



Overview and Scrutiny Committee Tuesday, 31st October, 2017

You are invited to attend the next meeting of **Overview and Scrutiny Committee**, which will be held at:

**Council Chamber, Civic Offices, High Street, Epping
on Tuesday, 31st October, 2017
at 7.30 pm .**

**Glen Chipp
Chief Executive**

**Democratic Services
Officer:**

A. Hendry Tel: (01992) 564243
Email: democraticservices@eppingforestdc.gov.uk

Members:

Councillors M Sartin (Chairman), R Brookes (Vice-Chairman), N Avey, R Baldwin, N Bedford, Y Knight, J Lea, A Mitchell, S Murray, S Neville, A Patel, D Stallan, B Surtees, H Whitbread and D Wixley

PLEASE NOTE THAT THIS MEETING IS OPEN TO ALL MEMBERS TO ATTEND

WEBCASTING NOTICE

Please note: this meeting may be filmed for live or subsequent broadcast via the Council's internet site - at the start of the meeting the Chairman will confirm if all or part of the meeting is being filmed.

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If you have any queries regarding this, please contact the Public Relations Manager on 01992 564039.

1. WEBCASTING INTRODUCTION

This meeting is to be webcast. Members are reminded of the need to activate their microphones before speaking.

The Chairman will read the following announcement:

“This meeting will be webcast live to the Internet and will be archived for later viewing. Copies of recordings may be made available on request.

By entering the chamber’s lower seating area you consent to becoming part of the webcast.

If you wish to avoid being filmed you should move to the public gallery or speak to the webcasting officer”

2. APOLOGIES FOR ABSENCE

3. SUBSTITUTE MEMBERS

(Director of Governance) To report the appointment of any substitute members for the meeting.

4. MINUTES (Pages 7 - 12)

To confirm the minutes of the meeting of the Committee held on 18 July 2017.

5. DECLARATIONS OF INTEREST

(Director of Governance) To declare interests in any items on the agenda.

In considering whether to declare a pecuniary or a non-pecuniary interest under the Council’s Code of Conduct, members are asked pay particular attention to paragraph 11 of the Code in addition to the more familiar requirements.

This requires the declaration of a non-pecuniary interest in any matter before overview and scrutiny which relates to a decision of or action by another committee, sub-committee of the Council, a joint committee or joint sub-committee in which the Council is involved and of which the Councillor is also a member.

Paragraph 11 of the Code of Conduct does not refer to Cabinet decisions or attendance at an overview and scrutiny meeting purely for the purpose of answering questions or providing information on such a matter.

6. BARTS HEALTH NHS TRUST - SCRUTINY OF EXTERNAL ORGANISATIONS (Pages 13 - 26)

(Director of Governance) To undertake further external scrutiny of Barts Health NHS Trust, with regard to the continued improvement of inpatient, outpatient and other medical and emergency services at Whipps Cross University Hospital.

7. PUBLIC QUESTIONS & REQUESTS TO ADDRESS THE OVERVIEW AND SCRUTINY COMMITTEE

(Director of Governance) To receive questions submitted by members of the public and any requests to address the Committee.

(a) Public Questions

Members of the public may ask questions of the Chairman of Overview and Scrutiny Committee at ordinary meetings of the Committee, in accordance with the procedure set out in the Council's Constitution.

(b) Requests to address the Overview and Scrutiny Committee

Any member of the public or a representative of another organisation may address the Overview and Scrutiny Committee on any agenda item (except those dealt with in private session as exempt or confidential business), due to be considered at the meeting.

8. TRANSFORMATION TASK AND FINISH PANEL - FINAL REPORT (Pages 27 - 34)

(Chairman of Task and Finish Panel) To consider the attached report.

9. OVERVIEW & SCRUTINY SELECT COMMITTEES - MEMBERSHIP 2017/18 (Pages 35 - 36)

(Director of Governance) to consider the attached report.

10. EXECUTIVE DECISIONS - CALL-IN (Pages 37 - 40)

(Director of Governance) To consider the attached report.

11. TRANSPORT FOR LONDON - SCRUTINY OF EXTERNAL ORGANISATIONS (Pages 41 - 42)

(Director of Governance) To consider the attached report.

12. CORPORATE PLAN KEY ACTION PLAN 2017/18 - QUARTER 1 PROGRESS (Pages 43 - 56)

(Head of Transformation) To consider the attached report.

13. FORWARD PLAN OF KEY DECISIONS - REVIEW (Pages 57 - 72)

(Director of Governance) The Cabinet's forward plan of key decisions is reviewed by the Committee at each meeting, to provide an opportunity for the scrutiny of specific decisions to be taken over the period of the plan. Wherever possible, Portfolio Holders will attend the Committee to present forthcoming key decisions, to answer questions on the forward plan and to indicate where appropriate work could be carried out by overview and scrutiny on behalf of the Cabinet.

14. **OVERVIEW & SCRUTINY COMMITTEE WORK PROGRAMMES 2016/17 - REVIEW (Pages 73 - 92)**

(Director of Governance) Progress towards the achievement of the work programmes for the Overview and Scrutiny Committee and each of the select committees, is reviewed by the Committee at each meeting.

(a) **Current Work Programmes**

The current overview and scrutiny work programmes are attached as an appendix to this report.

(b) **Reserve Programme**

A reserve list of scrutiny topics is developed as required, to ensure that the work flow of overview and scrutiny is continuous. When necessary, the Committee will allocate items from the list appropriately, once resources become available in the work programme, following the completion of any ongoing scrutiny activity.

Members can put forward suggestions for inclusion in the work programme or reserve list through the adopted PICK process. Existing review items will be dealt with first, after which time will be allocated to the items contained in the reserve work plan.

15. **SCRUTINY OF EXTERNAL ORGANISATIONS - REVIEW (Pages 93 - 94)**

(Director of Governance) For the information of the Committee, a schedule setting out the external scrutiny that it has undertaken over the last three years is attached as Appendix 1. This schedule has been updated to include those external scrutiny activities already agreed by the Committee for the remainder of the current municipal year.

16. **EXCLUSION OF PUBLIC AND PRESS**

Exclusion: To consider whether, under Section 100(A)(4) of the Local Government Act 1972, the public and press should be excluded from the meeting for the items of business set out below on grounds that they will involve the likely disclosure of exempt information as defined in the following paragraph(s) of Part 1 of Schedule 12A of the Act (as amended) or are confidential under Section 100(A)(2):

Agenda Item No	Subject	Exempt Information Paragraph Number
Nil	Nil	Nil

The Local Government (Access to Information) (Variation) Order 2006, which came into effect on 1 March 2006, requires the Council to consider whether maintaining the exemption listed above outweighs the potential public interest in disclosing the information. Any member who considers that this test should be applied to any currently exempted matter on this agenda should contact the proper officer at least 24 hours prior to the meeting.

Background Papers: Article 17 - Access to Information, Procedure Rules of the Constitution define background papers as being documents relating to the subject matter of the report which in the Proper Officer's opinion:

- (a) disclose any facts or matters on which the report or an important part of the report is based; and
- (b) have been relied on to a material extent in preparing the report and does not include published works or those which disclose exempt or confidential information and in respect of executive reports, the advice of any political advisor.

The Council will make available for public inspection for four years after the date of the meeting one copy of each of the documents on the list of background papers.

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EPPING FOREST DISTRICT COUNCIL OVERVIEW AND SCRUTINY MINUTES

Committee:	Overview and Scrutiny Committee	Date:	Tuesday, 18 July 2017
Place:	Council Chamber, Civic Offices, High Street, Epping	Time:	9.05 - 9.41 pm
Members Present:	Councillors M Sartin (Chairman) R Brookes (Vice-Chairman) R Baldwin, R Bassett, N Bedford, K Chana, S Heap, L Hughes, S Kane, J Lea, A Patel, B Surtees, H Whitbread and D Wixley		
Other Councillors:	Councillors H Kane, A Lion, G Mohindra, S Stavrou, C Whitbread, A Grigg and J Philip		
Apologies:	Councillors N Avey, Y Knight, A Mitchell, S Murray, S Neville and D Stallan		
Officers Present:	D Macnab (Deputy Chief Executive and Director of Neighbourhoods), D Bailey (Head of Transformation), A Hendry (Senior Democratic Services Officer) and S Mitchell (PR Website Editor)		

17. WEBCASTING INTRODUCTION

The Chairman reminded everyone present that the meeting would be broadcast live to the Internet, and that the Council had adopted a protocol for the webcasting of its meetings.

18. SUBSTITUTE MEMBERS

It was reported that Councillor Hughes was substituting for Councillor Knight; Councillor Chana was substituting for Councillor Avey; Councillor Lea was substituting for Councillor Mitchell; Councillor Bassett was substituting for Councillor Stallan; and that Councillor Heap was substituting for Councillor Neville.

19. MINUTES

RESOLVED:

That the minutes of the last Committee meeting held on 6 June 2017 be signed by the Chairman as a correct record.

20. DECLARATIONS OF INTEREST

There were no declarations of interest made pursuant to the Member's Code of Conduct.

21. PUBLIC QUESTIONS & REQUESTS TO ADDRESS THE OVERVIEW AND SCRUTINY COMMITTEE

It was noted that there were no public questions or requests to address the committee.

22. EXECUTIVE DECISIONS - CALL-IN

There were no call-in of decisions to be considered.

23. FORWARD PLAN OF KEY DECISIONS - REVIEW

The Committee considered the Council's corporate priorities and programme of key decisions for 2017/18. The committee went through the plan page by page asking questions as appropriate.

Councillor Surtees noted the item for the Safer, Greener and Transport Portfolio Holder on providing new car parking provision in the Vere Road car park. He noted that his ward also needed a car parking scheme and asked if there were any consultations going on and was on street parking also being looked at. Councillor Chris Whitbread noted that not all parking schemes were our responsibility, most were for the County. He noted that we had achieved a lot on parking and had spent a lot on consultation over the year.

The Chairman concluded that this was something that needed to be looked at further.

24. CORPORATE PLAN 2018-2023

The Head of Transformation, Mr D Bailey, introduced the report on the Corporate Plan for 2018 – 2023. This new Corporate Plan would run from 2018 to 2023 and sought to lay out the journey the Council would take to transform the organisation to be 'ready for the future'. This plan strived to link the key external drivers influencing Council services, with a set of corporate aims and objectives, grouped under three corporate ambitions.

The Corporate Plan was the Council's highest level strategic document. It set the strategic direction of the organisation for the lifetime of the plan, and as such informed all other plans produced by the Council. The Corporate Plan did not cover everything that the organisation did in detail, but it provided a framework to demonstrate how the work of the Council at a strategic level fitted together. It also provided a focus to establish a set of corporate priorities, describing how the organisation would deliver positive change. The Corporate Plan did not contain specific information on the wide range of services that the Council provided, or how it delivered statutory duties or enforced legislation.

The new Corporate Plan aspired to be written in language and presented in a style that could be readily understood by the Council's customers. It also strived to 'put the customer at the heart of everything we do'. For the purposes of this Plan, 'customers' meant people that:

- Live (residents);
- Work or do business;
- Learn (students);
- Visit (tourist economy) and
- Play (leisure activities) in the district.

The final Corporate Plan document will include many of the sections found in the organisation's previous Corporate Plans, including an overview of the district, our vision, purpose, values, and a set of corporate aims and objectives. The most significant change to the plan was its focus on our customers and the measurement of success as the impact that the delivery of the plan had on them.

An annual Corporate Specification details how the Corporate Plan would be delivered through a set of operational objectives for that year. Corporate Specifications would continue to be set annually. Every year during the lifetime of the Corporate Plan, the Corporate Specification will be agreed by the Cabinet, with the scrutiny of the Select Committees. New operational objectives will reflect the progress already achieved against the Corporate Plan.

The benefits maps were broken into three themes, people, place and council and were to be, unusually, assessed from right to the left. Best practice was to start from the right-hand side and work towards the left, i.e. start with the needs of our customers or the end in mind, and work back to the solutions on the left-hand side. When the organisation delivers services, it starts on the left-hand side and works over to the right, i.e. the delivery goes from left to right.

Next year the maps will carry traffic lights in the boxes in the plan, to indicate how they were performing.

Councillor S Kane was impressed with the new presentation given by the report. He asked if the intention was to use these measures to augment or replace the existing KPIs. Also, were these indicative measures to be expanded at a later time or have they been set. Mr Bailey said that the KPIs in the report were to replace the existing set as we have had them for some years. We wanted to measure things important to our organisation and our customers rather than what was easy to measure. This was an attempt to flesh out what to measure indicatively and upon consultation the measures would change and improve.

Councillor Bassett would like something on partner dependencies on page 47; and protecting people from abuse or neglect, if we do not have any control over this then we would be criticizing ourselves for not delivering.

Councillor Bedford asked if there should be a section on Highways and working in partnership with them and monitoring progress.

Councillor Surtees was looking at adults and children supported in time of need and protecting people from abuse or neglect and the safeguarding issues being the performance measure. There were a lot of other things that affected supporting people in times of need and there somehow needed something to draw these together to have a really effective measure of what we do to support people in our communities.

Councillor Wixley wondered if officers could elaborate on the 'dis-benefits' mentioned in paragraph 19 of the report. Mr Bailey said that there was only one dis-benefit that had been drawn out in this document, under the stronger council benefits map; item B3.3.5, on reduced staff morale from disruption. This was an example of a potential dis-benefit and we acknowledge that this would be something to manage in order to minimise that potential dis-benefit.

Councillor Wixley said he was thinking about the residents, something like the Local Plan may cause quality of life issues and have a negative effect and cause 'dis-benefits'. Councillor Whitbread said they would look at the Local Plan in detail, but also remember there were young people who had dis-benefits by not being able to buy homes in the district and the missed out social housing in Loughton that have had planning applications turned down. All this is customer focused and we know there were a number of issues to be addressed.

Councillor Philip said that there would be bigger dis-benefits for not having a Local Plan; we needed a Local Plan otherwise any open space in the district would be fair game for developers. It may be that a small loss of open space would be less of a dis-benefit than the loss of a larger open space. Therefore it was a balance overall looking at this as a whole district.

Councillor Lion, looking at paragraph 5 of the report, asked if we had considered “growing old” in Epping Forest. Mr Macnab noted that under communities there was a strong thread about people increasing the quality of life for older people etc. so it had been picked up but could be looked at in more depth.

Councillor Patel noted that under ‘stronger council’ to implement new ways of working (3.4.2); new ways of working were only beneficial if they were to be efficient for the council, so the word ‘efficient’ needed to be in there.

Councillor Sartin noted that the committee had done all they could in providing comment on this corporate plan. It would be going to two other select committees for further comment. Mr Bailey confirmed that he would be taking into consideration all the comments made when next reviewing the Corporate Plan.

RESOLVED:

That the Committee considered and provided comment on the Council’s proposed new Corporate Plan for 2018-2023.

25. SCRUTINY OF EXTERNAL ORGANISATIONS

Barts Health NHS Trust

Mr Macnab the Director of Neighbourhoods introduced the report on future scrutiny of external organisations. He noted that the Barts Health NHS Trust had agreed to attend the 31st October meeting and talk about their improvement plan.

Transport for London

Councillor Sartin noted that we had asked Transport for London (TfL) for a return visit and asked the committee to consider what they would like to be covered on their return visit. One of the things that had been raised, was asking about their bus services.

Councillor Bassett said that it would be nice to also get Essex Passenger Transport here and members were seeing a lot of bus services reduced. Mr Macnab said that Passenger Transport would be going to a future meeting of the Neighbourhoods Select Committee.

This Committee could ask for a specialist from TfL to come here to update us on the Central Line and on the bus services served by TfL. Also there were access issues on the Central Line, especially at Buckhurst Hill. Members should let Mr Tautz, Democratic Services know what they would like to ask.

Councillor Bedford wondered if there was any room for manoeuvre between us and London Underground in regards to pricing, including over-ground lines, bringing them in line with underground prices. Councillor Sartin noted that this was a very big subject, maybe not so much for TfL as such. Mr Macnab noted that this was clearly an issue; the zones had been considered for extension outside London. We could pose the question and maybe get an up date on any dialogue happening at present

on this. But this was a strategic issue outside our scope. Councillor Mohindra noted that this would fall under the responsibility of the Department of Transport and not really for TfL. Councillor Bedford suggested that maybe we should write to or invite the Minister of Transport here.

Councillor Mohindra would like to ask TfL what they were doing with their stations and specifically their car parks and if they were looking to invest some capital.

Councillor Bedford said he would also like to have to have the Essex Fire and Rescue Chief Officer here in about a year's time to give us an update on the amalgamation of the Police and Fire and Rescue Service.

Councillor Sartin reiterated that if any member wanted to add something to the any of the above topics they should email Mr Tautz. Something would probably be going into the Members Bulletin to highlight this.

26. OVERVIEW & SCRUTINY COMMITTEE WORK PROGRAMME 2017/18 - REVIEW

Overview and Scrutiny Committee

The Committee reviewed their current work programme, noting that the Essex Highways Services had made an independent informal visit this evening and so that this could be taken off the work programme. The meeting had also discussed the Barts Health NHS Trust and TfL visits.

It was also noted the Epping Forest sixth-form consortium (item 1 on the reserve programme) was currently in flux. Officers would investigate and report back.

Councillor Patel commented that he had been to a recent Health Overview and Scrutiny meeting and had received a presentation on the North East London's CQC report on their Mental Health Services. Some of this would impact on our residents. He would like the organisation responsible for front line Mental Health Services in our district here at some time to see how they delivered their services, not just after an diagnosis has been made, but how they dealt with people before they reached crisis point. Councillor Mohindra noted that there was the launch of the Essex wide Mental Health and Wellbeing Strategy tomorrow. Councillor Whitbread would be in attendance and you may want him to report back.

Councillor Surtees noted that the Essex Children Services were also still on the reserve programme. He would like them to be reviewed again later on in the year following on from the Task and Finish Panel that looked into this recently.

Councillor Lea would like to ask officers from the Princess Alexandra Hospital or Barts Health to comment on the reports that the NHS were not taking on Australian or New Zealand nurses. Mr Macnab said that we could do this as we have asked this sort of staffing questions before. Officers will canvas questions from members for the next meeting.

Select Committees

Communities Select Committee – no comments were made on their work programme.

Governance Select Committee – Councillor Wixley reported that they had received a good presentation from Building Control at their last meeting and asked if they could have the PowerPoint presentation attached to the minutes.

Neighbourhoods Select Committee – the Chairman had nothing further to add.

Resources Select Committee – the Chairman had nothing further to add.

Task and Finish Panels

Transformation Task and Finish Panel – Councillor Patel the chairman of the panel noted that they would be holding their second meeting on 1st August.

He noted that a comment was made on the timings of Overview and Scrutiny meetings in conjunction with the Cabinet meetings, could this be looked into. Mr Macnab said that there had been a review about a year ago looking at Select Committees. There is also the Scrutiny Chairs and Vice-Chairs meeting where this could be discussed.

CHAIRMAN

Report to Overview & Scrutiny Committee

Date of meeting: 31 October 2017



Subject: Barts Health NHS Trust - Scrutiny of External Organisations

Officer contact for further information: S. Tautz (01992) 564180

Democratic Services Officer: A. Hendry (01992) 564246

Recommendations/Decisions Required:

That the Committee undertake appropriate external scrutiny of Barts Health NHS Trust, with regard to the continued improvement of inpatient, outpatient and other medical and emergency services at Whipps Cross Hospital.

1. (Director of Governance) As the Committee will recall, representatives of Barts Health NHS Trust attended its meeting on 23 February 2016 to respond to the concerns of members in respect of aspects of general inpatient, outpatient and emergency services provision at Whipps Cross University Hospital. The minutes of that meeting of the Committee are available at:

<https://goo.gl/uZ1jnC>

2. Members have expressed a desire to undertake further external scrutiny of the progress of the Trust with regard to the achievement and delivery of its improvement plans for Whipps Cross Hospital. This has therefore been included in the work programme for the Committee for 2017/18 and the following representatives of the Trust will be in attendance at the meeting:

Dr. Heather Noble - Medical Director, Whipps Cross Hospital; and
Alan Gurney - Managing Director, Whipps Cross Hospital.

3. The Care Quality Commission (CQC) undertook a focused unannounced inspection of three core services (surgery, end of life care and outpatients and diagnostic imaging) at Whipps Cross Hospital in May 2017, as a follow-up to its previous inspection of Barts Health NHS Trust in July 2016. At that time, the Hospital was rated inadequate overall, although in considering the aggregated ratings across all eight core services from both the recent inspection and in 2016, the Hospital is now rated by the CQC as requiring improvement. A summary of the report of the CQC arising from its inspection earlier in the year is attached as Appendix 1 to this report. The full report and detailed findings of the CQC is available on its website at:

http://www.cqc.org.uk/sites/default/files/new_reports/AAAG6893.pdf

4. The identification of overarching scrutiny themes and specific issues relating to the services provided by the Trust at Whipps Cross Hospital were recently sought from members through the Council Bulletin. Any such matters raised by members have been notified to Barts Health NHS Trust as the emphasis for such external scrutiny, in order to ensure that maximum value is derived from this scrutiny activity.

Resource Implications:

The recommendations of this report seek to enable scrutiny activity to more effectively meet work programme requirements.

Legal and Governance Implications:

The Council's constitution sets out rules for the management of its overview and scrutiny responsibility. Although external organisations are not generally required by legislation to attend before the Overview and Scrutiny Committee, it is hoped that most would be willing to engage constructively with the Council's scrutiny activity when invited to do so.

Safer, Cleaner, Greener Implications:

There are no implications arising from the recommendations of this report in respect of the Council's commitment to the Climate Local Agreement, the corporate Safer, Cleaner, Greener initiative, or any crime and disorder issues within the district.

Consultation Undertaken:

Representatives of Barts Health NHS Trust attended the meeting of the Committee held on 23 February 2016. The scrutiny of a number of overarching themes and specific issues of general inpatient, outpatient and emergency services provision at Whips Cross University Hospital were identified at that time.

Background Papers:

None

Impact Assessments:***Risk Management***

The Council's constitution sets out rules for the management of its overview and scrutiny responsibilities.

Equality:

There are no equality implications arising from the recommendations of this report.

Barts Health NHS Trust

Whipps Cross University Hospital

Quality Report

Whipps Cross Road
Leytonstone
London
E11 1NR

Tel: 020 8539 5522





Website: www.bartshealth.nhs.uk/whipps-cross

Date of inspection visit: 10-11 May 2017

Date of publication: 12/09/2017

This report describes our judgement of the quality of care at this hospital. It is based on a combination of what we found when we inspected, information from our 'Intelligent Monitoring' system, and information given to us from patients, the public and other organisations.

Ratings

Overall rating for this hospital	Requires improvement	
Surgery	Inadequate	
End of life care	Requires improvement	
Outpatients and diagnostic imaging	Requires improvement	

Summary of findings

Letter from the Chief Inspector of Hospitals

Whipps Cross University Hospital in Waltham Forest is part of Barts Health NHS Trust, the largest NHS trust in the country, serving 2.5 million people across Tower Hamlets and surrounding areas of the City of London and East London.

Whipps Cross University Hospital provides a range of general inpatient services with 586 beds, outpatient and day-case services, as well as maternity services and a 24-hour emergency department and urgent care centre. The hospital has various specialist services, including urology, ENT, audiology, cardiology, colorectal surgery, cancer care and acute stroke care.

This was a focused unannounced inspection to follow up on our previous inspection of Barts Health NHS Trust in July 2016 where we found a number of concerns around patient safety and the quality of care. At that time Whipps Cross University Hospital was rated overall inadequate.

We carried out an unannounced inspection between 10 and 11 May 2017 and inspected three core services: surgery, end of life care and outpatients and diagnostic imaging.

We found improvements in both end of life care and outpatients and diagnostic imaging, which have been reflected in the ratings. However, following concerns we found in surgery the ratings across each domain remain unchanged. We have written to the trust asking them to provide further information on how they are addressing the issues of poor care and treatment.

However, when considering the aggregated ratings across all eight core services, from both this inspection and last July, the hospital is now rated overall requires improvement.

Our key findings were as follows:

Safe

- The hospital's electronic incident reporting system was not always used effectively by staff to report, investigate and act upon incidents. Learning from incidents was not always identified or recorded. Feedback was not shared consistently with staff, as monthly ward meetings did not always take place.
- VTE screening compliance on surgical wards was consistently below the trust's 95% target.
- Surgical site infection (SSI) data was not followed up and therefore the service did not know how many wound infections occurred after patients were discharged.
- We observed a number of infection control issues related to the operating theatre environment including loose and exposed plaster on theatre walls and damaged flooring. Not all theatre areas had records of daily cleaning checks and some items of equipment labelled as clean had visible dust and/or damage. We did not see evidence of any theatre cleaning audits.
- Not all staff had completed mandatory training.
- The use of agency staff on some wards was high due to nursing staff vacancies. Nursing staff told us they were concerned about the quality of the agency nurses and gave us examples when this compromised patients' care and treatment.
- We found there was a lack of working equipment available within the mortuary.
- Palliative care staffing levels fell below nationally recommended standards.
- The environment of the in-patient diagnostic imaging area was poorly maintained.
- Safety equipment was not always maintained or replaced to ensure the safety of patients or staff.

Effective

- We did not see evidence of how national audit results were being used to drive local improvement programmes. The trust did not provide us with any action plans to respond to how national audit results were responded to.

Summary of findings

- Not all patients were screened for malnutrition as required by NICE guidelines. MUST compliance rates for surgical wards were still consistently below the trust target of 95%.
- Patient outcomes were not being measured for patients receiving end of life or palliative care.

Caring

- Most patients we spoke with told us their experiences of care were positive. We saw that staff treated patients with compassion and demonstrated a genuinely kind and caring attitude.

Responsive

- Theatre cancellations were happening on the day of surgery due to lack of available beds and over-running and late starting theatre lists. Theatre utilisation rates had improved but were still below the trust's target. Theatre lists were frequently delayed due to IT and equipment issues and last-minute list changes.
- Bed shortages on wards meant recovery areas were regularly used to nurse patients overnight. Staff were concerned that patients' needs were not being appropriately met.
- Many patients were discharged out of hours (after 8pm) due to delays. The hospital did not carry out discharge audits and did not monitor their performance against the 48hr rapid discharge target for patients receiving end of life care.
- Provisions for relatives who were at the hospital with their loved ones for long periods of time were not consistent and differed from ward to ward.
- The availability of single rooms was at a premium in the hospital, which made dignified care for people at the end of their lives harder.
- There were capacity issues in certain clinics and some clinics were cancelled due to lack of clinician availability.

Well-led

- We saw limited evidence of improvements to the surgical service to make it safer for patients and more responsive to their needs. Many of the areas of concern highlighted during our last inspection still needed to be addressed by the service.
- Governance systems were not always embedded in practice to provide a robust and systematic approach to improving the quality of services.
- The risk register did not reflect all current risks to the service. Some risks had been on the register for several years and it was not clear when these had last been reviewed. The risk register did not show what controls were in place or actions taken to mitigate risks.
- Staff we spoke with were not aware of a nominated non-executive director for end of life care, or of any representation at board level. There was a culture for end of life care in the hospital to be seen as the responsibility of the specialist palliative care team.
- There was limited oversight of the extent or depth of potential patient harm as a result of a recent information technology systems failure.

There were areas of poor practice where the trust needs to make improvements.

Importantly, the trust must:

- The trust must ensure governance systems are embedded in practice to provide a robust and systematic approach to improving the quality of services. This should capture relevant elements of good governance including an adopting a positive incident reporting culture where learning from incidents is shared with staff and embedded to improve safe care and treatment of patients.
- The trust must improve bed management, theatre management and discharge arrangements to facilitate a more effective flow of patients across the hospital and to improve theatre cancellation and delayed discharge rates.
- The trust must improve its referral to treatment time performance in line with national standards.
- The trust must improve staff compliance with mandatory training including safeguarding training.

Summary of findings

- The trust must improve staff compliance and awareness of trust infection prevention and control policies and processes.
- The trust must improve compliance with venous thromboembolism (VTE) assessments.
- The trust must ensure all patients are screened for malnutrition as required by NICE guidelines.
- The trust must ensure that patient records are stored securely in line with information governance standards.
- The trust must ensure the hospital's physical environment, including operating theatres, is fit for purpose and meets required standards.
- The trust must continue to work towards improving the organisational culture to reduce instances of unprofessional behaviours and bullying and ensure all staff feel sufficiently supported by their managers.
- The trust must ensure there are sufficient numbers of qualified, skilled and experienced staff employed and deployed to meet the needs of patients. This should include ensuring staff have the right skills to recognise and manage the deteriorating patient.
- The trust must ensure all staff receive appropriate support, training, professional development, supervision and appraisal as is necessary to enable them to carry out the duties they are employed to perform.
- The trust must ensure that risks to patient safety and service delivery are appropriately identified, recorded and escalated effectively.
- The trust must ensure governance systems are embedded in practice to provide a robust and systematic approach to improving the quality of services.
- The trust must ensure compliance with radiation protection regulations.
- The trust must ensure that timely arrangements are in place to replace diagnostic imaging equipment identified as at risk of failure.
- The trust must ensure there are functioning panic alarms across the outpatients department.
- The trust must ensure that the environment is safe where children and young people are treated in adult clinics.
- The trust must ensure that equipment used for moving deceased patients from the ward to the mortuary are properly maintained and suitable for the purpose for which they are being used.
- The trust must ensure that systems and processes are in place to enable proper management and oversight of the mortuary and are understood by staff who provide mortuary duties out of hours and in the absence of regular staff from the outsourced third party.
- The trust must have systems in place to assess and monitor their performance for rapid discharge and its effect on patient care.
- The trust must assess the quality of services provided (including the quality of the experience of service users in receiving those services) in relation to its current palliative care consultant resource and with consideration to meeting the national guidance ['Commissioning Guidance for Specialist Palliative Care: Helping to deliver commissioning objectives' (Dec 2012.)] which recommends a minimum requirement of 1 whole time equivalent consultant in palliative medicine per 250 hospital beds. The hospital has 586 beds.
- The trust must ensure that ward staff are provided with appropriate support and training in end of life and palliative care to enable them to carry out their role effectively.

In addition the trust should:

- The trust should ensure staff always have access to reliable equipment to minimise potential delay to treatment.
- The trust should ensure that timely arrangements are in place to replace ageing theatre equipment identified as at risk of failure.
- The trust should ensure the needs and preferences of patients and their relatives are central to the planning and delivery of care at the hospital.
- The trust should review, and take action to address, feedback from staff raised in the NHS staff survey.
- The trust should act upon the results of national audits to address areas of poor performance and to help drive improvement in services.
- The trust should ensure that surgical site infection data is appropriately captured and reviewed.

Summary of findings

- The trust should ensure the safety of patients as they are transferred between CT and accident and emergency.
- The trust should ensure training is provided for the role of chaperone.
- The trust should ensure the physical environment is fit for purpose and maintained in a good state of repair.
- The trust should ensure the business continuity plan is updated to reflect systems failures in outpatients and diagnostic imaging services.
- The trust should ensure privacy for patients who attend the CT scanning unit.
- The trust should ensure best practice around the use of appropriate interpreters.
- The trust should ensure a consistent approach to sending reminders to patients about their appointments.
- The mortuary audit from March 2017 reported on the age and number of the fridges available and recommended it for entry onto the trust risk register. The trust should ensure this issue is given proper consideration.
- The trust should ensure that the second mortuary viewing room (in the accident and emergency department) is in a good state of repair.
- The trust should ensure that the new clinical records system that contains mechanisms for patient outcome data to be collected is utilised. The outcome measures had been on the new system since March 2017. The SPCT had used it for a matter of weeks and were not yet in use.
- The trust should ensure that work taking place to increase the limited multidisciplinary input in to the Margaret Centre and SPCT such as social work, therapy and psychological services, is continued.
- The trust should ensure that it conducts a review regarding the inconsistency of provision available for relatives who were at the hospital with their loved ones for long periods of time. For instance, in relation to items such as tea and coffee, and for relatives staying overnight.
- The trust should ensure that religious texts are readily available to patients of all major faiths who use the hospital.
- The trust should ensure that information gathered from both 'Have Your Say' and the bereavement survey are used to improve care.

Professor Edward Baker
Chief Inspector of Hospitals

Summary of findings

Our judgements about each of the main services

Service Surgery

Rating Why have we given this rating?

Inadequate



We saw limited evidence of improvements to the service to make it safer for patients and more responsive to their needs. Many of the areas of concern highlighted during our last inspection still needed to be addressed by the service.

We were told that significant work had now been done to improve the hospital's clinical governance structures; however, we did not see evidence that this had been embedded in surgical specialities. The risk register did not reflect all current risks to the service. Some risks had been on the register for several years and it was not clear when these had last been reviewed. The risk register did not show what controls were in place or actions taken to mitigate risks.

The hospital's electronic incident reporting system was not always used effectively by staff to report, investigate and act upon incidents. Learning from incidents was not always identified or recorded. Feedback was not shared consistently with staff, as monthly ward meetings did not always take place. VTE screening compliance on surgical wards was still consistently below the trust's 95% target. Data provided by the trust for the period April 2016 to May 2017 showed overall monthly VTE screening rates on surgical wards varied between 75% and 86%. Three wards, Rowan, Sage and Sycamore scored consistently under 70%.

Not all staff had completed mandatory training. Overall compliance rates fell below the trust target. Competition rates for medical gas safety and infection prevention and control (IPC) were particularly low at 75% against the trust's 90% target.

Not all staff received an annual appraisal, appraisal rates were varied between 56% and 77% for different groups of surgical staff.

The use of agency staff on some wards was high due to nursing staff vacancies. Nursing staff told us they were concerned about the quality of the agency nurses and gave us examples when this compromised patients' care and treatment.

Summary of findings

Theatre cancellations were happening on the day of surgery due to lack of available beds and over-running theatre lists. Theatre utilisation rates had improved but were still below the trust's target. Theatre lists were frequently delayed due to IT and equipment issues and last-minute list changes. Data provided by the trust for the period November 2016 to April 2017 showed that 79% of lists did not start on time, with 39% of lists starting over 30 minutes later than planned.

During our previous inspection, we identified that poor collaboration, communication and lack of understanding between different clinical areas within the service resulted in staff blaming each other for poor patient flow. Staff told us that this was still a problem and we saw little evidence of improvement.

Bed shortages on wards meant recovery areas were regularly used to nurse patients overnight. Staff were concerned that patients' needs were not being appropriately met.

A number of staff in different areas told us about ongoing issues of bullying, favouritism or unfair treatment. Several staff told us they lacked confidence in the hospital's HR department and felt reluctant to raise concerns.

In the NHS staff survey 2016, the staff response rate for the surgical and cancer division was 29.4%, which was significantly worse than the overall trust response rate of 47.3%. The service performed significantly worse than the trust average in questions related to staff engagement with senior manager

Not all patients were screened for malnutrition as required by NICE guidelines. MUST compliance rates for surgical wards were still consistently below the trust target of 95%.

The hospital's performance in the 2016 Hip Fracture Audit was mixed. For five measures, the hospital performed significantly worse than the national average and fell within the lowest 25% of all trusts. Performance against four of these five measures was also worse than the result for 2015. The trust did not provide us with any action plans to demonstrate how these national audit results were being responded to.

Summary of findings

The overall 18-week referral to treatment time (RTT) performance for patients waiting for surgical specialties at the hospital was 69%. Performance was worse than expected but could not be accurately measured against the national average due to quality issues. There were significant data quality concerns that meant the trust could not provide assurance that referral to treatment times were being monitored effectively and the trust were not submitting national data.

We also found:

We saw that staff treated patients with compassion and demonstrated a genuinely kind and caring attitude. Most patients we spoke with told us their experiences of care were positive.

Morning and evening handover at shift change were relevant and focused on patient care and safety.

Staff we spoke with knew how to report an incident and were aware of their responsibilities to report safeguarding concerns.

A nursing representative from each hospital area attended a daily safety huddle to enhance patient safety across the hospital.

Patients' pain was assessed and well-managed and ward staff had access to support from a specialist pain team.

Daily multidisciplinary team (MDT) board rounds took place on wards with input from range of allied health professionals.

Staff across wards and theatres spoke highly of their direct line managers and said they felt supported by the matrons who were visible and approachable. Most staff spoke highly of their team and colleagues. A junior member of staff said they felt their colleagues were "like an extended family."

The trust had held several 'listening into action' events to capture the views of staff.

End of life care

Requires improvement



Although ward staff felt well supported by the specialist palliative care team (SPCT) it was a widely held belief among senior staff at the Margaret Centre and SPCT that a barrier to promoting a positive culture of end of life and palliative care being everyone's responsibility and lay with the education of ward staff.

Despite issues regarding equipment being identified through audit and reported as acted on in March

Summary of findings

2017, we found there was a lack of working equipment available within the mortuary. Twenty fridge spaces were available in the mortuary and deceased patients were frequently transferred to other premises. There were no bariatric fridge spaces and the audit stated that fridges were quite old. It recommended this issue for the trust risk register. Out of hours mortuary viewings were arranged and managed by the porters. However, the porters had not been trained in any mortuary duties. More clinical nurse specialists and consultants had been recruited as part of investing in end of life and palliative care which was a positive step. However, not all posts had been recruited to and staffing levels remained on the risk register. Consultant levels had increased and were due to increase further. However, they were still below the national guidance [‘Commissioning Guidance for Specialist Palliative Care: Helping to deliver commissioning objectives’ (Dec 2012.)] which recommends a minimum requirement of one whole time equivalent consultant in palliative medicine per 250 hospital beds. Association for Palliative Medicine of Great Britain and Ireland recommendations and the National Council for Palliative Care guidelines of a minimum of one consultant per 250 beds. The hospital had 586 beds.

Provisions for relatives who were at the hospital with their loved ones for long periods of time were not consistent and differed from ward to ward. Some were provided with tea and coffee, others with tea, coffee and sandwiches. For relatives staying overnight, some wards could only provide chairs while others had fold down beds.

The availability of single rooms was at a premium in the hospital, which made dignified care for people at the end of their lives harder; this compounded the issue of patients being sent to the Margaret Centre, where care was provided in single rooms.

The discharge team told us they tried to meet a target of 48 hours for rapid discharge. However, although they monitored this on a day to day basis they did not measure this in any other way, such as over time or through any sort of audit and did not understand their effectiveness against this target or its effect on patient care.

Summary of findings

Staff from both the SPCT and Margaret Centre we spoke with were not aware of a nominated non-executive director for end of life care, or of any representation at board level.

There was a culture for end of life care at the hospital to be seen as the responsibility of the SPCT. There was also a culture of patients being admitted to the Margaret Centre to die rather than being cared for at home or on the wards.

The mortuary was managed by an outsourced third party on behalf of the trust. There were systems in place that were not effective and others that the trust had no oversight of.

We also found:

There were mechanisms in place for learning from incidents to take place through a multi professional, cross divisional hospital group who led on all matters that related to end of life and palliative care. The SPCT took working to resolve issues for patients receiving end of life care as something they took responsibility for within the hospital. They described being open, apologetic to people when things went wrong and resolving matters for patients.

Ward staff, the SPCT and staff at the MC were all able to describe the trust's safeguarding referral process. They also knew when it was appropriate to seek help and advice as well as escalate potential safeguarding issues. We came across one current example of this in practice.

A programme of refurbishment was taking place at the Margaret Centre. Updates had already taken place to the premises to improve infection control and protect peoples' privacy and dignity.

The compassionate care plan for the dying patient (CCP) was in use throughout the hospital. Staff we spoke with on hospital wards and at the Margaret Centre told us that the end of life care was hugely helped by having the CCP in place.

Patient deterioration, symptom management, continuing assessment and ongoing monitoring for each patient where appropriately discussed and reviewed in daily handover meetings at both the SPCT and MC.

We found plenty of examples where end of life care was being delivered to national guidelines and in compliance with National Institute for Health and Care Excellence (NICE).

Summary of findings

DNACPR forms were in place and fully completed, including discussions with the family where appropriate. There was only one DNACPR form in use now.

The Margaret Centre and the SPCT staff worked on relationships with services within the hospital to promote better end of life care. Ward staff we spoke with thought both the SPCT and the MC staff were helpful.

Patients and relatives were positive about the care they had received.

Family meetings were held soon after referral to the SPCT. Family involvement was discussed in handover meetings of the SPCT and the Margaret Centre.

There was a good meeting structure that enabled accountability and direction for end of life care. The deteriorating patient improvement group met on a monthly basis and was the principle governance meeting for the hospital that was concerned with end of life care. This group was now developing in to the end of life care group, which was to be led by the director of nursing at the hospital.

Outpatients and diagnostic imaging

Requires improvement



Incidents were not always reported or actioned in line with trust policy. The trust had identified capability issues with staff using the incident reporting system, however we were told this training was not included in induction training.

Risk registers did not reflect all areas of concern, for example; concerns about transfers of patients between the emergency department and imaging department or lack of accessible resuscitation equipment

The environment of the in-patient diagnostic imaging area was poorly maintained.

There were on-going capacity issues in certain clinics to meet patient demand

Staff did not have the available information to ensure non-medical referrers were compliant with the Ionising Radiation (Medical Exposure) regulations (IR (ME) R).

Safety equipment was not always maintained or replaced to ensure the safety of patients or staff. In particular lead aprons, which provided radiation protection.

Summary of findings

Radiation doses received by medical staff was routinely higher than that recommended by the radiation protection advisor when measured against staff who performed similar procedures using x-ray equipment with modern dose limiting technology for the patients and operators.

There was limited oversight of the extent or depth of potential patient harm as a result of a recent information technology systems failure.

Governance systems were not always embedded in practice to provide a robust and systematic approach to improving the quality of services.

Staff told us management was more visible.

There was an improved staff culture, some of which staff attributed to a greater willingness amongst managers and the human resources department to tackle bullying issues.

We also found:

Most patients were positive about the care they received and were treated with dignity and respect. Guidelines such as those published by National Institute for Health and Care Excellence (NICE) were in place and followed.

Booking centre staff consulted with patients to ensure the appointment slot was convenient for them and accommodated their needs.

Staff spoke positively of the newly appointed leadership team, and described an improved culture and better communication between staff and managers.

Most patients and relatives we spoke with were positive about how they had been treated and we observed consistently good interactions.

Staff had appropriate safeguarding awareness and understood their safeguarding responsibilities in and protected people from abuse.

Medicines were generally stored safely and there was robust management of medicines administration records and prescription stationery.

There were improved radiography staffing levels as a result of a recent recruitment campaign.

Systems were in place to maximise patient record availability for clinics which meant staff had the information they needed before providing care and treatment.



Report to Overview and Scrutiny Committee

Date of meeting: 31 October 2017

Subject: Transformation Programme Task and Finish Review

Officer contact for further information: Peter Maddock (01992 564602)

Committee Secretary: Adrian Hendry (01992 564246)

Recommendations/Decisions Required:

- 1. That the Overview and Scrutiny Committee receive the five closure reports of the finished (high risks) projects, to enable them to compare lessons learned across projects (P013, P033, P116, P118, P136).**
- 2. That an updated Transformation Programme Project Dossier should be reviewed at each Overview and Scrutiny Committee meeting.**
- 3. That the Head of Transformation should submit an end of year report to the Overview and Scrutiny Committee, (preferably to their March meeting) summarising the project work during that year and setting out any potential areas for scrutiny for the coming year.**
- 4. That details of new projects should be submitted to the Overview and Scrutiny Committee or if appropriate to the relevant Select Committee, for their information.**
- 5. That project closure and benefits realisation reports should be submitted to the Overview and Scrutiny Committee or if appropriate to the relevant Select Committee for their information.**
- 6. That reporting of projects entering lifecycle stages be included in the Cabinet 'Highlight Report' for information.**
- 7. That arrangements be made for all members of the Select Committees and the Overview and Scrutiny Committee to receive training on transformation and the various elements of the project lifecycle.**
- 8. That members be allowed 'read only' access to the Covalent system for information. The access to be at project level.**
- 9. That the Overview and Scrutiny Committee undertake appropriate scrutiny of projects and initiatives that concern matters within the service responsibility of the Chief Executive.**
- 10. That the Overview and Scrutiny Committee receive an annual update of the Customer Services Programme from the Head of Customer Service.**
- 11. That existing projects be reported to the relevant Select Committee to be reviewed.**

Executive Report:

At the meeting of 28th February this Committee was in receipt of a PICK form from Councillor A Patel requesting that the work within Transformation Programme be subject to scrutiny by members. Initially it was proposed that the scrutiny be undertaken by the Resources Select

Committee however a special meeting of that Committee proposed that a Task and Finish Panel be established for this specific task.

At the meeting of 18th April this Committee agreed the establishment of such a panel and at the following meeting on 6th June set the terms of reference and membership of the panel.

The purpose of the panel was to recommend to this Committee the arrangements for the scrutiny of the transformation programme and those transformation projects that fell within the Office of the Chief Executive. It was noted that the latter was necessary because there are no formal scrutiny arrangements for work falling under the Chief Executive.

In order for the panel to reach an informed conclusion it was important for members to gain an understanding of transformation; what it was, what it was intended to achieve and the management processes that projects within the programme were subject to. A number of detailed reports were provided to the meetings to enable the objectives above to be explored and it was clear from the discussion in the meetings that this had been achieved.

The panel has had three meetings to consider information relating to the programme and this report summarises the work carried out and recommendations made as a result of the meetings.

The members of the Task and Finish Panel were as follows;

Members: N Avey, R Baldwin, R Bassett, N Bedford, R Brookes, K Chana, D Dorrell, S Heap, L Hughes, S Kane (Vice-Chairman), A Patel (Chairman), M Sartin, B Surtees and H Whitbread.

Councillor S Kane withdrew from the panel for the final meeting as he was appointed as the Safer, Greener and Transport Portfolioholder following the death of Councillor G Waller.

Officers: P Maddock (Assistant Director of Resources), G Chipp (Chief Executive), D Bailey (Head of Transformation), O Shaw (Head of Customer Service), S Hill (Assistant Director of Governance) and A Hendry (Senior Democratic Services Officer)

Report

The first meeting of the panel was held on 29th June. A number of questions had been put forward by the chairman to establish what the transformation programme was, its aims and objectives, timescales, costs and processes around agreeing and managing specific projects.

The Head of Transformation produced a detailed report addressing the questions posed and also included a table of the current projects underway and which directorate they fell within. It was noted however that a few of the projects and indeed the more significant and cross cutting projects were being managed by the Office of the Chief Executive for which no scrutiny panel exists.

The Committee discussed the questions in some detail and it was proposed that the next meeting follow one project from Inception to completion and the printer migration project was chosen on the basis that it had recently been completed.

There were also five questions set out on the main agenda to consider:

1. How to best to scrutinise the management of the Transformation Programme;
2. How to best monitor and assess performance of the management of the Transformation Programme;
3. How to identify projects and sub programmes not within the remit of specific Select Committees;
4. How to measure and assess performance of identified projects and sub-programmes not within the remit of specific Select Committees; and

5. Suitable forums for future scrutiny of Transformation Programme.

A number of suggestions were put forward to address the first question such as whether a new select Committee for the Office of the Chief Executive be set up or whether Overview and Scrutiny take on this role, should the scrutiny look at particular projects or the programme as a whole, should it look at the processes undertaken to determine whether or not a project is carried out, should it look at the costs of projects. There was also some discussion around the new project management software called Covalent (since rebranded as Pentana Performance) and how this would make the management of the programme much easier.

With regard to the second question again it was considered this should be explored further at the next meeting.

It was felt that questions 3 to 5 had already been answered.

The second meeting took place on 1st August, the first item was to look at the printer migration project in some detail. The panel reviewed the various stages in the life cycle of this project. It was noted that generally projects to be included would be either drawn from the Corporate Plan or the various service plans. It was noted that there was no specific member involvement in project management, however there was no reason why members suggestion for projects could not be included. It was also noted that no priority was given to projects though it was intended that this would happen going forward.

The Head of Transformation then took members through the life cycle of a transformation project in some detail.

The first stage is the charter stage at which point a project was submitted in outline with a business case setting out the expected benefits, the scope, timescales and membership of the project team. A member of the Transformation Project Board (TPB) was also assigned to the project as sponsor.

The next stage is the project initiation at which point it was noted that a Project Initiation document (PID) was produced. This contains a more detailed specification and business case for the project, enabling the TPB to make an informed decision to decide whether or not the project should proceed. The PID is quite a detailed document and looks not only at the project in isolation but considers the resource requirements and whether carrying out the project affects progress on other projects because of the limited resources available. Both the project team and TPB regularly review progress and adjust timescales and available resources as appropriate.

Once the project was completed it entered the closure stage. It was noted that whilst a project might have completed, some support would still be given afterwards particularly as the benefits often do not materialise straight away but rather over a period of time. It is important to review the project and measure the actual benefits against those expected to see whether it had achieved its objectives and whether there were any lessons to be learnt from the project.

The panel considered that going forward select committees could have a role in reviewing closure reports and that select committee members should receive some training on the various elements of the project lifecycle.

The Panel received a report on the risk management strategy as it applied to the Transformation Programme and it was noted that the approach was in line with the Council's existing approach. It was also noted that the TPB considered the risks of each project as part of its role in managing the PID process including risks to other projects in the programme.

The Panel also considered the methodology adopted for the assessment of risk as it applied to the Transformation Programme in general and to the printer migration project specifically.

The Head of Transformation then provided a demonstration of the functionality within the Covalent system. The system was felt to be the most appropriate to support the programme and assist in monitoring targets and objectives. The following benefits were also noted:-

- progress and performance information brought together within a single system;
- easy updating of progress and performance in response to email notification, removing the need for previous time consuming paper-based systems;
- clear identification of slippage against targets and timescales;
- easy report generation, also removing the need for previous time consuming paper based systems;
- opportunities for action to be escalated if information not input within specified timescales; and
- timely and readily accessible information available to managers and officers.

It was noted that the system was a cloud based system though the information contained therein was in Council ownership. It was also noted that other information could be included on the system for example Key Performance Indicator information was to be added and that including the Corporate Plan and Corporate Risk Register was being investigated further.

It was also reported that member access to the system could be arranged and the panel might like to include this in their recommendations to the Overview and Scrutiny Committee.

The Panel also considered the arrangements for scrutiny of those projects falling within the scope of the Office of The Chief Executive and felt it was appropriate that the Overview and Scrutiny Committee could take on this role.

The panel considered a number of items for its next meeting with a view that this would be the final meeting and that recommendations to this Committee would be formulated at that meeting.

The final meeting was held on 11th September, the first item was to look at the schedule of project progress by select committee. It highlighted the following:

- a. Workstream;
- b. Project reference number and title;
- c. Current project lifecycle stage;
- d. Risk Potential Assessment – High / Medium;
- e. Start and due dates;
- f. Select Committee for scrutiny;
- g. Level of completion (as percentage); and
- h. Project Sponsor and Project Manager.

It was noted that the Cabinet received regular updates on an exception basis. The report gave the following information:

- a) The number of high and medium complexity projects, alongside a summary of how such projects are managed;
- b) Overall progress indicators for 'time', 'cost', 'delivery / outcomes / outputs' and 'benefits' for the period, given as a Red / Amber / Green alongside actual numbers;
- c) Actions – the number of actions in progress during the period;
- d) Project closures – the projects closed during the period; and any
- e) Overdue actions for the period and remedial actions for the next period.

Information for future highlight reports was given and an example of such a report was tabled for information.

The panel gave this information some consideration. The question of project prioritisation

was again raised and also providing an indication of return on investment. It was pointed out that where there was a significant financial benefit to be gained from carrying out a particular project it might be that this should be prioritised ahead of other projects, though the Council had objectives that were of a non-financial nature and financial return alone could not be the sole driver for prioritising projects.

The Head of Transformation took members through the Transformation Programme Project Dossier. It was noted that the information provided was only a week old which was well received as members find it frustrating that information received can sometimes be several months old. It was further noted that with access to Covalent the latest information could be available on an ongoing basis.

Scrutiny of projects was further discussed and it was noted that scrutiny should look at whether the right processes were in place to rectify any problems. Also how was the interaction between projects managed. It was pointed out that this was exactly the sort of problem Covalent had been brought in to assist with managing as it was not easy otherwise.

It was also proposed that this Committee look at projects on their completion though perhaps the relevant select committee should receive the closure reports as a matter of course and should look back from a distance and ask questions and note what was learned.

The next item was related to the recovery and risk around the Covalent system. As previously noted the system is a cloud based system and difficulties affecting the Council's continued use were assessed as low with a medium impact and as such this risk was being monitored. Questions around the continuity were raised however this would be addressed as part of the ICT strategy which was due to be considered initially by the Resources Select Committee at its meeting on 17th October.

The next item considered the costs and benefits of the Transformation Programme. It was broken down into four areas:

1. Transformation Team Structure and Cost Estimate - There are four established posts in the Programme Management team of which about 2.5 FTE's were directly involved in transformation activities. There is also support provided in the form of apprentices/interns funded from a different budget. It was noted that the cost was £206,500 but this specifically excluded the Head of Customer Services on the basis that she was specifically leading on the customer services project. In effect around £130,000 was attributable to transformation activities.

It was also noted that a sum of £100,000 had been set aside from the District Development Fund (DDF) to fund activities in support of the programme of which £30,000 had so far been spent. Overall the team are supporting 55 projects of varying degrees of complexity.

It was noted that the team was quite small given the number of projects being pursued and managing absences could be quite difficult, however so far the issue had not arisen and rebalancing the workload might be necessary if such an issue occurred.

The question of transferring transformation officer skills into the business as usual side of the council was posed. It was pointed out that a significant number of managers had undergone transformation training. It was also suggested such training could be made available to members.

2. Benefits from Management of the Transformation Programme – An assessment of the Council's capability in project, programme and portfolio management had been undertaken, using the Portfolio, Programme and Project Management Maturity Model (P3M3). Seven process perspectives are identified which are:-

- Management control;
- Benefits management;

- Financial management;
- Stakeholder management;
- Risk management;
- Organisational governance; and
- Resource management.

It was noted that the Council had increased its capacity to successfully manage projects and plans were now in place to reach the target performance levels in time for the next Corporate Plan.

3. Individual Project Costs – Work is ongoing to identify costs and benefits both financial and non-financial. The direct costs of projects are tracked however it was difficult to track officer time on project management particularly when the resources were already existing and it is reasonable to ask the question of what value there is in measuring this anyway.

The question of the use of external resources was raised and it was noted that if additional resources were required and the expertise did not exist in house then external support would be considered.

4. Individual Project Benefits: Financial and Non-Financial – Any benefits from the Transformation projects are expected to contribute to the four key benefits previously agreed by cabinet:-

- Improved customer value – recognising what customers' value about our services and placing them at the heart of everything we do;
- Reduced waste – Focussing on getting things right first time through joined up services;
- Increasing agility – Reducing red tape to simplify how we work; and
- Increased savings and income – Delivery of resource savings and income generation, to keep Council Tax low.

It was noted from research that around 12-18% of project cost was related to management. From two projects analysed recently only around 6% was for project management. This could be good value for money or an indication that not enough resources had been committed to this work and further research would be required to establish which of these was true.

The question of measuring financial and non-financial benefits was discussed and in particular measuring the two against each other. It was noted that a 'notional' monetary value could be assigned to a non-financial benefit but this would be somewhat subjective and easily open to challenge.

It was noted that the reports submitted had enabled members to gain a clear understanding of what transformation was all about, the role of the Transformation Team, the lifecycle of a project and the management processes around the various projects within the programme.

The chairman thanked officers for their support and the meeting concluded by formulating the recommendations to this committee shown above.

Reason for decision:

Options considered and rejected:

The panel could have concluded that it was unnecessary to scrutinise the Transformation programme at all, recommend the setting up of a further select committee for the Office of the Chief Executive or assigned the work to one of the existing select committees.

Given the importance, high profile and cross cutting nature of the work undertaken by the Transformation Team it was concluded that scrutiny of the programme was essential and

asking the Overview and Scrutiny Committee to undertake the scrutiny of those projects assigned to the Office of the Chief Executive was the best course of action. Also the relevant select committees should consider the projects within their remit and add them to their work programme.

Resource implications:

There are no additional resource requirements identified. Any member training may come at a small cost which can be managed within existing budgets.

Legal and Governance Implications:

No implications identified. Like all other Council areas the transformation programme is subject to Council governance arrangements.

Safer, Cleaner Greener Implications:

No implications identified.

Consultation Undertaken:

The report is a summary of three Transformation Task and Finish Panel meetings and apart from consultation with the Chairman and other officers in the panel further consultation is felt unnecessary.

Background Papers:

None.

Impact Assessments:

Risk Management:

All projects within the transformation programme and indeed the programme itself is subject to the Councils risk management procedures. The risks associated with each project are assessed as part of the PID process and managed as the projects progresses.

Equality:

There are no equality impacts arising as a result of this report.

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SCRUTINY



Report to the Overview and Scrutiny Committee

Date of meeting: 31 October 2017

Subject: Overview & Scrutiny Select Committees - Membership 2017/18

Officer contact for further information: S. Tautz (01992 564180)

Democratic Services Officer: A. Hendry (01992 564246)

Recommendations/Decisions Required:

- (1) That the Committee make appointment to the vacancies on the Resources Select Committee and the Governance Select Committee for the remainder of the 2017/18 municipal year, arising from the appointment of Councillor S. Kane as the Safer, Greener and Transport Portfolio Holder; and**
- (2) That, also as a result of the appointment of Councillor S. Kane as the Safer, Greener and Transport Portfolio Holder, the Committee make appointment to the position of the Chairman of the Resources Select Committee for the remainder of the municipal year (and, if necessary, the Vice-Chairman of the Select Committee).**

Report

1. (Director of Governance) Following the death of Councillor G. Waller earlier in the year, Councillor S. Kane has been appointed by the Leader of the Council as the Safer, Greener and Transport Portfolio Holder for the remainder of the 2017/18 municipal year.
2. Prior to his appointment as the Portfolio Holder, Councillor Kane was a member of the Overview and Scrutiny Committee. The Council's Constitution provides (Article 6, Paragraph 5) that members of the Executive may not be members of the Overview and Scrutiny Committee and, at its meeting on 26 September 2017, the Council appointed Councillor J Lea to the vacancy on the Committee arising from the appointment of Councillor Kane as the Safer, Greener and Transport Portfolio Holder.
3. Appointments to the positions of Chairman and Vice-Chairman of the select committees are reserved to the Overview and Scrutiny Committee. These appointments are excluded from the calculation arising from the existing protocol on the allocation of chairman and vice-chairman positions for other committees, sub-committees and panels.

Resources Select Committee

4. Until his appointment as the Safer, Greener and Transport Portfolio Holder, Councillor Kane was the chairman of the Resources Select Committee. However, the Council's Constitution also provides (Article 6, Appendix 1) that Cabinet members may not be a member of a select committee that deals directly with matters within the responsibilities of their portfolio. Given that the budgetary responsibilities of the Resources Select Committee are likely to be of relevance to all executive portfolios, it is not considered appropriate for Councillor Kane to continue to be a member of the Select Committee.

5. Nominations received for the vacancy on the Resources Select Committee will be reported at the meeting.
6. The Committee is requested to make appointment to the vacancy on the Select Committee for the remainder of the municipal year. If more than one nomination is received for the vacancy, the Committee will be required to vote on this appointment.
7. The Committee is also requested to make appointment to the position of the Chairman of the Resources Select Committee for the remainder of the municipal year (and, if necessary, the Vice-Chairman of the Select Committee). The following nomination for the position of Chairman of the Select Committee has been received from the Conservative Group:

Councillor A. Patel
8. As Councillor Patel is currently the Vice-Chairman of the Resources Select Committee for 2017/18, the Conservative Group has also nominated the following member as the Vice-Chairman of the Select Committee for the remainder of the municipal year:

Councillor D. Sunger
9. If more than one nomination is received for the position of Chairman of the Select Committee, the Overview and Scrutiny Committee will be required to vote on this appointment.

Governance Select Committee

10. Councillor S. Kane was also currently a member of the Governance Select Committee for 2017/18. It is understood that, arising from his appointment as Safer, Greener and Transport Portfolio Holder, Councillor Kane wishes to relinquish his membership of the Select Committee.
11. Nominations received for the vacancy on the Governance Select Committee will be reported at the meeting.
12. The Committee is requested to make appointment to the vacancy on the Governance Select Committee for the remainder of the municipal year. If more than one nomination is received for the vacancy, the Committee will be required to vote on this appointment.



SCRUTINY



Report to the Overview and Scrutiny Committee

Date of meeting: 31 October 2017

Subject: Executive Decisions - Call-In

Officer contact for further information: S. Tautz (01992 564180)

Democratic Services Officer: A. Hendry (01992 564246)

Recommendations/Decisions Required:

That the Committee note the withdrawal of a call-in request in regard to the proposed relocation of the Council's Housing Repairs and Housing Assets Services to the Oakwood Hill Depot at Loughton.

Report

1. (Director of Governance) A valid call-in (attached) was received by the Chief Executive on 14 September 2017, in connection with the decision (Reference C-015-2017/18) of the Cabinet at its meeting on 7 September 2017, with regard to the proposed relocation of Housing Repairs and Housing Assets to the Oakwood Hill Depot at Loughton. The call-in was supported by the requisite number of members of the Council.
2. At the request of the lead member for the call-in, this matter was considered at a meeting convened in accordance with the procedure for the 'Withdrawal or modification of a call-in' contained in Article 6 (Overview and Scrutiny) of the Council's Constitution. As a result, the Housing Portfolio Holder has agreed to ensure that an appropriate transport assessment is undertaken with regard to the proposed relocation of Housing Repairs and Housing Assets to the Oakwood Hill Depot, prior to the preparation and submission of any planning application required for the provision of increased car parking facilities at the Depot.
3. This approach was supported by the lead member to the call-in. With the agreement of the lead member, the Chairman of the Overview and Scrutiny Committee has therefore determined that the call-in be treated as withdrawn.

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EPPING FOREST DISTRICT COUNCIL

Notification of Call-In of Cabinet or Portfolio Holder Decision under Paragraphs 45-52 of Article 6 (Overview & Scrutiny) of the Constitution

This form must be signed and completed and the original returned to the Proper Officer in person no later than the fifth working day following the publication of the decision to be called-in

Decision to be called-in:

Relocation of Housing Repairs and Housing Assets to Oakwood Hill Depot

Decision reference:

Cabinet Decision (7 September 2017)

Report reference: C-015-2017/18

Portfolio:

Housing Portfolio

Description of decision:**Decision:**

- (1) That the Housing Repairs Service and the Housing Assets Team be relocated to the Oakwood Hill Depot, Loughton to co-locate with the existing Fleet Operations and Grounds Maintenance Services at an estimated cost of the works (excluding fees) of £755,000 funded from the Housing Revenue Account (HRA);
- (2) That the Capital costs of the relocation be funded from the existing 4 budget allocation of £3.2million for the provision of the Repairs and Maintenance Hub;
- (3) That, once assessed by Price Waterhouse Coopers as part of the Stage 2 Accommodation Review, the fit-out costs of the open plan area, based on an agile working environment, be also funded from the existing Capital budget provision;
- (4) That the remaining existing Capital budget provision be deleted from the Capital Programme to realise a Capital saving;
- (5) That a separate report be considered by the Housing Portfolio Holder on the appointment of a multi-discipline Consultancy Service to oversee the detailed design, procurement process and contract management, with any fees being funded from the existing Capital provision;
- (6) That the Council's Country Care Service and Nursery Service no longer be relocated to the Oakwood Hill Depot as previously planned and that an alternative venue be sought elsewhere in the District for these services;
- (7) That a planning application be submitted for the required off-site parking for staff and visitors at the Oakwood Hill Depot during working hours;
- (8) That the off-site parking be made available to residents of the Oakwood Hill Estate and visitors to the Roding Valley Nature Reserve free of charge outside office hours; and
- (9) That a report be submitted to a future meeting of the Cabinet by the Director of

Neighbourhoods on the most appropriate future use for the Council's land at Blenheim Way in North Weald.

Reason for call-in

We agree with most of the decision. It is clearly better to make good use of the Oakwood Hill depot rather than spend large capital sums on a so-called hub at North Weald. The points we are questioning are:

- (1) The printed decision is incomplete, in that the Leader stated at the end of the Cabinet debate that alternatives to taking green recreational land for a staff car park would be fully explored, yet the printed decision sets out parameters for the use of such a car park, thereby making it appear a foregone conclusion; and
- (2) The process and timetable by which the undertaking to investigate alternatives to the car park are to be undertaken is not stated, and this will need to be clearly established before any planning application is even considered

We are confident that points 1 and 2 could be cleared by an informal meeting as provided for under the Constitution. We do not envisage at present that a full Overview and Scrutiny Committee meeting will be needed.

**Members requesting call-in
(3 members of the Overview and Scrutiny Committee or 5 other members)**

Member:	Signed:
Councillor C C Pond (lead member)	
Councillor C Roberts	
Councillor S Murray	
Councillor D Roberts	
Councillor C P Pond	
Office Use Only: Date Received: 14 September 2017	

Report to Overview & Scrutiny Committee

Date of meeting: 31 October 2017



Subject: Transport for London - Scrutiny of External Organisations

Officer contact for further information: S. Tautz (01992) 564180

Democratic Services Officer: A. Hendry (01992) 564246

Recommendations/Decisions Required:

That the Committee consider and agree the scope of further external scrutiny of Transport for London (TfL), with regard to the local bus services provided within the Epping Forest District by TfL.

1. (Director of Governance) Members will recall that representatives of Transport for London (TfL) attended the meeting of the Overview and Scrutiny Committee in December 2016, in response to the concerns of the Committee with regard to aspects of Central Line service provision and infrastructure in the Epping Forest District.
2. At its last meeting, the Committee requested that TfL be invited to attend a future meeting to respond to the concerns of members with regard to other aspects of local transport services, specifically including bus service provision by TfL within the District. It is hoped that appropriate officers of TfL will be able to attend the meeting of the Committee to be held on 9 January 2018.
3. In accordance with the procedure previously agreed by the Committee, members are therefore now asked to consider and agree the scope of such external scrutiny of local bus services and appropriate lines of questioning for TfL, in order that prior notice of the overarching themes and specific issues to be raised by members can be provided to TfL, to ensure that maximum value is derived from this external scrutiny activity.
4. Members are also asked to give direction on the preferred approach of the Committee to the format of such external scrutiny, particularly in terms of the scope of any formal presentation that may be required from TfL. The Committee should ensure that it identifies clear objectives for any such presentation.
5. There may be public interest in the Council's intended scrutiny of local bus services and infrastructure and the Committee may therefore wish to identify appropriate proactive publicity to raise awareness of the concerns of members, so as to make the process as meaningful and useful as possible.
6. As members will be aware, TfL do not provide many of the bus services currently operating within the District. Essex County Council is the appropriate passenger transport authority for services not operated by TfL.

Resource Implications:

The recommendations of this report seek to enable scrutiny activity to more effectively meet work programme requirements.

Legal and Governance Implications:

The Council's constitution sets out rules for the management of its overview and scrutiny responsibilities. Although external organisations are not generally required by legislation to attend before the Overview and Scrutiny Committee, it is hoped that most would be willing to engage constructively with the Council's scrutiny activity when invited to do so.

Safer, Cleaner, Greener Implications:

There are no implications arising from the recommendations of this report in respect of the Council's commitment to the Climate Local Agreement, the corporate Safer, Cleaner, Greener initiative, or any crime and disorder issues within the district.

Consultation Undertaken:

The scrutiny of a number of overarching themes and specific issues of local Central Line services and infrastructure were identified by the Committee at its meeting on 19 July 2016.

Background Papers:

None

Impact Assessments:

Risk Management

The Council's constitution sets out rules for the management of its overview and scrutiny responsibilities.

Equality:

There are no equality implications arising from the recommendations of this report.

Report to Overview and Scrutiny Committee

Date of meeting: 31 October 2017



Portfolio: Leader (Councillor C. Whitbread)

Subject: Key Objectives Key Action Plan 2017/18 – Quarter 1 performance

Responsible Officer: Monika Chwiedz (01992 562076)

Democratic Services Officer: Adrian Hendry (01992 564246)

Recommendations/Decisions Required:

- (1) That the Committee review Q1 progress in relation to the Corporate Plan Key Action Plan for 2017/18; and**
- (2) That the Committee identify any actions arising from the Key Action Plan for 2017/18, that require in-depth scrutiny or further report on current progress.**

Executive Summary:

The Corporate Plan is the Council's key strategic planning document, setting out its priorities over the five-year period from 2015/16 to 2019/20. The priorities or Corporate Aims are supported by Key Objectives, which provide a clear statement of the Council's overall intentions for these five years.

The Key Objectives are delivered by an annual action plan, with each year building upon the progress against the achievement of the Key Objectives for previous years. The annual action plans contain a range of actions designed to achieve specific outcomes and are working documents and are therefore subject to change and development to ensure the actions remain relevant and appropriate, and to identify opportunities to secure further progress or improvement.

The Corporate Plan Key Action Plan for 2017/18 was adopted by Council at its meeting on 27 September 2016. Progress in relation to individual actions and deliverables is reviewed by the Cabinet and the Overview and Scrutiny Committee on a quarterly and outturn basis.

Reasons for Proposed Decision:

It is important that relevant performance management processes are in place to review progress against the key objectives, to ensure their continued achievability and relevance, and to identify proposals for appropriate corrective action in areas of slippage or under-performance. This report presents progress against the Key Action Plan for 2017/18 at the end of the first quarter (30 June 2017).

Other Options for Action:

No other options are appropriate in this respect. Failure to monitor and review performance against the key objectives, and to consider corrective action where necessary, could have negative implications for the Council's reputation, and might mean that opportunities for improvement were lost. The Council has previously agreed arrangements for the review of progress against the key objectives.

Report:

1. The Corporate Plan 2015-2020 is the Council's highest level strategic document. It sets the strategic direction for the authority for the five year lifetime of the Plan. It focuses on a number of key areas that the Council needs to focus on during that time and helps to prioritize resources to provide quality services and value for money. These key areas are known as the Corporate Aims and are supported by a set of Key Objectives which represent the Council's high-level initiatives and over-arching goals to achieve the Corporate Aims. The Key Objectives are in turn, delivered via an annual Key Action Plan.
2. The Key Action Plan 2017/18 is populated with actions or deliverables designed to secure progress against each of the Key Objectives during 2017/18. During the subsequent years in the lifetime of the Key Objectives, annual action plans will be developed which build on progress achieved during preceding years.
3. The annual action plans are working documents and are therefore subject to change and development to ensure that the actions remain relevant and appropriate, and to identify opportunities to secure further progress or improvement.
4. Progress against the Key Action Plan is reviewed on a quarterly basis to ensure the timely identification and implementation of appropriate further initiatives or corrective action where necessary. A schedule detailing Quarter 1 progress against the fifty (50) individual actions of the 2017/18 Key Action Plan, is attached as Appendix 1 to this report. In reporting progress, the following 'status' indicators have been applied to the to individual actions:

Achieved (Green) - specific deliverables or actions have been completed or achieved in accordance with in-year targets;

On-Target (Green) - specific deliverables or actions will be completed or achieved in accordance with in-year targets;

Under Control (Amber) - specific deliverables or actions have not been completed or achieved in accordance with in-year targets, but completion/achievement will be secured by a revised target date (specified) or by year-end;

Behind Schedule (Red) - specific deliverables or actions have not been completed or achieved in accordance with in-year targets and completion/achievement may not be secured by year-end; and

Pending (Grey) - specific deliverables or actions cannot currently be fully completed or achieved, as they rely on the prior completion of other actions or are dependent on external factors outside the Council's control.

5. There are 50 actions in total for which progress updates for Q1 are as follows:

• Achieved or On-Target:	46 (92%)
• Under Control:	0 (0%)
• Behind Schedule:	3 (6%)
• Pending:	1 (2%)
Total	50 (100%)

6. The Overview and Scrutiny Committee is requested to review progress against the key objectives Key Action Plan for 2017/18 at Quarter 1.

Resource Implications: None for this report.

Legal and Governance Implications: None for this report. Performance monitoring contributes to the delivery of value for money.

Safer, Cleaner, Greener Implications: None for this report.

Consultation Undertaken: The performance information set out in this report has been submitted by each responsible service director.

Background Papers: Relevant documentation is held by responsible service directors.

Impact Assessments:

Risk Management: None for this report.

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Aim 1. To ensure that the Council has appropriate resources, on an ongoing basis, to fund its statutory duties and appropriate discretionary services whilst continuing to keep Council Tax low




Objective 1.a. To ensure that the Council's Medium Term Financial Strategy (MTFS) plans to meet the Council's financial and service requirements for any forward five year period, whilst minimising any reliance on Government funding

Action	Lead Directorate	Target Date	.	Status	Progress notes
1. Implement the Council's future options review for the HRA Financial Plan, in light of Government requirements to reduce Council house rents by 1% p/a for 4 years and to sell 'higher value' empty Council properties.	Communities	31-Mar-2018	●	Achieved	Q1 – Completed. The Council Housebuilding Programme has re-commenced; Cabinet has agreed the purchase of completed affordable homes from the purchaser of the Pyrles Lane Nursery development; and the Housing Maintenance Programme has been re-configured to reduce the amount of improvements to the Council's housing stock in accordance with the decision to revert to the Decent Homes Standard from the Modern Home Standard
2. Prepare for the implementation of the sale of 'higher value' empty Council properties, to pay the Government's annual levy and meet the requirements of the Housing and Planning Act 2016	Communities	31-Mar-2018	●	On Target	Q1 – Not yet required –Government decision on the future of this proposed policy is awaited
3. Deliver savings and generate income identified for 2017/18 as approved by the Cabinet	Management Board	31-Mar-2018	●	On Target	Q1 (2017/18) Langston Road will open this quarter. Savings initiative on track.
4. Prepare to deliver savings and generate income for 2018/19 within the Medium-Term Financial Strategy	Management Board	31-Mar-2018	●	On Target	Q1 - Not yet due, will be addressed in budget process for 2018/19
5. Develop additional business cases, including the use of the 'Invest to Save' Fund, to address the need for net savings and income generation in subsequent years	Management Board	30-Sep-2017	●	On Target	Q1 - Not yet due.

Objective 1.b. To continue to review and develop the Council's own assets and landholdings for appropriate uses, in order to maximise revenue streams and capital receipts, and to deliver the following key projects:

- The Epping Forest Shopping Park, Loughton
- Council Housebuilding Programme
- St John's Redevelopment Scheme, Epping
- North Weald Airfield

Action	Lead Directorate	Target Date	.	Status	Progress notes
1. Deliver Phase 1 of the Council Housebuilding Programme, to provide 23 new affordable rented homes	Communities	31-May-2017	●	On Target	Q1 - Good progress being made. A number of homes have been handed over in phases. Completion due in September 2017. An Official Opening centred on John Scott Court is planned for October 2017
2. Progress Phases 2 and 3 of the Council Housebuilding Programme, to provide 85 new affordable rented homes	Communities	31-Mar-2018	●	On Target	Q1 – Good progress being made with Phase 2 (Burton Rd, Loughton).The sites under Phase 3 have commenced
3. Procure Phases 4, 5 and 6 of the Council Housebuilding Programme, to provide new affordable rented homes	Communities	31-Mar-2018	●	On Target	Q1 – Discussions are being held with the Council's Development Agent, East Thames, on the options for procuring consultants and appointing their consultants.
4. Purchase 8 affordable rented properties from the private developer of the development at Barnfield, Roydon, as part of the Council's Housebuilding Programme	Communities	31-Mar-2018	●	On Target	Q1 – Good progress being made. The homes are due to be handed over by the private developer in Autumn 2017.
5. Establish a pilot for modular accommodation to meet the housing needs of six single homeless residents	Communities	31-Mar-2018	●	On Target	Q1 – A Brief has been formulated for the appointment of Employers Agent – and tenders have been received. Once appointed, the successful EA will specify and procure the works, and the Council's nominated supplier will provide the units.
6. Relocate the Housing Repairs Service from the Epping Depot to the Oakwood Hill Depot, Loughton	Communities	31-Mar-2018	●	On Target	Q1 – The Project Team has identified 5 options forco-locating the Housing Repairs Service with Grounds Maintenance and Fleet Operations. A solution for the problem of staff parking is being formulated. A Consultant QS is currently costing the options. A report on the proposed approach will be submitted to Cabinet shortly. PwC, the Council's Accommodation Consultants,

					are liaising with the Project Team Chair over linkages with the Council's Accommodation Strategy
7. Sell the Council-owned nursery site at Pyrles Lane, Loughton, to deliver a capital receipt	Neighbourhoods	31-Dec-2017		On Target	Q1 - Report on the value and marketing strategy for Pyrles Lane Nursery now agreed by Cabinet, to include provision for affordable housing and a financial contribution to the redevelopment at Town Mead Depot to accommodate the Council's nursery service, which no longer can be accommodated at the new Oakwood Hill Depot.
8. Subject to the agreement of Cabinet, enter into a Development Agreement with the purchaser of the nursery site at Pyrles Lane, Loughton, for the Council to purchase the affordable rented homes provided on the site, as part of the Council's Housebuilding Programme	Communities	31-Dec-2017		On Target	Q1 – In July, Cabinet has agreed the purchase of completed affordable homes from the purchaser of the Pyrles Lane Nursery development. The detailed arrangements will be set out in the Marketing Brief to consultants at the appropriate time.
9. Deliver an approach to North Weald Airfield with an agreed operating partner, to maximise the use of the facilities	Neighbourhoods	31-Mar-2018		On Target	Q1 - Awaiting results of the Local Plan Employment Land Review which will give direction to the scale and type of future uses that the Airfield could accommodate.
10. Open the Epping Forest Shopping Park, to deliver local jobs and economic development	Neighbourhoods	30-Sep-2017		On Target	Q1 - Council received the building after practical completion in mid-June 2017. Tenants now fitting out with opening scheduled for late September 2017. Highways Section 278 Works to be completed by end of August 2017.
11. Develop the St John's Road site, to deliver local jobs and economic development	Neighbourhoods	31-Mar-2018		Behind Schedule	Q1 - Negotiations completed on Tri-Partite Agreement with Town Council and Frontier Estates. In hands of Legal Representatives for final sign off end July 2017.
12. Produce a plan to implement agreed recommendations from the Service Accommodation Review, to optimise the use of the Council premises	Transformation Programme Board	31-Mar-2018		On Target	Q1 - On target. Following a competitive procurement exercise PricewaterhouseCoopers have been commissioned to provide support for Phase 2 of the Accommodation Review. The review is scheduled to report to Cabinet in time for consideration for the 2018/19 budget.
13. Deliver the 2017/18 works from the Facilities Management Programme	Resources	31-Mar-2018		Behind Schedule	Q1 - Behind target. Several schemes have been put on hold pending the outcome of the Accommodation Review. A revised schedule of works will be presented to Cabinet in the autumn.

Objective 1.c. To explore appropriate opportunities to make savings and increase income through the shared delivery of services with other organisations, where such arrangements would provide improved and/or more cost effective outcomes

Action	Lead Directorate	Target Date	.	Status	Progress notes
1. Enter into a further long-term shared service agreement to manage Lowewood Museum on behalf of Broxbourne Borough Council, to generate income	Communities	30-Jun-2017	●	On Target	Q1 – The revised SLA has been produced and approved by EFDC's Leisure and Community Services Portfolio Holder. However, delays are being experienced with Broxbourne BC signing the agreement, which is being pursued Q1. SLA with Broxbourne BC currently being scrutinized by BBC O&S committee, as part of financial efficiency plan. Cabinet decision to be made on 11th July.
2. Subject to the successful receipt of National Portfolio Organisation (NPO) status from Arts Council England, evaluate the potential for partnership working with Chelmsford Borough Council for museum and cultural services	Communities	31-Mar-2018	●	On Target	Q1 - Unfortunately the No Borders partnership application to Arts Council England was not successful, due to the number of applications that were received and the 'balance process' applied to assessing bids. Our bid was recommended by ACE Eastern Region, for national evaluation, which assesses each application on geographical spread of investment; diversity in the organisation and specialisation. As our services are in an area of already high ACE investment and the organisation is not 'diversity-led we were unsuccessful this time. However, we have been advised that our bid was very strong and that we can access alternative 'project' funding to deliver some of the proposed business plan. We have a firm commitment with Chelmsford Council to work together on this, going forward
3. Evaluate the potential to expand the provision of legal services provided to other authorities, to generate income	Governance	31-Dec-2017	●	On Target	Q1 - Retained the Lexcel accreditation to assist the marketing of the legal service. Networked through attendance at various special interest groups within the public law partnership.
4. Complete a new off-street parking contract to manage the Council's car parks with an alternative provider to increase efficiency and reduce costs	Neighbourhoods	01-Apr-2017	●	Achieved	Q1 - New Off-Street Contract successfully let to NSL who started their management responsibilities from 1 April 2017. Increased level of enforcement activity, particularly at weekends has been achieved.
5. Provide payroll service jointly with Braintree and Colchester Councils and sign up at least one more partner authority or one other authority to buy in our service, to deliver savings	Resources	31-Mar-2018	●	On Target	Q1 - The joint working on the payroll service and further development of additional modules continues to go well. Initial discussions have been held with one potential partner but this seems unlikely to proceed at the moment.

6. Implement the recommendations of the Reprographics Service Review, to make savings and improvements to print services	Resources	31-Mar-2018		On Target	Q1 - The review continues to make good progress and shared service opportunities are being discussed with two other authorities.
7. Develop an approach to shared service review, to establish opportunities for sharing services with other public sector partners	Transformation Programme Board	31-Mar-2018		On Target	Q1 - Discovery has been undertaken to map existing EFDC shared services, as well as research to compare the EFDC approach to other local authorities. Findings and a recommended approach will be presented to the Transformation Programme Board in Quarter 2.

Aim 2. To ensure that the Council has a sound and approved Local Plan and commences its subsequent delivery

Objective 2.a. To produce a sound Local Plan, following consultation with local residents and working with neighbouring councils, that meets the needs of our communities whilst minimising the impact on the District's Green Belt

Action	Lead Directorate	Target Date	.	Status	Progress notes
Facilitate and ensure that accommodation provided to nursery workers is fit for purpose, through implementation of the Nursery Workers Accommodation Action Plan	Communities	31-Mar-2018		On Target	Q1 – The Council's Nursery Worker Task Force continues to meet to progress the Action Plan. The Lea Valley growers have agreed, in principle, to work with the Council to implement their trade body's recently published accommodation standards for nursery workers – which is a positive (but early) step forward in improving the housing conditions for workers.
2. Complete the new Local Plan in accordance with the National Planning Policy Framework and in the timescales outlined in the adopted Local Development Scheme (LDS)	Neighbourhoods	31-Mar-2018		On Target	Q1 - Results of the Regulation 18 Consultation reported to Cabinet. Key issues identified to include an analysis of Settlement Level. Local Development Scheme to be updated in October 2017.
3. Update the Council's Housing Strategy, following production of the Draft Local Plan 'Preferred Options Approach'	Communities	31-Dec-2017		On Target	Q1 - A Draft Housing Strategy has been produced, on which consultation with the Communities Select Committee has been undertaken. It was intended to submit the Housing Strategy to Cabinet in July 2017 for adoption. However, due to the good progress being made with the Local Plan, which is a dynamic process, the inter-relationship with the Local Plan process in the Housing Strategy is being reviewed. A revised Housing Strategy will be submitted to the Cabinet for consideration in Autumn 2017.

Objective 2.b. To increase opportunities for sustainable economic development within the District, in order to increase local employment opportunities for residents

Action	Lead Directorate	Target Date	.	Status	Progress notes
1. Adoption and publication of the Local Plan Regulation 26, including site allocations for employment land and policies maps	Neighbourhoods	30-Oct-2018	●	On Target	Q1 - Work to prepare evidence base ongoing. Workshops held with Members on Infrastructure Delivery Plan. Open Space, Playing Pitches and Indoor Sports Study commenced. Site Assessment work has started on the 160 new/amended sites arising as a result of the Regulation 18 Consultations.
2. Provide sustainable employment opportunities for the district's young people through development of the Council's apprenticeship scheme	Resources	31-Mar-2018	●	On Target	Q1 - Recruitment processes are underway for the new cohort of apprentices.
3. Lead the development of Harlow and Gilston Garden Town in partnership with East Herts and Harlow Councils, to delivery housing and economic development across west Essex	Neighbourhoods	31-Mar-2018	●	On Target	Q1 - Duty to Co-operate activities ongoing. Garden City Project proceeding with the commissioning of two pieces of external consultancy in relation to "Visionary" and "Governance". Work commenced on mitigation plan for the Air Quality MOU to reduce potential impacts on Epping Forest.

Objective 2.c. To deliver the Council's new Leisure and Cultural Strategy, in order to maximise participation and value for money in the provision of leisure and cultural services to local residents and visitors

Action	Lead Directorate	Target Date	.	Status	Progress notes
1. Subject to the receipt of funding from Arts Council England, establish a Museum Development Trust to increase income for museum services	Communities	31-Mar-2018	●	On Target	Q1 – Very good progress is being made with this exciting initiative. The Memorandum and Articles of Association for the new limited company and charity have been approved by the Leisure and Community Services Portfolio Holder, following a briefing held for senior EFDC and BBC officers and members. The first round of interviews was held for trustees in June and five have been appointed, in addition to the respective Portfolio Holders from each Council.
2. Deliver the transition of the Council's leisure facilities to a new partner through contract management	Neighbourhoods	01-Apr-2017	●	On Target	Q1 - Contract with PfP successfully mobilised and management transferred to new contractor from the 1 April 2017. All staff successfully transferred under TUPE and service improvements have commenced to include major extension

					to Loughton Leisure Centre and reconfiguration of Health and Fitness facilities at Epping Sports Centre.
3. Develop a new leisure centre in Waltham Abbey, to deliver savings and improved facilities	Neighbourhoods	30-Nov-2018	●	On Target	Q1 - Detailed planning provision granted by District Development Management Committee and contractor mobilised on site to demolish existing community building. Main construction works for new Leisure Centre due to commence in September 2017 with practical completion targeted at November 2018.
4. Establish 3 multi-agency groups to contribute to the health, well-being and safety priorities of our residents, to improve quality of life	Communities	31-Mar-2018	●	Achieved	Q1 - All three Health and wellbeing focus groups have been established and initial meetings have been held. This includes Start Well (0-19's), Age Well (20's – 60's) and Stay Well (60+).

Aim 3. To ensure that the Council adopts a modern approach to the delivery of its services and that they are efficient, effective and fit for purpose


Objective 3.a. To have efficient arrangements in place to enable customers to easily contact the Council, in a variety of convenient ways, and in most cases have their service needs met effectively on first contact

Action	Lead Directorate	Target Date	.	Status	Progress notes
1. Deliver the 2017/18 works from the Council's Transformation Programme, achieving key benefits for our customers	Transformation Programme Board	31-Mar-2018	●	On Target	Q1 - Work is proceeding well on the Council's Transformation Programme, with programmes and projects on course to deliver outputs to time and budget.
2. Produce a plan to implement the Workforce Development Strategy, to establish a new common operating model	Resources	31-Mar-2018	●	On Target	Q1 - A Programme Definition Document has been written and meetings are scheduled in July to share this with Portfolio Holders and the Leadership Team.
3. Advance proposals to amalgamate the contact centre and reception points to improve reception services for customers	Office of the Chief Executive	31-Mar-2018	●	On Target	Q1 - Plans to bring together the corporate customer team are progressing with the first two teams affected now in consultation to move onto new job descriptions. Plans for the refurbishment of Reception are continuing to develop as part of the Accommodation Review (P002), however the timescales for Reception are dependent on the wider programme and will need to be kept in review.





4. Deliver customer self-service account facilities for residents and businesses so they can receive their bills electronically	Resources	30-Sep-2017		On Target	Q1 - The system has been set up and tested and will now be publicised to encourage take up.
5. Deliver projects of legislative importance, to ensure our services for customers are fit-for-purpose, including:	Management Board	31-Mar-2018		On Target	Q1 - Election and Accounts Closure ran smoothly. internal Audit Programme approved and progressing in line with plan.

Objective 3.b. To utilize modern technology to enable Council officers and members to work more effectively, in order to provide enhanced services to customers and make Council services and information easier to access

Action	Lead Directorate	Target Date	.	Status	Progress notes
1. Trial flexible working for Building Control and Development Control officers through the use of new technologies	Governance	31-Mar-2018		On Target	Q1 - Await initial feedback from 2 authorities who have gone live with the system we wish to trail and then ICT indicate that the commencement of the the in-building control is imminent.
2. Implement the ICT Strategy to support the Transformation Programme, including mobile and flexible working	Resources	31-Mar-2018		On Target	Q1 - Good progress has been made on both the implementation of the current strategy and the development of the new strategy.
3. Implement use of mobile phone text messages to remind customers when their payment is due	Resources	30-Sep-2017		On Target	Q1 - Testing is progressing well and the target date should be achieved.
4. Produce a plan to improve the management of information, to protect public data and comply with legislation	Governance	31-Mar-2018		On Target	Q1 - The Chief Internal Auditor chairing a group looking at our information asset register which will feed into the new working group on general data protection regulations, chaired by a director of governance on 24th July.
5. Deliver initiatives from the Environmental Charter, using modern technology to provide enhanced services to customers	Communities	31-Mar-2018		Pending	Q1 – No progress has been able to be made on this initiative, pending the arrival of the new Assistant Director (Private Housing and Communities Support) in August 2017.

6. Deliver the Corporate Communications project, to increase customer recognition of our services and improve communications with our customers	Governance	31-Mar-2018		On Target	Q1 - The communications PR team has recently concentrated on both the election and the Local Plan and the future focus will be to produce audit and analysis of our communications.
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Objective 3.c. To ensure that the Council understands the effects of an ageing population within the District and works with other agencies to make appropriate plans and arrangements to respond to these effects

Action	Lead Directorate	Target Date	.	Status	Progress notes
1. Implement the Action Plan for the future delivery of services to older people, following the Ageing Population Needs Assessment	Communities	31-Mar-2018		On Target	Q1 – Good progress continues to be made with implementing the Action Plan, in partnership with other agencies And monthly meetings are being held with colleagues from ECC and West Essex CCG.
2. Review the approach to the delivery of housing support for residents at the Council's sheltered housing schemes	Communities	31-Mar-2018		Behind Schedule	Q1 – As the outsourcing of the Council's Careline is close to reaching its conclusion, there is a need to bed down the new call monitoring arrangements and also to consider the longer term staffing arrangements for the Older People's Housing Services – both of which are linked to the proposed wider review of the future sheltered housing service. This is a major project that will therefore not be completed by March 2018. The revised completion date is Sept 2018
3. Review, modernise and rationalise the sheltered housing to better meet the needs of residents	Communities	31-Dec-2017		On Target	Q1 - The officer project team has formulated some initial thoughts, which will be discussed with the Communities Select Committee in the first instance in Autumn 2017
4. Deliver the Council's Careline Monitoring Service through an outsourced arrangement with a third party provider, following a competitive procurement exercise	Communities	28-Feb-2018		On Target	Q1 – Following a competitive procurement process, based on price and quality, using an existing Framework Agreement, a recommendation on a preferred contractor has been made to the Housing Portfolio Holder. The programmed transfer of service date of November 2017 continues to be on target.

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**Epping Forest
District Council**

THE KEY DECISION LIST

INCLUDING PROPOSED PRIVATE DECISIONS

(12 October 2017)

The Key Decision List including Proposed Private Decisions

There is a legal requirement for local authorities to publish a notice in respect of each Key Decision that it proposes to make, at least 28 days before that decision is made. There is also a similar requirement to advertise those decisions, whether they are Key Decisions or not, which it is proposed to be made in private with the public and press excluded from the meeting. This Key Decision List, including those decisions proposed to be made in private, constitute that notice. Copies of the Key Decision List are available for inspection at the Council's Civic Offices, as well as on the Council's website in the 'Your Council' section.

Any background paper listed can be obtained by contacting the relevant Officer in the first instance, or failing that the Democratic Services Officer listed below.

Key Decisions

The Council's Constitution defines key decisions as:

- (i) Any decision within budget and policy that involves expenditure/savings of £250,000 or more in the current municipal year;
- (ii) Any decision not within budget and policy that involves expenditure/savings of £100,000 or more in the current municipal year;
- (iii) Any decision that raises new issues of policy;
- (iv) Any decision that increases the Council's financial commitments in future years, over and above existing budgetary approval;
- (v) Any decision that involves the publication of draft or final schemes, which may require either directly, or in relation to objections to, the approval of a Government minister;
- (vi) Any decision that involves the passage of local legislation; and
- (vii) Any decision that affects two or more wards, and has a discernible effect on the quality or quantity of services provided to people living or working in that area.

Borrowing or lending decisions undertaken under delegated authority by the Director of Resources are not defined as a key decision.

The Council has also agreed the following additional requirements in relation to key decisions:

- (a) Key decisions cannot be made by officers;
- (b) Key decisions not within budget and policy can only be made by the Council;

- (c) Key decisions within budget and policy but involving expenditure/savings in excess of £1million can only be made by the Cabinet and/or Council;
- (d) Key decisions within budget and policy but involving expenditure/savings between £250,000 and £1million can be made by the relevant Portfolio Holder;
- (e) Portfolio Holders can only make key decisions affecting their wards if the decision is based upon a recommendation by a Service Director or as one of a range of options recommended by a Service Director.

Private Decisions

Any decisions that are proposed to be taken in private will be reported as such. The paragraph number quoted relates to Part 1 of Schedule 12A of the Local Government Act 1972, and their definitions are as follows:

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- (1) Information relating to any individual.
 - (2) Information which is likely to reveal the identity of an individual.
 - (3) Information relating to the financial or business affairs of any particular person (including the authority holding that information).
 - (4) Information relating to any consultations or negotiations, or contemplated consultations or negotiations, in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office holders under, the authority.
 - (5) Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings.
 - (6) Information which reveals that the authority proposes:
 - (a) to give under any enactment a notice under or by virtue of which requirements are imposed on a person; or
 - (b) to make an order or direction under any enactment.
 - (7) Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime.

