

Council

Date: **15 December 2022**

Time: **4.30pm**

Venue: **Hove Town Hall - Council Chamber**

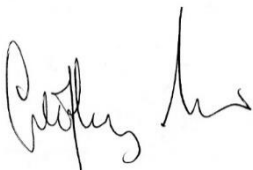
Members: **Councillors:** Deane (Chair), O'Quinn (Deputy Chair), Allcock, Appich, Atkinson, Bagaeen, Barnett, Bell, Brennan, Brown, Childs, Allbrooke, Davis, Druitt, Ebel, Evans, Fishleigh, Fowler, Gibson, Grimshaw, Hamilton, Heley, Henry, Hills, Hugh-Jones, Janio, John, Knight, Lewry, Littman, Lloyd, Meadows, Mears, Mac Cafferty, Mcintosh, McNair, Moonan, Nemeth, Nield, Osborne, Phillips, Pissaridou, Platts, Powell, Rainey, Robins, Shanks, Simson, C Theobald, West, Wilkinson, Williams and Yates.

Contact: **Anthony Soyinka**
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Chief Executive
Hove Town Hall
Norton Road
Hove BN3 3BQ

Date of Publication - Wednesday, 7 December 2022

AGENDA

Part One

Page

48 DECLARATIONS OF INTEREST

- (a) Disclosable pecuniary interests;
- (b) Any other interests required to be registered under the local code;
- (c) Any other general interest as a result of which a decision on the matter might reasonably be regarded as affecting you or a partner more than a majority of other people or businesses in the ward/s affected by the decision.

In each case, you need to declare

- (i) the item on the agenda the interest relates to;
- (ii) the nature of the interest; and
- (iii) whether it is a disclosable pecuniary interest or some other interest.

If unsure, Members should seek advice from the Monitoring Officer or Democratic Services Officer preferably before the meeting.

49 MINUTES

9 - 36

To approve as a correct record the minutes of the previous Council meetings held on the 21 July 2022 and 20 October 2022.

Contact Officer: Anthony Soyinka

Tel: 01273 291006

50 MAYOR'S COMMUNICATIONS.

To receive communications from the Mayor.

51 TO RECEIVE PETITIONS AND E-PETITIONS.

To receive any petitions to be presented to the Mayor by members of the public and/or Members as notified by the due date of 1 December 2022 (10 working days).

52 WRITTEN QUESTIONS FROM MEMBERS OF THE PUBLIC.

A list of public questions received by the due date of 12noon on the 1 December 2022 will be circulated separately as part of an addendum for the meeting.

53 DEPUTATIONS FROM MEMBERS OF THE PUBLIC.

A list of deputations received by the due date of 12noon on the 9 December 2022 will be circulated separately as part of an addendum for the meeting.

PETITIONS FOR DEBATE

Petitions to be debated at Council. Reports of the Executive Director for Governance, People & Resources.

54 PETITION FOR DEBATE

Petitions to be debated at Council. Report of the Monitoring Officer.

55 CALL OVER FOR REPORTS OF COMMITTEES.

(a) Call over items 58 - 59 will be read out at the meeting and Members invited to reserve the items for consideration.

(b) To receive or approve the reports and agree with their recommendations, with the exception of those which have been reserved for discussion.

(c) Oral questions from Councillors on the Committee reports, which have not been reserved for discussion.

56 WRITTEN QUESTIONS FROM COUNCILLORS.

37 - 44

A list of the written questions submitted by Members has been included in the agenda papers. This will be repeated along with the written answers received and will be taken as read as part of an addendum circulated separately at the meeting.

Contact Officer: Anthony Soyinka

Tel: 01273 291006

6.30 - 7.00PM REFRESHMENT BREAK

Note: A refreshment break is scheduled for 6.30pm although this may alter slightly depending on how the meeting is proceeding and the view of the Mayor.

57 ORAL QUESTIONS FROM COUNCILLORS

45 - 48

A list of Councillors who have indicated their desire to ask an oral question at the meeting along with the subject matters has been listed in the agenda papers.

Contact Officer: Anthony Soyinka

Tel: 01273 291006

REPORTS FOR DECISION

58 REVIEW OF THE COUNCIL'S CONSTITUTION

49 - 68

Contact Officer: Victoria Simpson

Tel: 01273 294687

Ward Affected: All Wards

59 SUSSEX HEALTH & CARE: THE SUSSEX HEALTH & CARE ASSEMBLY FINAL TERMS OF REFERENCE AND THE SUSSEX INTEGRATED CARE STRATEGY

69 - 106

Contact Officer: Giles Rossington

Tel: 01273 295514

Ward Affected: All Wards

REPORTS REFERRED FOR INFORMATION

NOTICES OF MOTION

The following Notices of Motion have been submitted by Members for consideration:

60 PROTECTING THE CITY'S TREES

Proposed by Councillor Fishleigh, Independent Member.

61 MENTAL HEALTH EMERGENCY

Joint motion proposed by Councillor Appich on behalf of the Labour and Green Groups.

62 PROTECT RENTERS THIS WINTER: STOP REVENGE EVICTIONS!

Proposed by Councillor Williams on behalf of the Labour Group.

63 UNACCOMPANIED ASYLUM-SEEKING CHILDREN ABANDONED IN LOCAL HOTELS

Proposed by Councillor Grimshaw on behalf of the Labour Group.

64 HOUSING REVENUE ACCOUNT OVERSPEND

Proposed by Councillor Meadows on behalf of the Conservative Group.

65 CYCLE HANGARS

Proposed by Councillor Nemeth on behalf of the Conservative Group.

66 COST OF LIVING - BUSINESS AND COMMUNITIES

Proposed by Councillor Osborne on behalf of the Green Group.

67 CLIMATE EMERGENCY FOUR YEARS ON

Proposed by Councillor Hills on behalf of the Green Group.

68 CLOSE OF MEETING

The Mayor will move a closure motion under Procedure Rule 17 to terminate the meeting 4 hours after the beginning of the meeting (excluding any breaks/adjournments).

Note:

1. *The Mayor will put the motion to the vote and if it is carried will then:-*
 - (a) *Call on the Member who had moved the item under discussion to give their right of reply, before then putting the matter to the vote, taking into account the need to put any amendments that have been moved to the vote first;*
 - (b) *Each remaining item on the agenda that has not been dealt with will then be taken in the order they appear on the agenda*

and put to the vote without debate.

The Member responsible for moving each item will be given the opportunity by the Mayor to withdraw the item or to have it voted on. If there are any amendments that have been submitted, these will be taken and voted on first in the order that they were received.

- (c) Following completion of the outstanding items, the Mayor will then close the meeting.*
- 2. If the motion moved by the Mayor is **not carried** the meeting will continue in the normal way, with each item being moved and debated and voted on.*
- 3. Any Member will still have the opportunity to move a closure motion should they so wish. If such a motion is moved and seconded, then the same procedure as outlined above will be followed.*

Once all the remaining items have been dealt with the Mayor will close the meeting.

FOR INFORMATION

The City Council actively welcomes members of the public and the press to attend its meetings and holds as many of its meetings as possible in public. Provision is also made on the agendas for public questions to committees and details of how questions can be raised can be found on the website and/or on agendas for the meetings.

The closing date for receipt of public questions and deputations for the next meeting is 12 noon on the fourth working day before the meeting.

Meeting papers can be provided, on request, in large print, in Braille, on audio tape or on disc, or translated into any other language as requested.

Infra-red hearing aids are available for use during the meeting. If you require any further information or assistance, please contact the receptionist on arrival.

Webcasting notice

This meeting may be filmed for live or subsequent broadcast via the Council's website. At the start of the meeting the Chair will confirm if all or part of the meeting is being filmed. You should be aware that the Council is a Data Controller under the Data Protection Act 1998. Data collected during this web cast will be retained in accordance with the Council's published policy.

Therefore, by entering the meeting room and using the seats in the chamber you are deemed to be consenting to being filmed and to the possible use of those images and sound recordings for the purpose of web casting and/or Member training. If members of the public do not wish to have their image captured, they should sit in the public gallery area.

Access notice

The Public Gallery is situated on the first floor of the Town Hall and is limited in size but does have 2 spaces designated for wheelchair users. The lift cannot be used in an emergency. Evac Chairs are available for self-transfer and you are requested to inform Reception prior to going up to the Public Gallery. **For your own safety please do not go beyond the Ground Floor if you are unable to use the stairs.**

Please inform staff on Reception of this affects you so that you can be directed to the Council Chamber where you can watch the meeting or if you need to take part in the proceedings e.g. because you have submitted a public question.**Fire & emergency evacuation procedure**

If the fire alarm sounds continuously, or if you are instructed to do so, you must leave the building by the nearest available exit. You will be directed to the nearest exit by council staff. It is vital that you follow their instructions:

- You should proceed calmly; do not run and do not use the lifts;
- Do not stop to collect personal belongings;
- Once you are outside, please do not wait immediately next to the building, but move some distance away and await further instructions; and
- Do not re-enter the building until told that it is safe to do so

Further information

For further details and general enquiries about this meeting contact Anthony Soyinka, (01273 291006, email anthony.soyinka@brighton-hove.gov.uk) or email democratic.services@brighton-hove.gov.uk

BRIGHTON & HOVE CITY COUNCIL

COUNCIL

6.30pm 21 JULY 2022

HOVE TOWN HALL - COUNCIL CHAMBER

MINUTES

Present: Councillors Deane (Chair), Allcock, Appich, Atkinson, Bagaeen, Barnett, Brown, Childs, Allbrooke, Davis, Druitt, Ebel, Fishleigh, