gas
DL	Deputy Lead
IMD 2015	Index of Multiple Deprivation, published in 2015
LAQM	Local Air Quality Management
JSNA	Joint Strategic Needs Assessment
LCC	Leicestershire County Council
LPG	Liquefied Petroleum Gas
LLR	Leicester, Leicestershire and Rutland
NICE	National Institute for Clinical Excellence
NMVOCs	Non-methane volatile organic compounds
NOx	Nitrogen oxides
NO2	Nitrogen dioxide
PH	Public Health
PHE	Public Health England
PM	Particulate Matter (number denotes size of particles)
SO2	Sulphur Dioxide
SPG	Strategic Partnership Group
SRO	Senior Responsible Officer

LOGOS TO BE ADDED- SUGGEST ALL DISTRICT COUNCILS, COUNTY COUNCIL AND LEICESTERSHIRE CCGS (ONCE AGREED)

ⁱ Leicestershire County Council (LCC). (2019). Leicestershire Joint Strategic Needs Assessment 2018-2021 Air Quality and Health Chapter. Available here: <http://www.lsr-online.org/uploads/jsna-air-quality-2019-v10-final.pdf>

ⁱⁱ National Institute of Clinical Excellence (NICE). (2017). Air Pollution- Outdoor Air Quality & Health (NG70). Available here: <https://www.nice.org.uk/guidance/ng70>

ⁱⁱⁱ Public Health England (PHE). (2019). Interventions to improve outdoor air quality and public health. Available here: <https://www.gov.uk/government/publications/improving-outdoor-air-quality-and-health-review-of-interventions>

This page is intentionally left blank

**MINUTE OF THE SCRUTINY COMMISSION DISCUSSION ON THE AIR
QUALITY AND HEALTH ACTION PLAN
2 SEPTEMBER 2020**

The Scrutiny Commission considered a report at its meeting on 2 September 2020 and the following points were raised:

- a. The priorities identified in the Joint Strategic Needs Assessment agreed by the Health and Wellbeing Board in May 2019 formed the basis of the actions now set out in the Action Plan. Members welcomed the Plan and recognised that both nationally and locally air pollution was the biggest environmental hazard in terms of mortality impacts.
- b. Members noted that the County Council had responsibility to deliver the Action Plan and sought to work with and influence partners including district councils as the local planning authority, to secure the outcomes identified within this. However, it was district councils that had responsibility to monitor and manage air quality and they had to balance this against the need to deliver increased housing numbers set by central government. Members raised concerns that no single body had oversight or control of the issue and that this hindered the ability for real action to be taken. A member suggested that an explanation of these conflicting issues and how disjointed the current set up was would be helpful to enable the public to understand the difficulties local authorities faced in addressing this issue.
- c. Members considered that air quality needed to be prioritised as part of the local plan process so that mitigation measures could be identified early. Growth was necessary to boost the local economy and provide housing. However, this often came at the cost of air quality and other environmental considerations. Partnership working would be critical. However, concern was raised that action by consent might no longer suffice and would not deliver the outcomes required quickly enough. Members suggested that the Plan could be strengthened in this area. It was also suggested that the County Council might need to be more direct and clearer about actions required to address air quality and should challenge district council local plans on this basis.
- d. It was noted that unlike on highway matters, the County Council was not a statutory consultee when it came to air quality. Whilst it had the ability to undertake modelling and the expertise to provide advice and support on this issue it was up to individual district councils to take up that offer. When provided it was also up to district councils what weight to apply to that data.
- e. Members agreed that air quality needed to be brought to the top of the agenda and district councils and developers brought on board. However, it was recognised that without support from central

government, it would be difficult for local planning authorities to give this the weight needed when deciding planning applications. Refusal of an application based on the adverse air quality impacts a development would likely be overturned on appeal based on current planning legislation.

- f. Members felt more monitoring is needed to be undertaken to give a true picture of the extent to which air quality was a problem across the County and to identify those key areas requiring action. Improved data would also support future decisions around where developments could and could not take place as part of the local plan process, or if planning applications were to be refused on the grounds of air quality impacts. Members commented, however, that district councils did not have enough resources to do this and would require further support to take this forward.
- g. Members welcomed work by the Strategic Planning Group to produce a health planning guide and hoped that this would help developers understand what was expected in respect of air quality measures as part of a development. However, it was not clear how this would address existing problems arising from existing or current developments.
- h. It was suggested that the data now presented for each district should be shared and publicised to drive the need for change.
- i. Concern was expressed that there was currently no member involvement in the development of the Plan or its delivery. The Director agreed and undertook to revisit the governance structure to ensure political oversight was properly reflected in the Plan.
- j. A member suggested that it would be helpful to understand what work was being done in surrounding areas including the City Council, which would likely impact the air quality position in some boundary areas, particularly those like Oadby and Wigston which had much higher levels of pollution than other parts of the County.



CABINET 20 OCTOBER 2020

**DEVELOPMENT OF A HEALTHY WEIGHT STRATEGY FOR
LEICESTERSHIRE**

REPORT OF THE DIRECTOR OF PUBLIC HEALTH

PART A

Purpose of the Report

1. The purpose of this report is to seek the Cabinet's approval to consult on the draft Healthy Weight Strategy for Leicestershire, appended to this report.

Recommendations

2. It is recommended that:
 - (a) The draft Healthy Weight Strategy, appended to the report, be agreed for consultation;
 - (b) A further report be presented to the Cabinet in spring 2021 regarding the outcome of the consultation and seeking approval for the revised draft Healthy Weight Strategy.

Reasons for Recommendation

3. The County Council has a statutory duty to take appropriate steps to improve the health of people living in Leicestershire. This includes creating the conditions necessary to support people to achieve a healthy weight.
4. With two thirds of adults and one third of children in Leicestershire being overweight or obese, it is important that action is taken to address this important issue. Public consultation and partner engagement will be crucial in developing an effective healthy weight strategy.

Timetable for Decisions (including Scrutiny)

5. The public consultation will run from the beginning of November until end of December 2020.
6. The draft Strategy will be presented to the Health Overview and Scrutiny Committee at its meeting on the 11 November 2020 and the Health and

Wellbeing Board at its meeting on 26 November 2020, as part of the consultation.

7. A report presenting the final draft for approval will be submitted to the Cabinet in Spring 2021. Subject to approval, the Strategy will be launched in April 2021.

Policy Framework and Previous Decisions

8. The Healthy Weight Strategy supports the Council's Strategic Plan 2018-2022 'Working Together for the Benefit of Everyone' regarding Wellbeing Opportunities. It will help Leicestershire's population lead healthier lives, reduce inequalities associated with health and increase healthy life expectancy.
9. The Leicestershire Joint Strategic Needs Assessment chapter on Obesity: Physical Activity, Healthy Weight and Nutrition was published in September 2019. One of the recommendations was to develop an obesity strategy for Leicestershire that adopts a whole systems approach across the life-course.
10. The Healthy Weight Strategy also forms part of the Leicestershire Food Plan which was approved by the Cabinet on the 18 December 2018.

Resource Implications

11. There are no additional resource implications arising from the recommendations in this report. Delivery of actions arising from the strategy will be met by existing budgets and action taken by partner organisations. Minor costs associated with the delivery of the consultation exercise will be met using existing budgets.
12. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the content of this report.

Circulation under the Local Issues Alert Procedure

13. None.

Officer(s) to Contact

Mike Sandys, Director of Public Health
 Tel: 0116 305 4259
 email: mike.sandys@leics.gov.uk

Elizabeth Orton, Consultant in Public Health
 Tel: 0116 305 5347
 email: elizabeth.orton@leics.gov.uk

PART B

Background

14. More than half (61%) of Leicestershire's adult population are overweight or obese and 30% of year 6 primary school children are overweight or obese. Being overweight and obesity is more common in socio-economically disadvantaged communities and is associated with many long-term conditions. There is also emerging evidence that people with a high body mass index are more at risk of developing complications of Covid-19.
15. The economic burden of overweight/obesity is significant across England. The NHS spends £6.1bn on obesity-related ill health, local government spends an estimated £0.35bn in social care costs and the cost to the wider UK economy is around £27bn.
16. There is considerable evidence that obesity is a complex issue that requires a complex system response. The draft Healthy Weight Strategy outlines a whole systems approach to tackling obesity and helping people maintain a healthy weight.

The Draft Healthy Weight Strategy

17. The draft Healthy Weight Strategy, which is appended to this report, will cover the whole of Leicestershire and will run over a 5-year period, from 2021-2026. It is divided into three themes and 5 objectives as follows:
 - i. Theme 1 addresses action that tackles the food environment that we live in and includes:
 - Strategic Objective 1: to improve the availability of healthy and sustainable food and drink in all sectors. For example, promoting the accreditation of food and catering business through 'Food For Life Served Here';
 - Strategic Objective 2: to support settings to prevent obesity and increase healthy weight across the life course. For example, through the Leicestershire Healthy Schools programme;
 - ii. Theme 2 addresses action that focuses on providing individuals with the information and support they need to manage their own weight and that of their families and includes
 - Strategic Objective 3: to co-ordinate a healthy weight pathway including prevention, self-management and supported weight management. For example, increasing uptake of the Leicestershire Weight Management Service;

- iii. Theme 3 addresses leadership by partner organisations (for example, the NHS and district councils) to ensure that the wider workforce is equipped to promote healthy weight and that policies are conducive to healthy weight and includes
- Strategic Objective 4: develop a workforce that is confident and competent talking about and promoting healthy weight. For example training more professionals in Making Every Contact Count;
 - Strategic Objective 5: lead partners and stakeholders in developing healthy weight policies using for example the Leicestershire Food plan partnership work.

Consultation

18. An 8-week public consultation will take place from the 2 November until the 27 December. This will include a series of targeted online focus groups with weight management service users and members of the Equalities Challenge Group and a public online questionnaire-based consultation, advertised through the Council's website and social media channels.
19. The Health Overview and Scrutiny Committee will consider a report at its meeting on 11 November 2020, as will the Health and Wellbeing Board on 26 November 2020, as part of the consultation.
20. Findings from the consultation will be used to inform the development of the final draft Strategy that will be presented to the Cabinet for approval in Spring 2021.

Equality and Human Rights Implications

21. An Equality and Human Rights Impact Assessment Group has been established and will run alongside the development of the Strategy. An Equality and Human Rights Impact Assessment (EHRIA) screening was undertaken and concluded that there are several positive impacts on protected characteristic groups including age, pregnancy and maternity, community cohesion and deprived communities.
22. However, there were three protected characteristics groups identified as having possible barriers to benefits from the Strategy:
- i. Disability: people with disabilities (including those with learning disabilities, dementia and cognitive impairment) may have additional communication needs. Adaptations may be needed to enable these groups to access services outlined in this strategy. This is particularly relevant given the high levels of obesity in those with learning disabilities. Physical disabilities may also limit people engaging in active travel.

- ii. Race and also religion or belief: people will be supported in this strategy regardless of race and religion or belief. However, culture/ethnicity-specific diets need to be considered. Barriers to accessing support and services may include language/communication difficulties and cultural acceptability. Some groups e.g. South Asian communities have a higher risk of diabetes and these additional needs require consideration. Additional interventions and considerations may be needed when engaging with some of our communities.
21. These are key areas of development for the Strategy and consultation will enable a better understanding of any potential barriers/disadvantages in these groups, help to identify ways to mitigate these, and strengthen support for these groups in the Strategy. A full EHRIA will also be completed during the development of the final Strategy.

Background Papers

Leicestershire County Council Strategic Plan 2018-22

<https://www.leicestershire.gov.uk/about-the-council/council-plans/the-strategic-plan>

Joint Strategic Needs Assessment 2018:21 Obesity: physical activity, healthy weight and nutrition.

<https://www.lsr-online.org/uploads/obesity-physical-activity-healthy-weight-and-nutrition.pdf?v=1568369427>

Leicestershire Good Food Plan and Good Food Leicestershire Charter

<http://politics.leics.gov.uk/documents/s143186/LCC%20Cabinet%20report%20Leicestershire%20Food%20Charter.pdf>

Appendix

Draft Healthy Weight Strategy 2021-26.

This page is intentionally left blank



Draft Healthy Weight Strategy for Leicestershire



Contents

Introduction	3
Why do we need a healthy weight strategy?	4
Why is it an issue?	4
Our vision	5
The local context	5
Outcomes	7
Delivery themes and strategic objectives	8
Delivery theme 1	
Promoting a healthy weight environment	9
Strategic objective 1	
Improve the awareness and availability of healthy and sustainable food and drink in all sectors	11
Strategic objective 2	
Support settings to prevent obesity and increase healthy weight in adults, children and families	12
Delivery theme 2	
Support for people to achieve a healthy weight	14
Strategic objective 3	
Co-ordinate healthy weight pathway including prevention, self-management and supported weight management	15
Delivery theme 3	
Prioritise healthy weight through systems leadership	16
Strategic objective 4	
Develop a workforce that is confident and competent talking about and promoting healthy weight	16
Strategic objective 5	
Working with partners and stakeholders to support the development of a whole systems approach to healthy weight	17
Appendices	18

Introduction

The 2021-2026 Healthy Weight Strategy sets our partnership priorities and approach to promote a healthy weight and tackle obesity in Leicestershire.

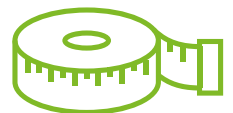
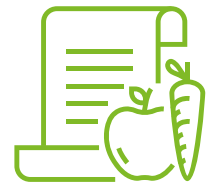
Obesity is a complex and multifaceted problem that requires coordinated, effective action to change the food, physical activity and social environments from 'obesogenic' to ones which promote a healthy weight. If we are going to take effective action to reverse obesity at population level, we need to work together with partners in a 'whole systems'¹ approach to create an environment that facilitates healthy choices and supports individuals to achieve and maintain a healthy weight.

This strategy builds on the Recommendations within the Leicestershire Joint Strategic Needs Assessment 2018-2021 Chapter on Obesity: Physical Activity, Healthy Weight & Nutrition.

The main focus will be on Healthy Weight and Nutrition whilst making the links to the Leicester-Shire & Rutland (LRS) Physical Activity and Sport Strategy 2017-2021, which sets out a long-term vision for **physical activity and sport** across Leicester, Leicestershire and Rutland and encompasses everything from supporting the least active residents to build **activity** into their everyday lives, through to the development of future Olympians, Paralympians and World Champions.

Maintaining a healthy weight has many benefits, including improved health related quality of life and reduced risk of health conditions including heart disease, stroke, type 2 diabetes, liver disease, and some cancers. However, most adults are above a healthy weight; it has become the social norm. Of significant concern is that 1 in 5 children start school above a healthy weight and this proportion rises to 1 in 3 at year 6 of Primary School. There are marked and growing health inequalities, with the prevalence of obesity in children in the most deprived parts of the country more than twice that in the least deprived. This has implications not just for health for employers and social care needs: each year, obesity and its related ill health costs the UK NHS £6.1bn: it also costs local government in England £0.35bn in social care costs and the wider UK economy £27bn.

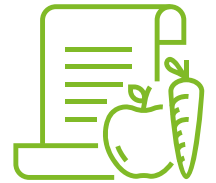
This Strategy document is a commitment to working together with a range of sectors, including food, health, education, planning, transport, sport and leisure, and economic development to support our communities to start, live and age well, and develop in a way which facilitates healthy behaviours and a healthy weight.



1 <https://www.gov.uk/government/publications/whole-systems-approach-to-obesity>

Why do we need a healthy weight strategy?

The prevalence of overweight and obesity in the UK has risen dramatically since 1993, and whilst the increase has slowed down since 2001, the trend is still upwards.



Nearly two-thirds of adults (62%) in England were classed as being overweight (a body mass index (BMI) of over 25) or obese (a BMI of over 30) in 2017/18.

In Leicestershire 60.6% of adults were either overweight or obese in 2017/18.



The prevalence of children in reception year who were either overweight or obese in 2018/19 was 22.6% for England and 19.6% for Leicestershire.



The figures for Year 6 pupils in 2018/19 was 34.3% for England and 30.0% for Leicestershire.²

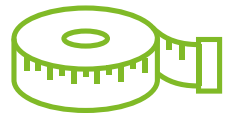
As deprivation increases the number of children at a healthy weight decreases, and the number of children measured as overweight or obese increases.

Physical inactivity and a sedentary lifestyle are also a primary contributor to an increase in prevalence of overweight and obesity in the UK

The physical activity data for both adults and children and young people in Leicestershire can be found in Appendix A

Why is it an issue?

- Poor diet contributes to nearly half of Coronary Heart Disease³
- Poor diet contributes to a third of all cancer deaths⁴
- Being overweight increases the risk of high blood pressure, high cholesterol and pre-diabetes⁵
- Severe obesity reduces life expectancy by 8-10 years⁶



2 https://fingertips.phe.org.uk/search/Obese%20Adults#page/0/gid/1/pat/6/par/E12000004_ati/102/are/E06000015

3 Yusuf,S.et al (2004) Effect of potentially modifiable risk factors associated with myocardial infarction in 52 countries (the INTERHEART study): case-control study. Lancet; 364: 937-52

4 Doll, R. Peto, R (1981) The causes of cancer: quantitative estimates of avoidable risks in cancer in the United States today. Journal of the National Cancer Institute; 66:1191-208

5 <http://webarchive.nationalarchives.gov.uk/20170110171057/> https://www.noo.org.uk/NOO_about_obesity/obesity_and_health/health_risk_child [accessed on 04/04/2018]

6 Dent M, Swanston D (2010) Briefing Note: Obesity and life expectancy



Our vision

“Our vision is a future where everyone in Leicestershire can eat well, be physically active and develop in a way which facilitates a healthy weight”.

We will work together with a range of sectors to make lasting changes to the food, physical activity and social environment to promote a healthy weight. Our aim is to increase the number of adults, children and families who are a healthy weight in Leicestershire by 2026.

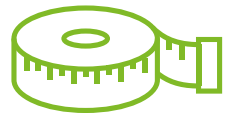
The local context

This strategy is closely aligned with the LRS Physical Activity & Sport Strategy 2017- 2021 for LLR⁷, the Leicestershire Food Plan⁸ the Leicestershire Corporate Strategy ‘Working together for the benefit of Everyone’, Leicestershire County Council’s Strategic Plan 2018- 2022⁹, the Leicester and Leicestershire Local Industrial Strategy¹⁰ and the Wellbeing@workprogramme, with integrated action plans to achieve our shared objectives.

Through a strong evidence base this strategy will tailor its approach to address the needs of the population and key stages where people are more at risk of obesity across the life course. Whilst recognising that there are people in all population groups who are not a healthy weight, this strategy will focus on areas in Leicestershire with the highest prevalence of childhood and adult obesity.

The LRS Physical Activity Strategy 2017-2021 vision is for LLR ‘to be the most physically active and sporting place in England, with 4 ambitions to ‘Get Active, Stay Active, Active Places and Active Economy’. It is also based on 4 foundations:

1. Well lead
2. Insight driven
3. Skilled and representative workforce
4. Effective marketing and communications.



7 <https://www.lrsport.org/uploads/lrs-physical-activity-sport-strategy-2017-2021.pdf>

8 <https://www.leicestershire.gov.uk/news/food-plan-firmly-on-the-table>

9 <https://www.leicestershire.gov.uk/sites/default/files/field/pdf/2019/6/27/LCC-Strategic-Plan-2018-22.pdf>

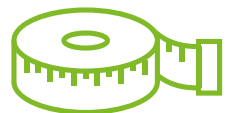
10 <https://www.llep.org.uk/strategies-and-plans/our-local-industrial-strategy/>

The Leicestershire Food Plan (see Appendix B) is part of the national Sustainable Food Cities (SFC) framework. It links to the Leicestershire Corporate Strategy – ‘Working together for the benefit of Everyone’ with areas of commonality across all five strategic outcomes

- Correct infrastructure enabling a healthy population for a Strong Economy
- Opportunities for children to get the best start in life, and reducing health inequalities through enhanced community Wellbeing and Opportunity associated with healthier environments and support to gain a healthy weight
- Families more able to maintain a healthy lifestyle in a self-sufficient way – keeping people safe
- Communities are more able to plan the future of their ‘healthy place’, taking greater control of the place of health within Great Communities including recognising the impact of obesogenic environments and seeking to change them
- ‘Health in all policies’ and ‘Healthy Partners, Healthy Place’ enable environments that encourage healthier habits in Affordable and Quality Homes through creating spaces where people can lead active lifestyles and participate in community food activities

This strategy links to the *Leicester and Leicestershire Local Industrial Strategy – A Healthy Climate for Growth* by linking mainly to the core theme of Healthy People – improving the quality of life and wellbeing of the population and supporting the need for improved public transport, promotion of cycling and walking (and associated infrastructure) and the need for more green space to encourage greater levels of activity. There is also the recognition that Healthy Businesses need a healthy workforce.

It also links to LLR wellbeing@workprogramme – which essentially is a workplace health needs assessment (sourced from *Public Health England & Healthy Working Futures (2017) ‘Workplace Health Needs Assessment’*) to identify key priority areas of employee health including healthy eating and physical activity. The results can be used to shape the development of a health and wellbeing action plan that employees’ value and feel is reflective of their needs.



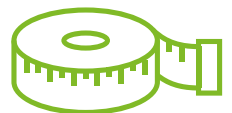
Outcomes

Monitoring of the prevalence of healthy weight in children and adults is a requirement of the national public health outcomes framework. The key performance indicators relevant to a healthy weight are:

- 2.02i – Breastfeeding initiation
- 2.02ii – Breastfeeding at 6-8 weeks
- 2.06i – Child excess weight in 4-5-year olds
- 2.06ii – Child excess weight in 10-11-year olds
- 2.11i – Proportion of the population meeting the recommended '5-a-day' on a 'usual' day
- 2.11ii – Average number of portions of fruit consumed daily at aged 15 years
- 2.11iii – Average number of portions of vegetables consumed daily (adults)
- 2.11iv – Proportion of the population meeting the recommended '5-a-day' at age 15
- 2.11v – Average number of portions of fruit consumed daily at age 15
- 2.11vi – Average number of portions of vegetables consumed daily at age 15
- 2.12 – percentage of adults (aged 18+) classed as overweight or obese - current method
- 2.12 – percentage of adults (aged 16+) classed as overweight or obese

Other information available to help form an overall picture of trends in the Leicestershire/UK population are -

- **Food Insecurity:** From 2019 the annual national Family Resources Survey (An annual report that provides facts and figures about the incomes and living circumstances of households and families in the UK) included 10 questions on Food Insecurity. These questions are detailed in Appendix C.
- **Physical Activity datasets from the Active Lives Survey:** Sport England run two surveys: Active Lives Adult, which is published twice a year and replaced the Active People Survey, and the world-leading Active Lives Children and Young People, which is published annually. Both give a unique and comprehensive view of how people are getting active. We have local Sport and Physical Activity datasets for adults and children across LLR taken from Sport England's Active Lives Survey, the most recent is from May 2018 - May 2019.

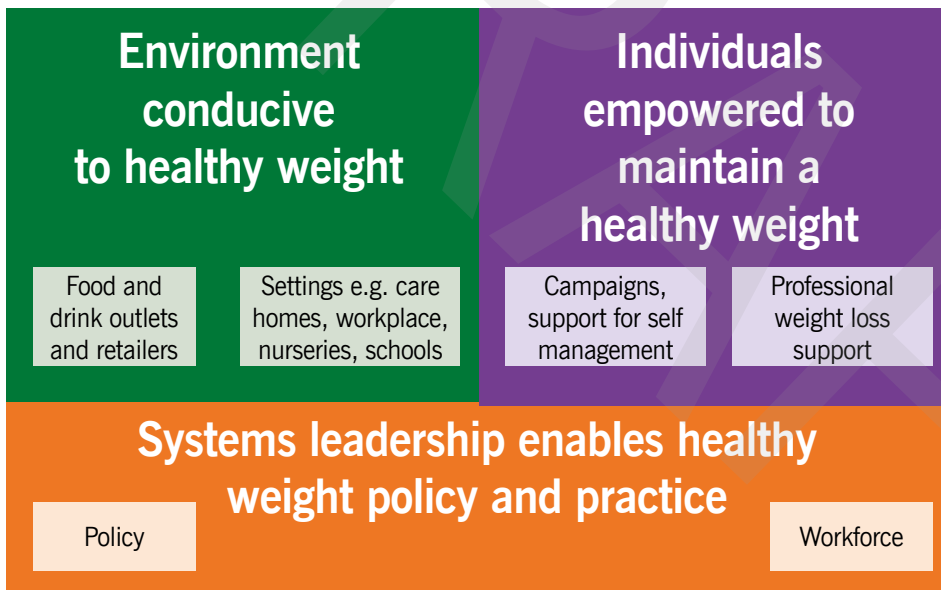
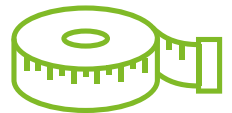


Delivery themes and strategic objectives

The Leicestershire healthy weight strategy is structured around 3 delivery themes. Each theme identifies objectives needed to achieve our vision.

Healthy weight delivery themes

- **Promoting a healthy weight environment**
Population approaches to improve the wider health environment to promote healthy weight (this is aligned to the Active Places strand of the LRS Physical Activity & Sport Strategy)
- **Supporting individuals to achieve and maintain a healthy weight**
Provision of weight management services across the life course to increase the number of people who are a healthy weight
- **Prioritising healthy weight through systems leadership**
Develop a workforce that is competent and confident to talk about and promoting healthy weight and working with partners to develop healthy weight policy



Delivery Theme 1

Promoting a Healthy Weight Environment

Why is it important for Leicestershire?

Obesogenic environment

We are living in an obesogenic environment, with an abundance of energy dense food, motorised transport and sedentary lifestyles¹¹

Out of home food outlets

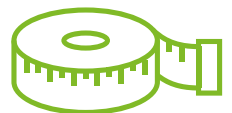
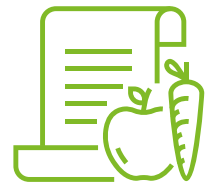
More than one quarter (27.1%) of adults and one fifth of children eat food from out of-home food outlets at least once a week. Meals consumed out of the home tend to be associated with bigger portion sizes and higher intakes of fat, sugar and salt¹²

Active Environments

As part of our drive to create an active environment, Active Design brings together the planning and considerations that should be made when designing the places and spaces we live in. It's about designing and adapting where we live to encourage activity in our everyday lives, making the active choice the easy choice.¹³

In 2018 there were 473 Fast Food Outlets in Leicestershire (from Food Standards Agency (FSA) Food Hygiene Rating Scheme (FHRS) data (31/12/2017 Snapshot and 02/07/2018 snapshot for Bury data))

There is a known association between the exposure to fast food outlets and food consumption, BMI and obesity. Obesity is also associated with decayed missing or filled teeth in children with links to poor diet and food poverty is associated with low consumption of fruit and vegetables and deficiencies in certain nutrients¹⁴.



11 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/296248/Obesity_and_environment_March2014.pdf

12 <https://publichealthmatters.blog.gov.uk/2017/03/31/healthmatters-obesity-and-the-food-environment/>

13 <https://www.sportengland.org/how-we-can-help/facilities-and-planning/design-and-cost-guidance/active-design>

14 Sustain (2016) Measuring household insecurity in the UK <https://www.sustainweb.org/resources/files/reports/MeasuringHouseholdFoodInsecurityintheUK.pdf>



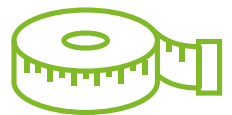
The healthy weight environment is a complex area of development work – it flows throughout many of the issues of Sustainable Food Cities and therefore the Leicestershire Food Plan. It encompasses many areas of work including –

- Enabling active travel
- Local planning – including advertising (amount of junk food advertising along with where the adverts appear), numbers of fast food outlets and lack of availability of healthy/fresh food (with commonly used terms Food Deserts and Food Swamps)
- Affordability of ‘good food’ as a viable and available alternative
- Information available to the public and campaigns (e.g. Sugar Smart)
- Encouraging food outlets to offer and promote healthier options
- Work with employers to encourage payment of the Living Wage (as determined by the Living Wage Foundation at £9.30/£10.75 in London, not the Government ‘National Living Wage’ at £8.72)
- Work with specific groups and backbone services e.g. schools, care homes and holiday clubs
- Skills and resources to help families to cook and eat healthily

Ultimately, many of the environmental aspects focus on how we can ‘manipulate’ a locality to try to stimulate behaviour change - an example being the ‘Refill’ movement – aiming to install free water refill stations in places where people visit so that they can keep hydrated, but also reduce their intake of sugary drinks (with the added benefit of reduced single use plastic bottles).

Some elements of this theme cross over with the work with partners in Strategic Objective 5 and will be delivered with them as part of designing and developing a healthier environment.

This theme also links to ‘Active Design’ which is a combination of 10 principles that promote activity, health and stronger communities through the way we design and build our towns and cities. Sport England, in partnership with Public Health England, have produced the Active Design Guidance which works as a step-by-step guide to implementing an active environment. This guidance builds on the original objectives of improving accessibility, enhancing amenity and increasing awareness, and sets out the 10 principles of Active Design, these are: activity for all neighbourhoods, walkable communities, connected walking & cycling routes, co-location of community facilities, network of multi-functional open space, high quality streets & spaces, appropriate infrastructure, active buildings, management maintenance and monitoring and evaluation, activity promotion and local champions.



Strategic Objective 1

Improve the awareness and availability of healthy and sustainable food and drink in all sectors

What are we doing now?

- Local organisations and key stakeholders are working together through the Leicestershire food Plan to develop multiple food hubs to tackle food poverty including access to affordable (surplus) food, training and resources as well as developing volunteer opportunities.
- In 2019 Leicestershire was successful in obtaining funding for a Holiday Activity and Food Programme – this programme enabled children qualifying for free school meals to access free places in summer holiday clubs including a nutritious meal helping with food insecurity
- Food for Life is commissioned in Leicestershire and works to increase the uptake of school meals – this has seen an increase in the number of children eating meals that conform to the national school food standard
- Leicestershire Traded Services distribute 35,000 meals a day to schools in the areas, they have recently been awarded Gold Food for Life Served Here for their menu meaning that school children are eating food with a greater nutritional content that comply with the Food Based & Nutrition based standards.

What else will we do?

Food retail and outlets

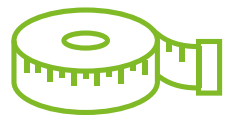
- Government Buying Standards – promotion for local food & catering businesses / increase number of establishments accredited through 'Food for Life Served Here'
- Regulation and licensing of fast food outlets (in conjunction with district and borough councils) especially close to schools, early year settings. We will also look at supporting outlets to offer/promote healthier options e.g. Healthier Options Takeaway (HOT) merit scheme in Nottinghamshire

Social and community food projects

- Promoting the production and availability of Quality food you can trust: More fresh, local, seasonal, sustainable food, with low climate impact and high welfare standards – we will find ways of increasing availability to communities.
- Eating together: More opportunities for social contact through food, building families, tackling loneliness, and bringing communities together.

Links with other plans and workstreams

- Continue to support the development of The Leicestershire Food Plan and playing an active role as part of our membership of the Sustainable Food Cities Network
- Work with our colleagues in the Transport team and across Leicester City Council to explore how we might limit junk food advertising



Strategic Objective 2

Support settings to prevent obesity and increase healthy weight in adults, children and families

What are we doing now?

- UNICEF Baby Friendly Initiative¹⁵: Stage 3 standards achieved: for Health Visiting Services (Leicestershire Partnership NHS Trust) University Hospitals of Leicester Maternity Services (Leicester General Hospital) and Baby Friendly University Programme at De Montfort University (Midwifery course)
- Food for Life Award¹⁶ – over 50% of schools in Leicestershire are participating in this whole school food and nutrition programme
- Leicestershire Healthy Schools Programme¹⁷– over 90% of schools are engaged with this programme and have achieved healthy school status by fulfilling the criteria for the 4 core themes including healthy eating/ food in schools and physical activity
- Leicestershire Healthy Tots Programme¹⁸ Many early year settings are participating in the healthy tots' programme and have achieved Healthy Tots status by fulfilling the criteria for the 3 core themes including healthy eating and physical activity
- Workplace Health Award¹⁹ LRS Wellbeing at Work- supporting workplaces to improve health and wellbeing at work
- Public Health England Clinical Champion Training: Upskilling health professionals such as midwives to increase their confidence of delivering physical activity messages
- Targeted physical activity campaigns and programmes
- Whole School approach to physical Activity
- Leicestershire Weight Management Service
- Inviting parents and grandparents to join pupils for school meals, raising awareness of pupil's food choices in school to replicate within the home
- Older people living in care homes joining children in for school meals, reducing isolation for the older generation and role modelling social dining for the children
- Parental support provided through education programme such as PEASS (Portion size, e numbers and additives, sugar and salt) that also includes Food for Life (FFL) Served Here and school food standards, this programme, (currently in development, led by FFL) will aid parents understanding of the level of food quality provided by Leicestershire Traded Services and the benefits of this on health and the environment

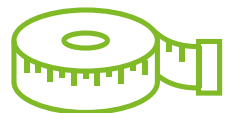
¹⁵ <https://www.unicef.org.uk/babyfriendly/accreditation/>

¹⁶ <https://www.foodforlife.org.uk/>

¹⁷ <https://www.leicestershirehealthyschools.org.uk/>

¹⁸ <https://www.leicestershirehealthytots.org.uk/>

¹⁹ <https://www.lrspport.org/wellbeingatwork>



What else we will do?

Maternity, children and young people settings

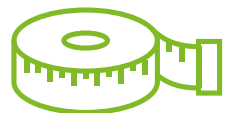
- Continue to promote accreditation to UNICEF's Baby Friendly Initiative
 - Gold Level for Health Visiting, Leicester General Hospital's Maternity Unit and De Montfort University – Midwifery course.
 - Support- Children & family Wellbeing Centres, UHL's Maternity Hospital and Neonatal Unit at Leicester Royal Infirmary site and De Montfort University Health Visiting course achieve stage 1,2, 3 standards
 - Undertake an Infant Feeding Health Needs Assessment and use this to inform the refresh of the LLR Infant Feeding Strategy and action plan
- Continue to support schools to renew their healthy school status and to achieve healthy schools plus by achieving meaningful outcomes regarding healthy weight
- Continue to support and recruit early year settings to renew and achieve Healthy Tots status
- Continue to recruit and support to the Food for Life Programme – to achieve bronze, silver and gold level awards
- Support schools to prepare and implement the healthy eating and physical activity component of the statutory Relationships Sex and Health Education commencing in September 2020.

Workplace setting

- See also recommendations from the JSNA and the [Leicester-shire and Rutland sport strategy](#)

Other settings

- Increase uptake of healthy start vouchers and explore coordinated mechanisms for using vouchers to access fruit and veg
- Social Prescribing - Fruit and Veg on prescription and other mechanisms for increasing access to Fruit and Veg
- Piloting approaches for community projects looking at access and support for people to use fresh healthy food
- Ensure that all health & care professionals are aware of the healthy weight initiatives are signposting and referring to services
- Identify actions needed within the adult social care sector to help with later life healthy weight



Delivery Theme 2

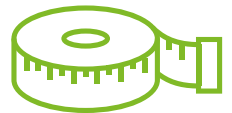
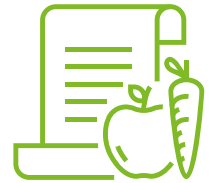
Support for People to achieve a Healthy Weight

Why is it important for Leicestershire?

Statistics for Leicestershire show that 61% of adults and 30% of year 6 primary school children are overweight or obese. Supporting people to achieve and maintain a healthy weight is an important part of the system approach and needs to support people who are underweight, overweight or obese. Different services are needed to support people in these different weight categories and need to be joined up between Public Health and CCG-commissioned programmes and pathways.

Indicators of importance to this theme include:

- % of pregnant women in Leicestershire who were classified as obese (Maternity HNA data)
- % of babies that are initially breastfed in Leicestershire
- % of babies in Leicestershire that are being breastfed at 6-8 weeks
- The prevalence of children in reception class in 2018/19 overweight/ obese
- The prevalence of children in year 6 in 2018/19 who were overweight or obese
- The % of adults in Leicestershire who are overweight or obese in 2018/19



Strategic Objective 3

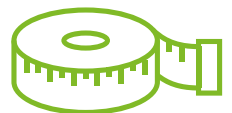
Co-ordinate healthy weight pathway including prevention, self-management and supported weight management

What are we doing now?

- Universal services – ante-natal programme – Bumps to Babies, advice on infant feeding (breast feeding/ formula feeding) advice on weaning/ introduction of solids/ portion sizes for very young children. Purposeful physical play. Cook & Eat/ Health for Under 5s/ Health for Kids/ Health for Teens
- Leicestershire weight management services- child and adult weight management services
- The Standard Operating Guidance for the 0-19 Healthy Child Programme includes a healthy weight care pathway
- Healthy Weight care pathway for adults and children
- Review of the current Healthy Weight Management service – JSNA chapter and recommendations
- Alignment to the new Physical Activity pathway – ensuring that everyone has access to physical activity at a place and appropriate level for them.

What more do we need to do?

- Work with CCGs to commission a specialist weight management service for adults
- Promotion of the Sugar Smart campaign²⁰ Sugar Smart is a campaign by food charity Sustain working with councils, businesses, institutions and other sectors to help reduce overconsumption of sugar in their local areas.
- Campaign for Real Food – to reduce the consumption of ultra-processed food and drinks. A healthy sustainable diet: Less processed food high in fat, sugar/ salt, less but better-quality meat, and MORE fruit and vegetables, whole grain and sustainable fish.
- Start 4 Life Change 4 Life
- Communications Plan-for the Leicestershire Healthy weight Strategy – increase self- referral
- Link into Good Food Leicestershire communications plan and events



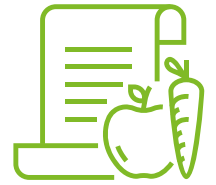
²⁰ <http://sustainablefoodcities.org/campaigns/2017sugarsmartuk.html>

Delivery theme 3

Prioritise healthy weight through systems leadership

Why is it important for Leicestershire?

Health & Care Professionals are in a unique position to talk to patients about their weight and evidence has shown that people respond well to professionals in relation to taking action around their weight. However if not done sensitively it can result in people feeling stigmatised or confused about where to access support. Leadership and professional support is an important part of the system strategy.



Strategic objective 4

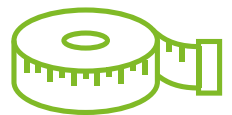
Develop a workforce that is confident and competent talking about and promoting healthy weight

What are we doing now?

- PHE Physical activity champions in UHL Maternity Services
- Making Every contact Count (MECC) – MECC lite and Healthy Conversations (MECC Plus) and Getting it Right First Time
- Face to face and e learning module for UHL Maternity Services staff / 0-19 Healthy Child Programme staff on healthy weight before/ during and post pregnancy
- NHS Health Checks
- Early years, Care workers physical activity training, upskilling of the community to lead physical activity sessions
- Work across care homes re nutrition guidance and training
- Link to workforce element of LRS Physical Activity & Sport Strategy

What else will we do?

- Expand MECC Lite / Healthy Conversations MECC Plus training on healthy weight
- Develop MECC E Learning modules on healthy weight (E Learning MECC Plus module being developed for healthy weight before/ during/ post pregnancy)
- Assess knowledge and practice gaps for planning officers – obesogenic environment/ Health impact assessments – new housing developments (access opportunity for active travel, healthy affordable food)
- Review, develop and evaluate healthy weight training for staff



Strategic Objective 5

Working with partners and stakeholders to support the development of a whole systems approach to healthy weight

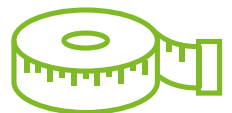
What are we doing now?

- Leicestershire Food Plan – the food plan is working on several different areas of the food system and with multiple partners. Our main areas of collaboration are within the Food and Drink Sector where we are developing with alongside Leicester City Council, the Leicester and Leicestershire Enterprise Partnership and the Food and Drink Forum; and on food production (particularly agriculture) alongside the GWCT and Brooksby Melton College. We are also working with specific community groups on several project areas, Melton and Harborough are supporting us to translate our food plan within communities. These areas of work aren't all related to Healthy Weight, but there are many cross-overs.
- LRS Physical Activity and Sport Strategy- vision is for LLR 'to be the most physically active and sporting place in England, with 4 ambitions to 'Get Active, Stay Active, Active Places and Active Economy'. It is also based on 4 foundations:
 - Well lead
 - Skilled and representative workforce
 - Insight driven
 - Effective marketing and communications

What else can we do?

- Develop a 'health in all policies' approach to review how healthy weight can be incorporated into existing strategies and policies, commissioning specifications and work areas to support and promote healthier weight environment
- Use a 'health equity' approach in developing healthy weight approaches, whereby support and services are proportionate to unmet need, and pathways and services are carefully considered to avoid inadvertently increasing health inequalities.
- Work with partners to develop a 'healthy partners, healthy place' approach to incorporate health considerations in planning decision making, considerations for economic growth and provision of green infrastructure.
- Work with partners to encourage paying of the Living Wage including investigating designation of Leicestershire as a Living Wage County (<https://www.livingwage.org.uk/living-wage-places>)
- Investigate the potential to work alongside Leicester City Council and the Leicester and Leicestershire Enterprise Partnership to align to the B Corp accreditation for companies in the area – this evaluates impact on workers, community, environment and customers.
- Food plan examples of best practice

Case study examples of how a whole systems approach to obesity has worked in other areas can be found in Appendix D.



Appendix A

Sport & Physical Activity levels for adults across LLR taken from Sport England's Active Lives Survey (May- 2018-May 2019)

May 2018-19	Active (150+ mins per week)	Fairly active (30-149 mins per week)	Inactive (> 30 mins per week)
Blaby	64.5%	13.1%	22.4%
Charnwood	63.1%	14.0%	22.9%
Harborough	64.7%	12.6%	22.7%
Hinckley and Bosworth	61.5%	13.5%	25.0%
Melton	66.4%	12.8%	20.8%
NW Leics	61.6%	13.2%	25.1%
Oadby and Wigston	59.2%	11.1%	29.7%
Leicester	61.7%	12.7%	25.6%
Rutland	65.1%	13.9%	21.0%
Leicestershire	63.0%	13.2%	23.9%
LLR	62.6%	13.1%	24.3%
England	63.2%	12.0%	24.8%

Sport & Physical Activity levels for Children & Young People in school years 1-11 across LLR Taken from Sport England's Active Lives Survey (May 2018- 2019)

May 2018-19	Active (average 60+ mins per day)	Fairly active (average 30-59 mins per day)	Inactive (average > 30 mins per day)
Blaby	*	*	*
Charnwood	48.7%	31.3%	20.1%
Harborough	56.9%	24.0%	19.1%
Hinckley and Bosworth	47.5%	27.0%	25.4%
Melton	52.4%	20.6%	27.0%
NW Leics	47.5%	22.5%	29.9%
Oadby and Wigston	*	*	*
Leicester	47.1%	22.5%	30.5%
Rutland	56.3%	23.7%	20.1%
Leicestershire	51.5%	24.2%	24.4%
LLR	51.0%	23.8%	25.2%
England	46.8%	24.2%	29.0%

*indicates numbers have been suppressed due to the small number of schools surveyed



PHE Fingertips data on Physically Active and Physically Inactive adults and physically active children & Young People in Leicestershire (including district/ Borough Council Percentages)

	Percentage of physically active adults	Percentage of physically inactive adults	Percentage of physically active children and young people
Period	2017/18	2017/18	2017/18
Blaby	62.5	23.9	*
Charnwood	64.2	22.9	48.7
Harborough	68.7	19.7	56.9
Hinckley and Bosworth	64.7	26.0	47.5
Melton	69.7	18.2	52.4
NW Leics	61.1	25.3	47.5
Oadby and Wigston	60.7	25.4	*
Leicestershire	64.3	23.3	51.5
England	66.3	22.2	46.8

Note: PHE do not include data for “fairly active” adults or for “fairly active/inactive” children and young people

*indicates numbers have been suppressed due to the small number of schools surveyed



Appendix B

Sustainable Food Cities Framework

Sustainable Food Cities is a framework managed by three national charities – Sustain, The Soil Association and Food Matters – Leicestershire is a member along with 56 other places.

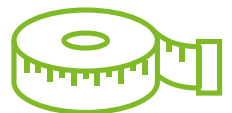
Sustainability is a very broad concept and is about direction of travel rather than reaching a specific destination. The Sustainable Food Cities framework is structured across six areas or key issues:

1. Promoting healthy and sustainable food to the public
2. Tackling food poverty, diet-related ill health and access to affordable healthy food
3. Building community food knowledge, skills, resources and projects
4. Promoting a vibrant and diverse sustainable food economy
5. Transforming catering and food procurement
6. Reducing waste and the ecological footprint of the food system

Appendix C

National Family Resources Survey

1. “We worried whether our food would run out before we got money to buy more.” Was that often, sometimes, or never true for you in the last 30 days?
2. “The food that we bought just didn’t last and we didn’t have money to get more.” Was that often, sometimes, or never true for you in the last 30 days?
3. “We couldn’t afford to eat balanced meals.” Was that often, sometimes, or never true for you in the last 30 days?
4. In the last 30 days, did you or other adults in the household ever cut the size of your meals or skip meals because there wasn’t enough money for food? (Yes/No)
5. (If yes to question 4) How often did this happen—almost every month, some months but not every month, or in only 1 or 2 months?
6. In the last 30 days, did you ever eat less than you felt you should because there wasn’t enough money for food? (Yes/No)
7. In the last 30 days, were you ever hungry, but didn’t eat, because there wasn’t enough money for food? (Yes/No)
8. In the last 30 days, did you lose weight because there wasn’t enough money for food? (Yes/No)
9. In the last 30 days did you or other adults in your household ever not eat for a whole day because there wasn’t enough money for food? (Yes/No)
10. (If yes to question 9) How often did this happen – almost every month, some months but not every month, or in only 1 or 2 months?



Appendix D

Case studies

Case Studies with Examples of whole systems projects working towards reduction and prevention of obesity

All these examples show working across multiple issues as well as multiple stakeholders and key with these is also leadership at various levels be it Sadiq Kahn (Major of London) or a GP in a practice.

Social Prescribing – Measham and Kindling Trust

A doctor's surgery in Measham has land available and is developing plans to incorporate fruit/vegetable planting on that land. It would be used as a social prescribing resourced managed through TCV (funding is currently being sought). This is a perfect combination of growing food (and therefore more likely to take pride in and eat the produce) and physical activity on land in a familiar setting. There will also be the opportunity to work with the audience to support with cooking skills.

In Greater Manchester the Kindling Trust works to support people with growing and accessing fresh fruit and veg. This funded project saw people receiving fruit and veg on prescription, along with support to grow and cook. https://kindling.org.uk/more_than_medicine_film

Transport for London Advertising ban on junk food

TFL recently banned junk food advertising on its assets – this was a big decision as TFL has one of the largest advertising assets in the world.

Campaigns

Healthy start vouchers, campaign to include measure of food poverty in national statistics, coca cola Christmas tour ban, refill water campaign.

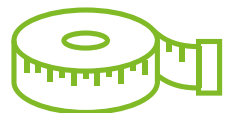
Various campaigns revolve around SFC and its partners including –

Healthy Start voucher campaign – supporting places to increase uptake in vouchers so that people in food poverty can access support.

A recent campaign called for national statistics to include asking people about food security – the government has committed to measuring household food insecurity following pressure from charities involved with SFC.

A campaign as part of Sugar Smart (an SFC campaign) which saw some places refusing permission to stop the coke truck on public land, and letters and protests at supermarkets allowing the truck to stop. There was also a spotlight shone on the fact that the truck was visiting areas with worse than average health problems relating to diet-related disease and some locations where 30% of the children have experienced tooth decay.

Linked to this, **Sugar Smart** has also looked at raising the profile of water as opposed to sugary drinks, and the need to offer free water in public places. Leicester are looking at this as part of their new Food Plan.



Vegpower in Leicestershire

Supporting schools with Veg Power packs. We will be providing finance for 50 schools in Leicestershire to have free resources to participate in the 202 Veg Power campaign. This will be coordinated with Food for Life and Leicestershire Traded Services so that national advertising (ITV, channel 4 and supermarket product advertising) links with vegetables used in school meals and this is then capitalised upon in school with use of resources.

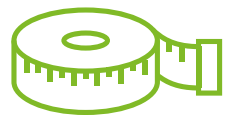
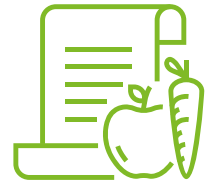
Blackburn & Darwin: training staff to help tackle weight issues in the early year settings, using 8 e-learning modules including: behaviour change techniques, unhealthy weight in early year settings, nutrition, physical activity and sedentary behaviour and culture.

Blackpool: Healthy food awards for local take away and restaurants, family-based weight management services, 'Giving Up Loving Pop' (GULP) campaign in secondary schools

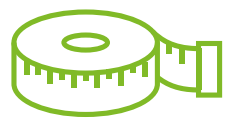
Soil Association's Out to Lunch campaign ranks children's food in 28 of the UKs most popular restaurants and supermarket cafes

Carlisle: Fruit & Veg snack van for communities (as an alternative to an ice-cream van)

Essex: School activities including Daily Mile, Let's Get Cooking, Active Heart lessons in schools



DRAFT







CABINET – 20 OCTOBER 2020

COMMUNITY SPEED ENFORCEMENT INITIATIVE

REPORT OF THE DIRECTOR OF ENVIRONMENT AND TRANSPORT

PART A

Purpose of the Report

1. The purpose of this report is to establish the County Council's formal position on the establishment of a Community Speed Enforcement Initiative following the trial of average speed cameras at seven locations in Leicestershire.

Recommendations

2. It is recommended that Cabinet:
 - (a) Notes the outcomes of the Community Speed Enforcement Initiative (average speed camera trial);
 - (b) Authorises the Director of Environment and Transport following consultation with the Cabinet Lead Member for Highways and Transport to:
 - i. Undertake all necessary work to implement an ongoing programme of community speed enforcement initiatives, including the introduction of new average speed camera sites in line with the criteria set out in paragraphs 56 of this report and associated consultation with local communities;
 - ii. Continue to work through the existing Leicester, Leicestershire and Rutland Road Safety Partnership (LLRRSP) and associated Memorandum of Understanding to finalise the operational details and manage enforcement for average speed cameras;
 - iii. Continue to lobby HM Treasury on behalf of the County Council regarding the reinvestment of revenue generated from speeding offences into the Community Speed Enforcement Initiative (CSEI) and advise all members on the outcome of this activity;
 - (c) Notes that funding of the programme will be identified and managed through the annual Highways and Transportation Capital Programme and Works Programme.

Reason for Recommendations

3. The results of the CSEI trial show that average speed cameras have had a positive impact in reducing vehicle speed. The recommendations will facilitate the introduction of a new CSEI that incorporates the experience gained through the trial and will provide an appropriate framework to identify and deliver new sites using a consistent and evidenced based approach.
4. Speeding offences are enforced by the Police. The LLRRSP manages speed camera programme with enforcement being undertaken by Leicestershire Police in Leicester, Leicestershire and Rutland and a successful role out of community average speed camera enforcement initiatives is therefore dependent on the partnership.
5. Changes to the rules regarding retention of revenue generated from speeding offences would mean Local Authorities could have a sustainable source of funding to maintain a programme of CSEI.

Timetable for Decisions (including Scrutiny)

6. Should the Cabinet approve the recommendations above will begin with LLRRSP immediately to identify potential new sites, assess them fully against the proposed implementation criteria and then procure equipment and make arrangements for enforcement as required.
7. The Environment and Transport Overview and Scrutiny Committee will be informed of the outcomes of the trial and proposed approach for continuing to address community speed concerns at its meeting on 5th November 2020. Any comments received will be considered by the Director of Environment and Transport to help in the delivery of the initiatives.

Policy Framework and Previous Decisions

8. In February 2017 the Cabinet considered a report on the Council's proposed approach to community speed cameras and inter alia agreed to write to the Department for Transport (DfT) on the matter and to campaign for a change to national policy guidance. In the meantime, the Director of Environment and Transport was authorised to develop trial schemes and local criteria for a local safety camera scheme.
9. On 10 March 2017, the Cabinet resolved to fund a Community Speed Enforcement initiative at seven trial sites throughout Leicestershire, using average speed cameras at a cost (from 2016/17 underspends) of £500,000.
10. In approving the trial consideration was given to:
 - i. 'Road Casualty Reduction in Leicestershire and Future Approach to Casualty Reduction' report, which was considered by the Environment and Transport Overview and Scrutiny Committee on 12 September 2016.

- ii. The Government's policy for safety cameras (Department for Transport, Handbook of Rules and Guidance for the National Safety Camera Programme for England and Wales for 2006/07).
- iii. The Government's guidance on the use of speed and red light cameras for traffic enforcement: guidance on deployment, visibility and signing (DfT Circular 01/2007).

Resource Implications

11. The staff costs of £50,000 per annum have been informed by the trial. Maintaining all 14 sites is expected to cost £110,000. To ensure all communities within the criteria can benefit sites will need to be relocated. This will cost £245,000 based on an estimated cost of £35,000 per site and assuming 7 sites will be moved yearly.
12. Whilst there is a revenue budget of £55,000 to fund on-going maintenance of the existing 7 sites, the ongoing revenue budget for additional sites will need to be managed as part of the existing maintenance programme in future years.
13. In addition to revenue, Capital investment will be required to implement each new site where average speed cameras are installed. This is estimated to cost £420,000 based on an average cost of £60,000 per site for 7 additional sites. It is proposed that the number of sites that could be installed per year will be limited to ensure there is adequate resource to carry out full consultation and scheme development when identified.
14. A Capital allocation of £600,000 has been assigned from the additional £7.3m Highways budget in 2020/21. Given funding will not be required until 2021/22 the budget will need to be carried forward into the new financial year.
15. In those instances where communities do not have any traffic management solutions already in place, all reasonable measures will be considered before cameras are installed. At present funding for these measures will be managed from the highways and transport capital programme.
16. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the content of this report.

Circulation under the Local Issues Alert Procedure

17. This report will be circulated to all Members of the County Council.

Officers to Contact

Ann Carruthers – Director
Environment and Transport
Tel: (0116) 305 7000
Email: ann.carruthers@leics.gov.uk

Ian Vears – Assistant Director
Environment and Transport
Tel: (0116) 305 7966
Email: ian.vears@leics.gov.uk

PART B

Background

Community Speed Camera Trial Overview

18. Communities often contact the Council to report concerns over speeding of vehicles and safety for local people. Previously, the Council's approach, in line with many other authorities was to adopt a strict interpretation of national guidance (DfT Circular 01/2007) that would only allow enforcement cameras to be installed at sites with a serious accident record and where speeds commonly significantly exceeded the speed limit. As a result, the Council has often been unable to offer assistance in the form of enforcement cameras to communities expressing concerns about speeding and safety.
19. In acknowledgment of the considerable community concern a Cabinet considered a report in February 2017 setting out the relevant issues including the Authority's position that community concerns could be better met if revenue generated from fines could be retained locally rather than at central government level.
20. The Cabinet resolved to write to the Department for Transport (DfT) on the matter and, if necessary, to continue to campaign for a change to national policy guidance on safety cameras seeking new criteria for identifying suitable locations for installation of safety cameras and agreement to the proposal that local authorities retain fine income to fund camera installation costs.
21. The Cabinet agreed to seek support from the LLRRSP and in the meantime authorised the Director of Environment and Transport to develop trial schemes and local criteria for the use of safety cameras.
22. Building on this, and following dialogue with the DfT on 10 March 2017, the Cabinet resolved to fund a CSEI at seven trial sites throughout Leicestershire, on the basis of a wider interpretation of the guidance. The approach used average speed cameras at a cost of £500,000.
23. This new approach was to introduce average speed cameras in locations where speed data showed that the level of speeds in communities were excessive and where significant local concern had been expressed about speeding traffic. This would allow the Police to use average speed cameras to enforce speed limits at the Council's request, irrespective of the casualty record at the locations.

Role of the LLRRSP

24. The existing Safety Camera Scheme is directly managed by Leicestershire Police. It forms an integral part of the Leicester, Leicestershire and Rutland Road Safety Partnership (LLRRSP), which consists of the following organisations
 - Leicestershire County Council
 - Leicester City Council
 - Rutland Council

- Leicestershire Police
- Leicestershire Fire and Rescue Service
- Highways England
- Leicestershire Magistrates' Courts
- Public Health.

25. The LLRRSP has a history of excellent partnership working to deliver initiatives to support the safety of all road users. Positive engagement leading to strong relationships with communities and are an important part of all the member organisations' objectives.
26. The LLRRSP agreed to undertake enforcement activities to support the schemes on a trial basis. As a member of the partnership Leicestershire Police raised the issue that this would require enforcement of sites that do not meet the usual criteria for installation of cameras and may cause potential conflict in terms of use of resources. It was agreed that this would be monitored by the LLRRSP Board and consideration of the issue would be included in the trial evaluation.

Site Development

27. Seven sites were chosen for the trial, one in every district of the County. The sites were chosen to represent three different types of location:
- 1) Village sites (where a speeding problem exists, and the community has expressed concerns).
 - 2) Rural route sites (where there is a higher than national average accident rate and where a reduced speed limit and effective enforcement will reduce the rate).
 - 3) Key arterial route sites (to develop a corridor approach to enforce the speed limit and to provide such information as average speeds and journey times).
28. The table below indicates the proposed trial sites and the rationale for their choice:

Site	Category	Rationale
Sharnford (Blaby)	Village	A rural village with a longstanding community concerns, an LLRRSP site with mean speeds downhill of 31.2mph and 85 percentile speeds downhill of 35.9 mph in a 30mph limit.
Woodhouse Eaves (Charnwood)	Village	A rural village with a longstanding issue and community concerns, with mean speeds of 32.9 mph and 85 percentile speeds of 41.4 mph in a 30mph limit.
Measham (North West Leicestershire)	Village	A rural village with a long-standing issue and community concerns, an LLRRSP community concern site and a community speed watch site with mean speeds of 42.8 mph and 85 percentile speeds of 50 mph in the 30mph limit.

Walcote (Harborough)	Village	A rural village with a long-standing issue and community concerns, an LLRRSP community concern site with mean speeds of 35.4 mph and 85percentile speeds of 39 mph in a 30 mph limit.
B676 Melton to County boundary (Melton)	Rural Route	A low standard rural route with an accident rate of between 357 and 390 accidents per billion vehicle kilometres compared to a national average accident rate for rural roads of 267 accidents per billion vehicle kilometres. Proposals for a reduction in speed limit from National Speed Limit to 50mph currently being considered.
A6 Harborough Road, Oadby (Oadby and Wigston)	Major Arterial Route	A key arterial route providing access into the Principal Urban Area (PUA) and forming part of the Council's Major Route Network. Carries in excess of 19,500 vehicles per day with over 800 vehicles per day exceeding 50mph in a 30mph limit.
A50 Field Head to City boundary (Hinckley and Bosworth)	Major Arterial Route	A key arterial route providing access into the PUA and forming part of the Council's Major Route Network. Carries in excess of 25000 vehicles per day. Speed limit due to be reduced in April 2017 and requests for average speed cameras received during consultation.

29. Following approval from the Cabinet, officers met with parishes and local representatives of the seven trial sites to explain the basis of the trial and agree the details for installation.
30. A detailed tender and procurement process was undertaken and Jenoptik Traffic Solutions UK (Jenoptik) was appointed to supply the equipment for the trial.
31. Once the site extents had been agreed a significant amount of preparatory work was required. This was undertaken by the County Council in conjunction with Jenoptik and included detailed site design, signing requirements and electrical and structural testing of the street furniture to be used to attach the camera.
32. Equipment calibration also had to be undertaken before the sites could become operational. It was also necessary to co-ordinate with the Leicestershire Police to ensure adequate enforcement capability was available.
33. As this was the first time the County Council had undertaken such a scheme, an estimated programme was developed taking into account the activities set out above. The extensive amount of preparatory work for each aspect of the trial took longer than expected resulting in a delay to the start dates, which were as follows:

- 15 September 2018 - Sharnford, Measham and Walcote
- 2 November 2018 - Groby and Oadby
- 10 January 2019 - Woodhouse Eaves
- August/September 2019 - B676 Freeby (delayed due to complex power issues).

Data from the Trial

Traffic speeds

34. In order to establish a base data set, and support analysis of the trial, 'before' surveys were carried out at all locations during May 2017. The data collection exercise was extended to additional roads where communities had also raised concerns
35. This data was then used to establish the locations for the average speed cameras in consultation with the local parish and district council.
36. Further data on traffic speeds has been collected at regular intervals during the trial at all sites that are operational to judge the effect on speeds of having the cameras in place.
37. Speed data was collected when the signs were installed, when the cameras were installed, and at various times during the operational period of the sites.
38. A summary of the speed data by location is detailed in the table below.

<u>Location</u>	<u>Speed Limit</u>	<u>Direction</u>	Average Daily Total 2019 (ADT)	Before		During		After	
				85th %ile	Mean Speed	85th %ile	Mean Speed	85th %ile	Mean Speed
Sharnford Opp The Bricklayers PH	30	Northeastbound	4362	30.2	27.2	28.5	25.4	28.7	25.8
		Southwestbound	4004	29.4	25.9	29.1	25.3	27.7	24.3
		Combined		29.9	26.6	28.8	25.4	28.3	25.1
Beacon Road, Woodhouse Eaves	40	Eastbound	3566	41	35.7	35.7	29.2	36.9	29.7
		Westbound	3354	38.1	32.3	35	27.3	34.4	26.9
		Combined		39.9	34	35.5	28.3	36	28.4
Burton Road, Measham	30	Southeastbound	1647	45.8	38.3	43.2	35.9	30.9	28.2
		Northwestbound	1506	45.5	38.6	43.4	36.7	31.1	28.1
		Combined		45.5	38.4	43.4	36.3	31	28.1
A4304 Lutterworth Road, Walcote	30	Eastbound	5138	32.2	27.9	32.2	28	29.1	26
		Westbound	5135	34	28.8	33.1	28	29.5	25.8
		Combined		33.1	28.4	32.7	28	29.3	25.9
B676 Saxby Road, Freeby	50	Eastbound	2256	59.8	52.9	49.7	43.7	50.9	46.5
		Westbound	2331	57.5	51	49.2	42.2	52	47.3
		Combined		58.7	52	49.4	43	51.4	46.9
A6, Oadby	40	Northwestbound	11343	38.8	29.6	36.1	26.8	33.5	24.7
		Southeastbound	11733	41.6	35.7	40.9	34.9	37.8	32.9
		Combined		40.2	32.7	38.5	30.9	35.7	28.8
A50 Bradgate Hill, Groby	40	Northwestbound	13812	52.3	44.6	53.3	45.4	44	39.5
		Southeastbound	14487	52.6	45.1	53.2	45.6	43.6	39.3
		Combined		52.4	44.9	53.3	45.5	43.8	39.4

Enforcement activity

39. In Leicestershire enforcement activity is managed by Leicestershire Police in line with the memorandum of understanding that underpins the LLRRSP. A key principle of the memorandum is that the Police have ultimate operational control of enforcement resource.
40. Enforcement activity at all seven sites in the trial has been on a 'dynamic enforcement' basis, i.e. whilst the cameras are continuously 'switched on' enforcement activity was limited to a few sites at any one time. This is national common practice and is based on the ability of the Police to enforce. All seven sites operated on an equal basis for the duration of the trial.
41. Enforcement of the speed limit at each of the trial sites resulted in a number of penalty notices being issued and also offers of Driver Education Workshops places being made. These aspects have been monitored on a regular basis throughout the operation of the trial.

42. Offences are categorised into three distinct classifications, those where the drivers are offered a Driver Education Work Course, those where they receive a Fixed Penalty Notice, and those where the driver is summoned to attend court. The speed threshold is as detailed in the table below:

Limit	Device tolerance	Fixed Penalty when education is not appropriate	Speed Awareness if appropriate		Summons in all other cases and above
			From	To	
20 mph	22 mph	24 mph	24 mph	31 mph	35 mph
30 mph	32 mph	35 mph	35 mph	42 mph	50 mph
40 mph	42 mph	46 mph	46 mph	53 mph	66 mph
50 mph	52 mph	57 mph	57 mph	64 mph	76 mph
60 mph	62 mph	68 mph	68 mph	75 mph	86 mph
70 mph	73 mph	79 mph	79 mph	86 mph	96 mph

All speeds identified above are those shown on the speed device, speedometer or other detection devices

43. Since the cameras have been operational just over 17 million vehicles have passed sites in Sharnford, Walcote, Measham, Oadby, Woodhouse Eaves and Groby, with 0.09% of those vehicle owners - 15,300 - issued with notices.
44. A summary of the total offences by site since the cameras went live is detailed by site, by direction in the table below.

Site Per Direction	Type of Offence			All Offences
	Speed Awareness	Conditional Offer	Court	
B4114 Sharnford NE	270	3	0	273
B4114 Sharnford NW	42	0	0	42
Woodhouse East	154	6	1	161
Woodhouse West	74	2	0	76
Measham East	3151	434	40	3625
Measham West	4217	679	79	4975
Walcote East	2371	127	7	2505
Walcote West	2840	155	12	3007
B676 East	47	2	0	49
B676 West	78	0	0	78
A6 North	45	3	0	48
A6 South	241	27	1	269
A50 North	2895	183	1	3079
A50 South	1566	65	5	1636

45. Whilst all offences are processed by Leicestershire Police not all Driver Education Workshop (DEW) Courses are completed in Leicestershire, meaning that not all

income from DEW will be received in Leicestershire. Therefore, there can be no straight-line correlation on income received through the DEW.

46. It should be noted that from the time of the offence to completing a course is estimated at 12 weeks.
47. The table below details the current percentage of those offenders completing courses within Leicestershire and those going elsewhere to complete a Driver Education Workshop:

	Leicestershire	Other	Total
B4114 SHARNFORD NORTHEASTBOUND	47.8	52.2	100
B4114 SHARNFORD SOUTHWESTBOUND	43.5	56.5	100
BEACON ROAD, WOODHOUSE EAVES NORTHEASTBOUND	81.8	18.2	100
BEACON ROAD, WOODHOUSE EAVES SOUTHWESTBOUND	94.4	5.6	100
BURTON ROAD, MEASHAM EASTBOUND	42.5	57.5	100
BURTON ROAD, MEASHAM WESTBOUND	48.6	51.4	100
A4304 LUTTERWORTH ROAD, WALCOTE EASTBOUND	46.4	53.6	100
A4304 LUTTERWORTH ROAD, WALCOTE WESTBOUND	44.8	55.2	100
A6 OADBY NORTHBOUND	90	10	100
A6 OADBY SOUTHBOUND	78.3	21.7	100
A50 BRADGATE HILL, GROBY NORTHWESTBOUND	74.5	25.5	100
A50 BRADGATE HILL, GROBY SOUTHEASTBOUND	58.3	41.7	100
Total	52.2	47.8	100

Air Quality and Noise Pollution

48. Data on air and noise pollution have been collected at regular intervals during the trial. This has been used to help identify any impact the installation of average speed cameras can have in managing air and noise pollution for communities. A report on Air Quality is also on the agenda for this Cabinet meeting.
49. Road vehicles are the main source of air pollution in the most populated urban environments, with pollutants that have the greatest health impacts. The government has identified that the most immediate and urgent air quality challenge faced by local authorities is to tackle the problem of nitrogen dioxide (NO₂) concentrations around roads, as road transport is responsible for approximately 80% of roadside NO₂ concentrations.
50. In July 2017, Defra and the DfT's Joint Air Quality Unit (JAQU) published its plan for tackling air quality: *Air Quality Plan for tackling roadside nitrogen dioxide (NO₂)*. The Plan set out actions to bring NO₂ air pollution within statutory limits in the shortest possible time.
51. Whilst none of the average speed camera sites are considered to have an air quality issue in line with national guidance the data does show that the 'smoothing out' (travelling at more consistent speed) of traffic speeds does have a positive effect on NO₂ levels, as shown in this table:

Location	Before	Signs Installed	During
	µg NO ₂	µg NO ₂	µg NO ₂
B4114, Sharnford	0.48	0.58	0.38
Beacon Road, Woodhouse Eaves	0.4	0.36	0.24
Burton Road, Measham	0.55	0.39	0.34
A4304 Lutterworth Road, Walcote	0.46	0.53	0.23
B676 Saxby Road, Freeby	0.34	0.27	N/A
A6, Oadby	0.52	0.68	0.33
A50 Bradgate Hill, Groby	0.51	0.56	0.34

52. None of the average speed camera sites are considered to have noise issue and the data indicates a minimal change in noise data in some communities but this is not significant, as shown in the table below:

Location	Before	After
	LAEQ,16hr	LAEQ,16hr
B4114, Sharnford	72.2	77.2
Beacon Road, Woodhouse Eaves	72.9	71.3
Burton Road, Measham	69.8	64.6
A4304 Lutterworth Road, Walcote	74.5	78.3
B676 Saxby Road, Freeby	74.6	74.0
A6, Oadby	70.7	71.6
A50 Bradgate Hill, Groby	75.8	74.3

Police Community Concern Sites

53. In June 2019 the Police introduced 'community concern sites' as a category of site that does not have an accident record. These sites traditionally would not meet the criteria for Core Mobile or Static speed enforcement by the Safety Camera Team within Leicester, Leicestershire and Rutland.
54. Broadly a Police community concern site is a site where 50% of all speeds are over the National Police and Crime Commissioner (NPCC) threshold. Sites identified as a 'community concern site' can be visited at least once every 6 weeks as detailed in the Police's Enforcement Strategy for mobile speed enforcement under the community concern category.

Proposals

55. Based on the experience of the trial, DfT guidance and liaison with the LLRRSP, LCC proposes to introduce a programme of community speed enforcement to deliver appropriate measures to reduce speed in communities as set out below.

56. Before being considered as a suitable location for installation of average speed cameras, the following criteria must be satisfied:
- i. Communities must have a speeding issue which meets the new police community concern site criteria of 50% of all traffic above the NPCC threshold. (There may already be an identified accident issue.)
 - ii. The location will be reviewed by the County Council and the Police to establish if the speed limit is appropriate in line with DfT guidance, with the understanding that some speed limits may change, rather than enforcement initiatives being installed.
 - iii. Communities, in liaison with the County Council, must explore and exhaust all other appropriate options for reducing speed (such as Gateway treatments, Community Speed Watch, Vehicle Activated Signs, mobile Vehicle Activated Signs) before installation of speed cameras is considered.
 - iv. Local Community representatives are in agreement.
 - v. It must be possible to install the necessary cameras and equipment on site at a reasonable and proportionate cost to the County Council.
 - vi. It can be demonstrated that there are no other options for managing speed within the community. (The general principle is that speed cameras should be a last resort solution, not the first.)
57. It should be noted that the proposed criteria mean cameras will not be installed in communities with a perceived speed problem i.e. data confirms that less than 50% of traffic exceeds the NPPC threshold.
58. The above criteria will ensure:
- i. an evidence based consistent approach
 - ii. proactive engagement by communities who have tried to resolve the issue by participating in schemes to help change driver behaviour
 - iii. all other traffic management techniques have been explored/implemented
 - iv. the speed limit is appropriate for the environment
 - v. consistency across responsible organisations
 - vi. that officers can manage resources appropriately within the initiative.
59. Subject to the Cabinet's agreement to these proposals, officers will arrange to update the identified list of potential sites using new data, subject to the criteria above, in the New Year. It is intended that consultation with local communities on the proposed locations for the cameras will take place from Spring 2021 onwards. The first 12 months of the programme will be focussed on identifying alternative options to managing speed and working through the criteria to ascertain which sites suitable for alternative interventions and those suitable for average speed cameras. These elements will form the programme for the scheme ongoing.
60. From this work a rolling programme of sites will be identified and average speed camera assets will be moved around the County in line with the updated programme. The programme will be developed in spring 2021 as data is collated and the criteria

are worked through for potential sites. This process will be repeated annually to include any new sites put forward for consideration.

61. Operational enforcement will continue to be managed by the Police through the LLRRSP facilitated by the Memorandum of Understanding.

Government lobbying

62. The County Council has made a number of direct approaches to HM Treasury to seek a change to the national policy on the funding of camera sites. Currently, any fine income is passed to the Treasury. The Council has asked that money from fines can first be used to fund the cost of the community safety initiatives, including the costs of average speed cameras, with any remaining funding reverting to HM Treasury.
63. Whilst the Government appreciates the possible benefits of the proposal, HM Treasury has advised that it does not support the retention of fine income by local authorities. The County Council will continue to make the case for a change, which would enable it to extend the scheme to other communities across Leicestershire.

Finance

64. To manage the expansion of the CSEI dedicated resource will need to be allocated in the Department. A summary of the resource requirements against the current funding available is provided below:

Funding Requirements	One-off	On-going
	£m	£m
Staffing		0.05
Camera maintenance cost across 14 Sites		0.11
Site relocation (moving 7 sites annually)		0.25
Site installation (7 sites)	0.42	
Total Cost	0.42	0.41
Current Budget	-0.60	-0.06
Revenue Funding Requirement	-0.18	0.35

Crime and Disorder Implications

65. The Council continues to recognise the importance of seeking to address crime and fear of crime, including from speeding vehicles. It emphasises the importance of implementing policies and measures to support safe, high quality environments.

Equality and Human Rights Implications

66. There are no Equality and Human Rights Implications directly arising from this report. The proposed policy changes would bring a significant benefit to communities with speeding concerns
67. The ability to install speed cameras more freely will reduce road deaths and injuries and improve the quality of life for the communities served by the County Council.

68. No detailed equality assessment has been undertaken on the proposed changes to community speed enforcement. Equality and Human Rights Impact Assessments (EHRIAs) will be undertaken, as appropriate, during the review of any appropriate departmental strategies, prior to final decisions being made.

Environmental Impact

69. Data has shown a positive effect on Air Quality throughout the trial.

Background Papers

Environment and Transport Overview and Scrutiny Committee - 12 September 2016 –
'Road Casualty Reduction in Leicestershire and Future Approach to Casualty Reduction'
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1044&MId=4781&Ver=4>

Community Speed Enforcement : Cabinet Report 10 February 2017
<http://politics.leics.gov.uk/ieListDocuments.aspx?MId=4858>

Community Speed Enforcement : Cabinet Report 10 March 2017
<http://politics.leics.gov.uk/ieListDocuments.aspx?MId=4859>

This page is intentionally left blank



CABINET – 20 OCTOBER 2020

GOVERNMENT PROPOSALS TO REFORM LOCAL GOVERNMENT

EXIT PAY

REPORT OF THE DIRECTOR OF CORPORATE RESOURCES

PART A

Purpose of the Report

1. The purpose of this report is to inform the Cabinet of Government proposals to reform local government exit pay and the associated consultation together with the likely impact on staff aged over 55 who are members of the Local Government Pension Scheme.
2. The consultation was issued by the Ministry of Housing, Communities and Local Government (MHCLG) in September and responses are required by 9 November 2020.

Recommendations

3. It is recommended that:
 - a) The Cabinet notes the Government proposals to reform Local Government exit pay and the likely impact on staff aged over 55 who are members of the Local Government Pension Scheme;
 - b) The Chief Executive be authorised, in consultation with the Director of Corporate Resources, to agree the Council's response to the consultation and submit this to the Ministry of Housing, Communities and Local Government before 9 November 2020; and
 - c) The Cabinet notes that a response to the consultation will also be submitted by the Leicestershire Pension Fund.

Reasons for Recommendation

4. The new exit pay regulations as proposed will have a significant impact on staff aged over 55 in the Local Government Pension Scheme who leave the Council's employment through compulsory or voluntary redundancy, or via a settlement agreement. It is important, therefore, that the Council and the Pension Fund responds separately to the Government consultation.

Timetable for Decisions (including Scrutiny)

5. Responses to the consultation on behalf of the County Council and the Leicestershire Pension Fund will be submitted ahead of the deadline of 9 November 2020.
6. A report setting out the changes following the end of the consultation period and the potential implementation of the regulations will be presented to the Employment Committee at its next meeting in December 2020.
7. The response of the Local Pension Fund will be shared with members of the Local Pension Board and the Local Pensions Committee prior to submission ahead of the deadline on 9 November 2020.
8. At the time of writing, the timetable for implementation is currently unclear but will be determined by legislation.

Policy Framework and Previous Decisions

9. The Government has undertaken a number of consultation exercises over the last four years on capping exit pay for local government employees. Proposals were principally aimed at senior managers and sought to limit exit packages to £95,000. These were legislated for in the Small Business Enterprise and Employment Act 2015. Consultation on a public sector exit cap was carried out in 2019, and regulations were laid (published for consideration by MPs) in July this year. A further consultation exercise on additional measures is now underway, and if these are agreed there will need to be associated changes to the Local Government Pension Scheme regulations, and to the Council's internal redundancy policies.

Resource Implications

10. There are no direct financial implications arising from this report.

Circulation under the Local Issues Alert Procedure

11. None.

Officers to Contact

Chris Tambini
Director of Corporate Resources
0116 3056199
chris.tambini@leics.gov.uk

Gordon McFarlane
Assistant Director (Corporate Services)
Corporate Resources Department
0116 3056123
gordon.mcfarlane@leics.gov.uk

PART B

Background

12. The Ministry of Housing, Communities and Local Government is now undertaking a further consultation exercise which closes on 9 November, and is proposing further measures, which if implemented will be much more far reaching than the original proposals in 2019. The consultation covers the required changes to compensation and pension regulations to implement both the £95,000 exit payment cap and the current proposals to further reform public sector exit payments. Currently, no other parts of the public sector apart from Local Government have any 'live' proposals for these further measures.

Government Proposals

13. It is proposed that total exit payments will be capped at £95,000. The calculation will include pension strain (the cost to the Council of a full pension being paid when the scheme member leaves earlier, for example, when made redundant). This will affect all types of compensation including redundancy, pension top-ups, settlement agreements and special severance payments.
14. There will be a maximum tariff for calculating exit payments of 3 weeks' pay per year of service, with a ceiling of 66 weeks on the maximum number of weeks' salary that can be paid as a redundancy compensation payment. The Council's current scheme caps the number of weeks at 30.
15. Regardless of salary level, a maximum salary of £80,000 will be used to calculate a redundancy compensation payment. This figure will be reviewed annually.
16. If a pension scheme member has any pension strain costs (for example, they are aged over 55 and being made compulsorily redundant) then, instead of being based on actual weekly pay, which is the Council's current policy, the redundancy payment will be capped at the statutory redundancy level, currently £538 per week. It is worth noting that this proposal would affect anyone meeting the above criteria from grade 10 upwards.
17. The Government is also proposing that in every case where there is pension strain, the value of the statutory redundancy payment that will be paid is deducted from the pension strain. In practical terms, this means that the pension strain that the Council will pay to the fund will be lower, but that the employee will get less than a full pension. However, the member would be able to make up any reduction in strain cost from their own resources.
18. The final elements of the proposal are to introduce an element of flexibility for employees who are members of the local government pension scheme. The first option would be to allow a member not to take their pension at the point they leave the Council's employment, i.e. to defer it. This would mean that

they could then benefit from a redundancy payment based on actual pay, as per the Council's policy. The second proposed option is that the scheme member could choose to leave with a reduced pension, so that there are no pension strain costs for the employer to pay. This again would allow the member to receive a redundancy payment based on actual pay.

Consultation

19. The MHCLG consultation exercise started on 7 September and ends on 9 November 2020. However, at the same time, draft legislation is already going through the parliamentary process, and the consultation document relates in the main to the impact of the changes, and whether any mitigation needs to be put in place.
20. The Council will be submitting a response, and a separate response will be sent from the Leicestershire Pension Fund.

Implications for the County Council and Suggested Response

21. Following consultation, if the proposals are implemented, there will need to be associated changes to the Local Government Pension Scheme regulations. However, as this is a national change, the Council will be unable to mitigate locally unless it chooses to make changes to its redundancy policies. This would be a matter for the Employment Committee to consider.
22. The Council's response to the consultation exercise will seek to address any concerns about likely disproportionate impact on any specific groups, any wider impact on future recruitment and retention, together with a view as to whether any transitional arrangements should be put in place, such as for those members of staff already impacted by restructures.

Equality and Human Rights Implications

23. There are no equalities or human rights implications arising from the recommendations in this report, Once the proposals are finalised and any mitigation put in place, the Council may need to consider amendments to its policies, in which case an equalities and human rights impact assessment will be carried out as appropriate.

Background Papers

24. None.



CABINET - 20 OCTOBER 2020

EXCEPTION TO THE CONTRACT PROCEDURE RULES FOR DIRECT AWARD OF A CONSTRUCTION CONTRACT

REPORT OF THE DIRECTOR OF CORPORATE RESOURCES

PART A

Purpose of the Report

1. The purpose of this report to advise the Cabinet of a contract recently awarded for the refurbishment of the former Oakfield School site, which whilst valid and awarded properly did not follow the Council's usual process. The Director of Law and Governance has requested that the item be brought to the Cabinet's attention in order to provide assurance to the Contractor already undertaking works on site and to the Academy Trust to whom the site is to be transferred.

Recommendation

2. It is recommended that the Cabinet notes that the contract award for the refurbishment of the former Oakfield School site should have been the subject of an Exception Report to the Cabinet, notwithstanding which the contract is considered to be valid and was entered into in good faith by both parties.

Reasons for Recommendation

3. To advise the Cabinet of the procedural error which has come to light during the transfer of the site and, by way of this report, to provide clarification and assurance for the Academy Trust.

Timetable for Decisions (including Scrutiny)

4. The contract was awarded in July 2020 and work has commenced.

Policy Framework and Previous Decisions

5. Not applicable.

Resource Implications

6. There are no resource implications arising from the recommendation in this report.

7. The Director of Law and Governance has been consulted on this report.

Circulation under the Local Issues Alert Procedure

8. None.

Officers to Contact

Chris Tambini, Director of Corporate Resources
Tel. 0116 305 6199. Email: chris.tambini@leics.gov.uk

Jasdeep Dave, Business Partner Strategic Property Services
Corporate Resources Department
Tel 0116 305 6358 Email: jasdeep.dave@leics.gov.uk

PART B

Background

9. The construction contract relates to the former Oakfield Pupil Referral Unit in Blaby which is being refurbished to provide a 50-place Social, Emotional and Mental Health Needs School. The land and buildings are to be transferred to an academy trust.
10. A Minor Works [Procurement] Framework had been put in place but there was a misunderstanding between the officers involved with this contract as to how the Framework should be used.
11. In November 2019 the Council's Project Management Office (Property) concluded that it was not possible for the contract award to be a call off from the Minor Works Framework (i.e. an individual contract falling under the Framework) and that the contractor should be appointed by way of a direct award. This meant that an exception to the Contract Procedure Rules was required.
12. The project was delayed because of the COVID-19 pandemic; it was originally intended that the contract be completed in April. The construction contract was not progressed until late June 2020 and was completed in a short timeframe to ensure works could start on site in July. The contract was completed and signed in July but unfortunately approval to award by exception was not obtained in advance in accordance with the Council's usual practice and as set out in the Contract Procedure Rules.
13. In accordance with the Council's Contract Procedure Rules, exceptions should only be made with the agreement of the Chief Officer or the Executive (depending on the value of the contract).
14. The lack of a documented Exception Report has only come to light through progressing the transfer of the site to the academy trust and to regularise the position and provide assurance to the trust it was considered appropriate that this procedural error be put on record for the Cabinet to note.

Comments of the Director of Law and Governance

15. The Director has advised that although the necessary approvals were not obtained prior to the award of the contract, the contract is valid, noting that it was entered in good faith by both parties and that the work has already been in part performed. Subject to the relevant Chief Officers and the Cabinet being made aware of the situation, and reassurance being provided to the academy trust no further action with regard to the contract is needed.

Risk Assessment

16. Fortunately there are no serious consequences arising from the technical error. However the Department's processes for the drafting and award of contracts will be reviewed in light of the oversight and further staff training will be carried out as necessary.

Equality and Human Rights Implications

17. There are no equality or human rights implications arising from the recommendations in this report.

Background Papers

None.