Corporate Aims & Key Objectives 2017/18

- (1) To ensure that the Council has appropriate resources, on an ongoing basis, to fund its statutory duties and appropriate discretionary services whilst continuing to keep Council Tax low:
- (a) To ensure that the Council's Medium Term Financial Strategy plans to meet the Council's financial and service requirements for any forward five year period, whilst minimising any reliance on Government funding;
 - (b) To continue to review and develop the Council's own assets and landholdings for appropriate uses, in order to maximise revenue streams and capital receipts, and to deliver the following key projects:
 - (i) The Epping Forest Shopping Park, Loughton;
 - (ii) The Council Housebuilding Programme;
 - (iii) The St John's Redevelopment Scheme, Epping; and
 - (iv) North Weald Airfield;
 - (c) To explore appropriate opportunities to make savings and increase income through the shared delivery of services with other organisations, where such arrangements would provide improved and/or more cost effective outcomes.
- (2) To ensure that the Council has a sound and approved Local Plan and commences its subsequent delivery:
- (a) To produce a sound Local Plan, following consultation with local residents and working with neighbouring councils, that meets the needs of our communities whilst minimising the impact on the District's Green Belt;
 - (b) To increase opportunities for sustainable economic development within the District, in order to increase local employment opportunities for residents; and
 - (c) To deliver the Council's new Leisure and Cultural Strategy, in order to maximise participation and value for money in the provision of leisure and cultural services to local residents and visitors.
- (3) To ensure that the Council adopts a modern approach to the delivery of its services and that they are efficient, effective and fit for purpose:
- (a) To have efficient arrangements in place to enable customers to easily contact the Council, in a variety of convenient ways, and in most cases have their service needs met effectively on first contact;
 - (b) To utilise modern technology to enable Council officers and members to work more effectively, in order to provide enhanced services to customers and make Council services and information easier to access; and

(c) To ensure that the Council understands the effects of an ageing population within the District and works with other agencies to make appropriate plans and arrangements to respond to these effects.

Cabinet Membership 2017/18

Chris Whitbread	Leader of the Council
Syd Stavrou	Deputy Leader and Housing
Will Breare-Hall	Environment
Anne Grigg	Asset Management & Economic Development
Helen Kane	Leisure & Community Services
John Philip	Planning & Governance
Alan Lion	Technology & Support Services
Gagan Mohindra	Finance
Sam Kane	Safer, Greener & Transport

Contact Officer

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WORK PROGRAMME - 12 OCTOBER 2017 TO 12 FEBRUARY 2018

PORTFOLIO - LEADER

ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Transformation Programme 2017-18	To monitor the progress of the Transformation Programme.	Yes	12 October 2017 9 November 2017	Cabinet Cabinet		David Bailey 01992 564105	
Corporate Plan 2018-23	To consider the Corporate Plan 2018-23, including performance measures for 2018-23 and objectives for 2018/19.	Yes	7 December 2017 21 December 2017	Cabinet Council		David Bailey 01992 564105	
Service Accommodation Review	To consider the detailed feasibility and costings report for the preferred option.	Yes	7 December 2017 21 December 2017	Cabinet Council	YES, paragraph (3)	Bob Palmer 01992 564279	Previous reports to Cabinet on Transformation
Customer Contact	To consider options to improve the main Reception at the Civic Offices.	Yes	7 December 2017	Cabinet		Simon Hill 01992 564249	Transformation Programme Customer Contact Reports
Corporate Equalities	To agree the proposed new Equalities objectives for the period 2017-21.	Yes	8 March 2018	Cabinet		Susan Lewis 01992 564508	

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ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Affordable Housing Viability Appraisals	To approve local Planning Guidance for applicants on the Council's requirements for the submission of viability appraisals relating to affordable housing	Yes	18 August 2017	Planning & Governance Portfolio Holder		Alan Hall 01992 564004	None
EF District Local Plan - LDS and Budget	Update on the Local Plan programme, revised Local Development Scheme (LDS) and budget (to include the projected spend for 2018/19 & 2019/20).	Yes	12 October 2017	Cabinet		Alison Blom-Cooper 01992 564066	

ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Local Council Tax Support Scheme 2018/19	Review of the Scheme for 2018/19:	Yes				Janet Twinn 01992 564215	
	1...Consider amendments.		11 July 2017	Cabinet			
	2...Finalise Scheme.		7 December 2017	Cabinet			
	3...Approve Scheme.		21 December 2017	Council			
Discretionary Business Rate Relief	Policy on use of additional Government funding.	Yes	12 October 2017	Cabinet		Bob Palmer 01992 564279	

ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Waste Management Review	Review of the Waste and Recycling service and the costs of the dry recycling sacks.	Yes	7 December 2017	Cabinet		Kim Durrani 01992 564055	

WORK PROGRAMME - 12 OCTOBER 2017 TO 12 FEBRUARY 2018

PORTFOLIO - HOUSING

ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Private Sector Housing Enforcement Strategy	To review and update the Strategy.	Yes	8 September 2017	Housing Portfolio Holder		Sally Devine 01992 564149	
Homeless	Further use of Flexible Homelessness Support Grant.	Yes	12 October 2017	Cabinet		Roger Wilson 01992 564419	
Housing Strategy 2017-2022	To adopt a new Housing Strategy for the period 2017-22.	Yes	12 October 2017	Cabinet		Alan Hall 01992 564004	
CAB Debt Advisors	To consider further funding for the two Debt Advisor posts.	Yes	12 October 2017	Cabinet		Roger Wilson 01992 564419	
CHBP Progress Report	To receive a progress report on the Council Housebuilding Programme.	Yes	2 November 2017	Council Housebuilding Cabinet Committee		Paul Pledger 01992 564248	
CHBP Financial Report	To receive a financial monitoring report on the Council Housebuilding Programme.	Yes	2 November 2017	Council Housebuilding Cabinet Committee		Paul Pledger 01992 564248	
CHBP Unsuitable Sites	To agree the future of sites considered unsuitable for development as part of the Council Housebuilding Programme.	Yes	2 November 2017	Council Housebuilding Cabinet Committee		Paul Pledger 01992 564248	
CHBP Annual Report	To approve the Annual Report on the Council Housebuilding Programme.	Yes	2 November 2017 7 December 2017	Council Housebuilding Cabinet Committee Cabinet		Paul Pledger 01992 564248	
CHBP Appropriations	To agree the closure of appropriations of land.	Yes	2 November 2017	Council Housebuilding Cabinet Committee		Paul Pledger 01992 564248	
CHBP Risk Register	To agree the Risk Register for the Council Housebuilding Programme.	Yes	2 November 2017	Council Housebuilding Cabinet Committee		Paul Pledger 01992 564248	
CHBP	To receive the Project Plan.	Yes	2 November 2017	Council		Paul Pledger	

Project Plan				Housebuilding Cabinet Committee		01992 564248	
Council Housebuilding Purchase	To consider an offer to purchase the site at Whitehills Road, Loughton.	Yes	2 November 2017	Council Housebuilding Cabinet Committee	YES, paragraph 3.	Alan Hall 01992 564004	
Limes Centre, Chigwell	To review the fees and charges for the Limes Centre.	No	16 November 2017	Finance and Performance Management Cabinet Committee		Julie Chandler 01992 564214	
Sheltered Housing Assets	To agree a Strategy for the future provision of individual housing schemes.	Yes	1 February 2018	Cabinet		Alan Hall 01992 564004	
Review of Housing Allocations Scheme & Tenancy Policy	To agree a new Housing Allocations Scheme and Tenancy Policy.	Yes	1 February 2018	Cabinet		Roger Wilson 01992 564419	
Private Sector Housing	To consider the adoption of the Essex Amenity Standards for Houses in Multiple Occupation (HMO).	Yes	1 February 2018	Cabinet		Sally Devine 01992 564149	
Housing Assistance Policy	To review the Housing Assistance Policy.	Yes	8 March 2018	Cabinet		Paul Duguid 01992 564287	
Restructure of the Housing Older Peoples Services Section	To agree the future approach to the Service.	Yes	14 June 2018	Cabinet		Roger Wilson 01992 564419	

ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Modern Slavery and Human Trafficking	To adopt the Council's Modern Slavery & Human Trafficking Transparency Statement & Policy.	Yes	12 October 2017	Cabinet		Julie Chandler 01992 564214	Transparency Statement & Policy

ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Vere Road Car Park	To create new car parking provision in the Vere Road car park.	No	7 December 2017	Cabinet		Kim Durrani 01992 564055	

ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Facilities Management Five-Year Programme	Update for the five-year Programme for planned and preventative maintenance to the Council's operational and commercial property.	Yes	12 October 2017	Cabinet		David Newton 01992 564780	
ICT Strategy and Capital Requirements	Approval of new ICT Strategy and associated capital budgetary requirements.	Yes	9 November 2017	Cabinet		David Newton 01992 564780	

ITEM	DESCRIPTION	KEY DECISION	DATE OF DECISION	DECISION MAKER	PRIVATE DECISION	REPRESENTATION ARRANGEMENTS	BACKGROUND PAPERS
Epping Forest Shopping Park	Update report on progress with the project.	Yes	19 October 2017	Asset Management and Economic Development Cabinet Committee	YES, paragraph (3)	Derek Macnab 01992 564050	Report by Colliers International Previous reports to the Cabinet

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Overview and Scrutiny Work Programme 2017/18

(Updated: 28 September 2017)

Overview and Scrutiny Committee Chairman – Councillor M. Sartin			
Item	Report Deadline / Priority	Progress / Comments	Programme of Future Meetings
(1) Essex County Council – Local Highways Services and infrastructure (Scrutiny of External Organisations)	All-member briefing to be made by Essex Highways on 18 July 2017.	External scrutiny of local highway services and infrastructure. Appropriate lines of questioning and scope/focus of scrutiny activity agreed at meeting held on 19 July 2016. All-member briefing made by Essex Highways on 18 July 2017.	6 June 2017; 18 July; 31 October; 9 January 2018; 27 February; and 17 April.
(2) Overview and Scrutiny Work Programme (2017/18)	First meeting of each municipal year (6 June 2017)	To agree the work programmes for the Overview and Scrutiny Committee and each of the four select committees for 2017/18.	
(3) Corporate Priorities and Key Decisions (2017/18)	First meeting of each municipal year (6 June 2017)	The Leader of the Council to present the Council's corporate priorities and the Executive's programme of Key Decisions for the year and indicate where work on the Cabinet's behalf could be undertaken by overview and scrutiny.	
(4) Directorate Business Plans (2017/18)	First meeting of each municipal year (6 June 2017)	All Portfolio Holders to present the priorities and service challenges from the business plan for their portfolio at the first meeting in each municipal year. This action was met through the consideration of business plans by the select committees rather than the Overview and Scrutiny Committee and will be moved to the select committee work programmes for 2018/19.	

(5) Princess Alexandra Hospital NHS Trust (Scrutiny of External Organisations)	To be determined	Scrutiny of plans for improvement arising from report of Care Quality Commission (October 2016) on its 'inadequate' judgement of the quality of care at Princess Alexandra Hospital, undertaken at meeting on 6 June 2017. Trust to be invited to attend the Committee towards the end of the municipal year to provide a further update on its improvement progress.	
(6) Barts Health NHS Trust (Whipps Cross Hospital) (Scrutiny of External Organisations)	31 October 2017 (Confirmed)	Scrutiny of service improvements at Whipps Cross Hospital following report of Care Quality Commission in 2015. Representatives of Barts Health NHS Trust attended the Committee in February 2016, when it was agreed that the Trust would update the Committee on progress during 2016/17. The Trust has confirmed that it will attend a meeting of the Committee in the current municipal year.	
(7) Transport for London (Scrutiny of External Organisations)	9 January 2018 (Confirmed)	The Committee has considered the scope and focus of further external scrutiny of Transport for London and agreed that activity be focussed on local TfL bus services. TfL has confirmed that appropriate officers will attend a meeting of the Committee in 2018.	
(8) Epping Forest College (Scrutiny of External Organisations)	27 February 2018 (Confirmed)	To arrange a return visit from Epping Forest College for an update on the progress of improvement plans following report of Ofsted in 2015. The Committee to consider the scope and focus of proposed further external scrutiny of the College.	

Overview and Scrutiny Committee – Reserve Work Programme		
ITEM	Report Deadline / Priority	Progress / Comments
(1) Epping Forest Sixth-Form Consortium (Scrutiny of External Organisations)	To be determined. Carried forward from work programme for 2016/17.	(PICK submission) To review the progress of the new 6th Form consortium set up in the District in September 2015. Originally intended to seek presentation from appropriate head teachers after a year of operation.
(2) Essex County Council (Children’s Services) (Scrutiny of External Organisations)	To be determined. Carried forward from work programme for 2016/17.	Recommendation arising from Children’s Services Task and Finish Panel requires the Committee to meet with Essex County Council in respect of children’s services on an annual basis. The Director of Children’s Commissioning attended the meeting in April 2016. Agreed that this be considered further at a later date.
(3) Essex Police/Essex Fire & Rescue Service - Joint Governance (Scrutiny of External Organisations)	To be determined. Possible inclusion in work programme for 2018/19.	To review local operation of joint governance arrangements for Essex Police and Essex Fire & Rescue Service. External scrutiny proposal agreed by Committee on 18 July 2017.
(4) East of England Ambulance Service (Scrutiny of External Organisations)	To be determined. Possible inclusion in work programme for 2018/19.	External scrutiny proposal arising from joint meeting of Overview and Scrutiny Chairmen/Vice-Chairmen (12.9.17). Possible focus of scrutiny activity to include call handling services.

Communities Select Committee (Chairman – Cllr Knight)

Work Programme 2017/18

Item	Report Deadline/Priority	Progress/Comments	Programme of Meetings
Standard (Periodic) Items			
(1) Performance against Housing Service Standards and Review <i>(Recommendations to Housing Portfolio Holder)</i>	June 2017 (Medium)	<i>(Housing Portfolio)</i> Completed – June 2017 meeting	20 th June 2017 5th September 2017 9th October 2017 (Cancelled); 7 th November 2017 11 December (extra meeting)
(2) Communities Key Performance Indicators (KPIs) – 2016/17 Out-Turn	June 2017 (Low)	<i>(Housing Portfolio)</i> Completed – June 2017 meeting	16 th January 2018 22 nd March 2018
(3) Progress with Key Actions for the Corporate Plan led by the Communities Directorate – 2016/17 Out-Turn	June 2017 (Low)	<i>(All Portfolios)</i> Completed – June 2017 meeting	
(4) Presentation of Communities Business Plan – 2017/18	June 2017 (Low)	<i>(All Portfolios)</i> Completed – June 2017 meeting	

(5) Communities Key Performance Indicators (KPIs) – Quarter 1	September 2017 (Low)	<i>(Housing Portfolio)</i> Completed September 2017 meeting	
(6) Progress with Key Actions for the Corporate Plan led by the Communities Directorate – Quarter 1	September 2017 (Low)	<i>(All Portfolios)</i> Completed September 2017 meeting	
(7) Attendance by Essex Police District Commander at next meeting - Discussion on issues to raise	September 2017 (Medium)	<i>(Safer Greener Transport Portfolio)</i> Completed September 2017 meeting	
(8) 6-month Progress Report on implementation on the Ageing Population Study Action Plan	November 2017 (Low)	<i>(Leisure and Community Services, Safer Greener Transport and Housing Portfolios)</i>	
(9) Annual Diversity Report of Housing Applicants and Lettings	November 2017 (Low)	<i>(Housing Portfolio)</i>	
(10) Annual Report on the HomeOptions Choice Based Lettings Scheme	November 2017 (Low)	<i>(Housing Portfolio)</i>	
(11) Annual feedback on the success of the Reality Roadshow initiative and proposals for future delivery	November 2017 (Low)	<i>(Safer Greener Transport Portfolio)</i>	

(12) Presentation from Essex Police's District Commander on current policing and crime issues in the District	November 2017 (Medium)	<i>(Safer Greener Transport Portfolio)</i>	
(13) Annual Report of the Community Safety Partnership	November 2017 (Medium)	<i>(Safer Greener Transport Portfolio)</i>	
(14) Annual feedback on the success of the Summer Holiday Activity Programme and learning points for the future	November 2017 (Low)	<i>(Leisure and Community Service Portfolio)</i>	
(15) Six-Month Review of the HRA Financial Plan 2017/18	November 2017 (High)	<i>(Housing Portfolio)</i>	
(16) Communities Key Performance Indicators (KPIs) – Quarter 2	November 2017 (Low)	<i>(Housing Portfolio)</i>	
(17) Progress with Key Actions for the Corporate Plan led by the Communities Directorate – Quarter 2	November 2017 (Low)	<i>(All Portfolios)</i>	
(18) Briefing on the proposed Council rent increase for 2018/19	January 2018 (Low)	<i>(Housing Portfolio)</i>	
(19) 6-Month Progress Report on Annual Housing Strategy Action Plan	January 2018 (Medium)	<i>(Housing Portfolio)</i>	

(20) HRA Financial Plan 2018/19	March 2018 (High)	<i>(Housing Portfolio)</i>
(21) Communities Key Performance Indicators (KPIs) – Quarter 3	March 2018 (Low)	<i>(Housing Portfolio)</i>
(22) Communities Key Performance Indicators (KPIs) – Targets for 2018/19	March 2018 (High)	<i>(Housing Portfolio)</i>
(23) Progress with Key Actions for the Corporate Plan led by the Communities Directorate – Quarter 3	March 2018 (Low)	<i>(All Portfolios)</i>
(24) 6-month Progress Report on implementation of the Ageing Population Study Action Plan	March 2018 (Low)	<i>(Leisure and Community Services, Safer Greener Transport and Housing Portfolios)</i>
(25) Annual Report from representatives of the Youth Council on completed and proposed activities	March 2018 (High)	<i>(Leisure and Community Service Portfolio)</i>
Special (Planned) Items		
(26) HRA Financial Plan 2017/18	June 2017 (High)	<i>(Housing Portfolio)</i> Completed

(27) Housing Strategy 2017 – 2022 (Comments to the Cabinet)	June 2017 (High)	(Housing Portfolio) Completed	
(28) Safeguarding at EFDC – current position	June 2017 (Medium)	(Safer Greener Transport Portfolio) Completed	
(29) Review of Housing Allocations Scheme, after 2 years operation (with any changes effective from July 2018) (Recommendations to the Cabinet)	September 2017 (High)	(Housing Portfolio) Completed September 2017 meeting	
(30) Review and funding of Garden Maintenance Scheme for Older and Disabled Council Tenants (Recommendations to Housing Portfolio Holder)	November 2017 (High)	(Housing Portfolio) Agreed that a report be submitted direct to the Housing Portfolio Holder due to the Committee’s busy Work Programme and the need for budget provision to be made.	
(31) Review of the future use of sheltered/grouped housing scheme sites (Recommendations to Cabinet / Housing Portfolio Holder)	November 2017 (High)	(Housing Portfolio)	
(32) Presentation by Epping Forest CAB on its use of EFDC funding	March 2018 (High)	(Housing Portfolio)	

(33) Review of annual funding to the CAB for two Debt Advisors <i>(Recommendations to Cabinet)</i>	September 2017 (High)	<i>(Housing Portfolio)</i> Agreed that a report be submitted direct to Cabinet due to the Committee's busy Work Programme and the need for budget provision to be made.
(34) Review of Housing Service Strategy on Home Ownership and Leaseholder Services	January 2018 (Low)	<i>(Housing Portfolio)</i>
(35) Review of Housing Assistance Policy <i>(Recommendations to Cabinet)</i>	January 2018 (Medium)	<i>(Housing Portfolio)</i>
(36) Review of the approach to the Scheme Management Service to sheltered housing and properties designated for older people <i>(Recommendations to Cabinet / Housing Portfolio Holder)</i>	January 2018 (High)	<i>(Housing Portfolio)</i>
(37) Review of Housing Service Strategy on Anti-Social Behaviour and Harassment	March 2018 (Low)	<i>(Housing Portfolio)</i>
(38) Review of Homelessness Strategy <i>(Recommendations to Housing Portfolio Holder)</i>	March 2018 (High)	<i>(Housing Portfolio)</i>

Items added to Work Programme during the year

(39) Receive a report on the Government's Prevent Strategy and how it relates to 18 to 25 year olds.	November 2017	<i>(Safer Greener Transport Portfolio)</i> Update on the Prevent Action Plan
(40) Report on fire safety on our Housing Stock.	October 2017 Deferred	<i>(Housing Portfolio)</i>

**Governance Select Committee 2017/18
(Chairman – Councillor N Avey)**

Item	Report Deadline/Priority	Progress/Comments	Programme of Meetings
(1) Key Performance Indicators (KPIs) 2016/17 - Outturn	04 July 2017	Governance indicators only - Completed	04 July 2017 03 October 2017 05 December 2017 06 February 2018 27 March 2018
(2) Key Performance Indicators (KPIs) 2017/18 - Quarterly Performance Monitoring	Q1 – 03 October 2017 Q2 – 05 December 2017 Q3 – 06 February 2018	Governance indicators only.	
(3) Development Management Chairmen and Vice-Chairmen's Meetings	04 July 2017	Feedback from meeting of the Chairmen and Vice-Chairmen of the Area Plans Sub-Committees and the District Development Management Committee – Completed	
(4) Building Control	04 July 2017	To be carried forward onto work programme for 2017/18. Building Control Officer to give a presentation - Completed	
(5) Equality Objectives 2016-2020 / (2018-2023) - 6 monthly reporting	Q1 - 03 October 2017	Completed	
(6) Equality Objectives 2016-2020 / (2018-2023) - 6 monthly reporting	Q3 - 06 February 2018		

(7) Corporate Plan Key Action Plan 2015/16 - Outturn	04 July 2017	Governance actions only - Completed
(8) Review of Public Consultations	04 July 2017	Annual Review - Completed
(9) Governance Directorate Business Plan 2017/18	04 July 2017	Portfolio Holders attended Cllrs J Philip, A Lion and G. Waller - Completed
(10) Review of the Elections and General Election May and June 2017	03 October 2017	Review of the processes for the County and General elections - Completed
(11) Corporate Plan Key Action Plan 2016/17- Quarterly reporting	Q1 – 03 October 2017 Q2 – 05 December 2017 Q3 – 06 February 2018	Governance actions only.
(12) Review of the operation of the Council's Petitions Scheme	TBA	To be completed during the 2017/18 municipal year.
(13) Analysis of Compliments and Complaints information in identifying trends	06 February 2018	The Head of Customer Services has been invited to attend a future meeting. To identify trends, a period of time will need to elapse.

(14) Annual Equality Information Report – 2016	03 October 2017	Combined with Item (5) - Completed	
(15) Key Performance Indicators	05 December 2017	GOV-005 – Percentage of minor planning applications that are processed within 8 weeks or given an extension of time.	

**Neighbourhoods Select Committee 2017/18
(Chairman – Councillor N. Bedford)**

Item	Report Deadline / Priority	Progress / Comments	Programme of Future Meetings
(1) Enforcement activity	TBA	Annual report Committee	27 June 2017; 19 September; 21 November; 30 January 2018; 20 March 2018.
(2) KPIs 2016/17 – Outturn Review	First meeting of each municipal year.	Outturn KPI performance report for 2016/17 to the June 2017 meeting. (COMPLETED)	
(3) KPI's 2017/18 – Quarterly Review	Quarterly	Review of quarterly performance: Q1 in September 2017; (COMPLETED) Q2 in November 2017; Q3 in March 2018.	
(4) Corporate Plan Key Action Plan 2016/17 – Outturn Review	First meeting of each municipal year	Outturn Key Action Plan 2016/17 performance – went to 27 June 2017 meeting (COMPLETED)	
(5) Corporate Plan Key Action Plan 2017/18 – Quarterly Review	Quarterly	Review of Quarterly performance: Q1 September 2017; (COMPLETED) Q2 November 2017; Q3 March 2018.	
(6) To receive updates from the Green Corporate Working Party	As appropriate. (Last update received on the current position on 5 September 2017).	To monitor and keep under review the Council's progress towards the development and adoption of a corporate energy strategy/environmental policy. To receive Officer progress reports on the Corporate Green Working Party (not minutes).	

(7) To receive regular updates on the current position of the Local Plan	Update to go to each meeting.	Committee to keep a watch in brief on the position of the District's Local Plan – (last went to 19 September 2017 meeting).	
(8) To receive an annual update on the Environmental Charter	June 2017	At their meeting on 28 June 2016 the Committee agreed to receive an annual update of the Council's Environmental Charter. (COMPLETED)	
(9) Review of arrangements for ensuring the behaviour of Licenced Taxi Drivers.	TBA	Item from the O&S Co-ordinating Group.	
(10) Yearly Review of the Off-Street Parking Service	TBA	At their November 2016 meeting the Committee agreed to review on an annual basis the off-street parking service recently taken over by EFDC from NEPP.	
(11) Neighbourhoods Directorate Business Plan	June 2017	Received briefing from each responsible PH on their business plan for the year. (COMPLETED)	
(12) Passenger Transport officers to be invited to a meeting on the District's Bus Services.	TBA	Invitation made to Transport for London to O&S but this would not include the south of the district.	
(13) Emergency planning – report on Council's emergency response systems and emergency housing arrangements	TBA	Following the Grenfell Tower Fire – to consider our procedures.	

(14) Places for People Leisure (PfP)	As appropriate. (1st board report to 30 November 2017 meeting)	Council's leisure contract – report of the first formal monitoring board.	
(15) Air Quality Officer	30 November 2017 meeting (TBC)	Invitation to attend.	
(16) Public Health Officer	30 November 2017 meeting (TBC)	Invitation to attend.	
(17) Land Drainage Officer, Technical Services Directorate	TBA – January 2018?	Invitation to attend a future meeting.	

Resources Select Committee 2017/18 (Chairman – Vacant)			
Item	Report Deadline / Priority	Progress / Comments	Programme of Future Meetings
(1) Key Performance Indicators 2016/17 – Outturn Review	Outturn KPI Performance considered at the first meeting of each municipal year.	Outturn KPI performance report for 2016/17 to July 2017 meeting - Completed	13 July 2017; 17 October; 19 December; 13 February 2018; and 03 April .
(2) To review the specific quarterly KPI 2017/18	Quarterly	Review of quarterly performance: Q1 in October 2017; Q2 in December '17; Q3 in February '18.	
(3) Corporate Plan Key Action Plan 2016/17 – Outturn review	First meeting of each municipal year	Outturn Key Action Plan 2015/16 performance to July 2017 meeting - Completed	
(4) Corporate Plan Key Action Plan 2017/18 – quarterly review	Quarterly	Review of quarterly performance: Q1 October 2017; Q2 December 2017; Q3 February 2018.	
(5) Detailed Portfolio Budgets	Portfolio budgets considered on an annual basis jointly with the Finance and Performance Management Cabinet Committee.	Annual Review of portfolio budgets to be considered at joint meeting with the F&PM Cabinet Committee in January of each year.	

(6) ICT Strategy –	Progress against ICT Strategy Considered on an annual basis.	COMPLETED – October 2017	
(7) Progress on Call handling	March 2018	Now part of the Customer Care Section and separate from ICT. Progress report on call/response handling. Also to receive a report on options following introduction of new telephony system.	
(8) Fees and Charges 2018/19	Proposed fees and charges for 2018/19 – for October 2017 meeting.	Proposed fees and charges considered on an annual basis each October COMPLETED	
(9) Provisional Capital Outturn 2016/17	Provisional outturn for 2016/17 for July meeting.	Provisional Capital Outturn considered on an annual basis at first meeting in each municipal year - Completed	
(10) Provisional Revenue Outturn 2016/17	Provisional Outturn for 2016/17 for July 2017 meeting.	Provisional Revenue Outturn considered on an annual basis at first meeting in each year. Completed	
(11) Sickness Absence Outturn	July 2017	To review the Sickness Outturn report for 2016 /17 - completed	
(12) Sickness Absence	Half-yearly progress reports for 2017/18 to be considered at December and July meetings.	Detailed progress against achievement of sickness absence targets reviewed on a six-monthly basis <i>Last report received at July 2017 meeting.</i>	
(13) Medium Term Financial Strategy & Financial issues paper	October 2017	To receive the financial issues Paper and Medium term financial strategy including 4 year General Fund forecast. COMPLETED	

(14) Quarterly Financial Monitoring	Oct. 2017; Dec. 2017; & Feb. 2018	To receive quarterly financial monitoring Reports	
(15) Review of Risk management arrangements	July 2017	Item from the O&S Co-ordinating Group. To review the trends in claims expenses - COMPLETED	
(16) Shared Services Working	TBA	To review any shared services working being carried out by EFDC. HR currently working with Colchester and Braintree Councils on a shared HR payroll system. <i>Last update at December 2015 meeting.</i>	
(17) Invest to Save update	December 2017	To receive a report updating the Committee on the Council's Invest to Save scheme	
(18) General update on the General Fund CSB, DDF and ITS	December 2017	To receive an updating report on the CSB, DDF and ITS schemes.	
(19) Scrutiny of the Transformation Project	Had an initial meeting on 10 April 2017	Initial meeting to review PICK form and set terms of reference for looking at the Transformation project. T&F Panel set up to review what the Select Committee will need to review. That Panel has now concluded and will report to the Overview and Scrutiny Committee.	
(20) Resources Directorate Business Plan	July 2017	Received briefing from each responsible PH on their business plan for the year. - Completed	
(21) Universal Credit	October 2017	Updating report on the Government's Universal Credit Scheme. COMPLETED	

**Transformation Task & Finish Panel 2017/18
(Chairman – Councillor Patel)**

Item	Report Deadline / Priority	Progress / Comments	Programme of Future Meetings
First meeting to be held on 29 June 2017 – meetings to be arrange on an ad-hoc basis.		Panel met on 29 June, 1 August. Last meeting held on 11 September. COMPLETED	.

OVERVIEW AND SCRUTINY COMMITTEE
SCRUTINY OF EXTERNAL ORGANISATIONS

Organisation	Overview & Scrutiny Committee	Aspects of scrutiny undertaken
Epping Forest College	27 February 2018	Progress of improvement initiatives following report of Ofsted in 2015.
Transport for London	9 January 2018	Local bus service provision by Transport for London.
Barts Health NHS Trust	31 October 2017	Progress of improvement initiatives following report of Care Quality Commission in 2015.
Essex Highways	18 July 2017	Local highway services and infrastructure (all-member briefing).
Princess Alexandra Hospital NHS Trust	6 June 2017	General inpatient, outpatient and emergency services provision at Princess Alexandra Hospital, following report of Care Quality Commission.
Epping Forest College	28 February 2017	Local further education facilities and services, following report of Ofsted.
Transport for London	19 December 2016	Local Central Line services and infrastructure.
Essex County Council (Children's Services)	19 April 2016	Consultation on local Children's Centre provision.
Corporation of London (Epping Forest)	7 June 2016	Public consultation on new management plan for Epping Forest.
Epping Forest Youth Council	19 April 2016	Annual presentation on work of the Youth Council (now made to Communities Select Committee).
Barts Health NHS Trust	23 February 2016	General inpatient, outpatient and emergency services provision at Whipps Cross University Hospital, following report of Care Quality Commission.

Barts Health NHS Trust	9 June 2015	General inpatient, outpatient and emergency services provision at Whipps Cross University Hospital, following report of Care Quality Commission.
North Essex Parking Partnership	27 April 2015	Strategic priorities of the North Essex Parking Partnership.
Essex County Council (Child & Adolescent Mental Health Services)	23 March 2015	Re-commissioning of emotional wellbeing and mental health services for children and young people.
Essex County Council (Children's Services)	10 November 2014	Commissioning for young children, based on an early years review.
Epping Forest College	1 July 2014	Strategic direction of Epping Forest College, its vision for the future and its relationship with the Community.
Barts Health NHS Trust	1 April 2014	General inpatient, outpatient and emergency services provision at Whipps Cross University Hospital, following report of Care Quality Commission.
West Essex Clinical Commissioning Group	25 February 2014	Local mental health services.
Essex Probation Service	28 January 2014	Local probation services through the eyes of an offender.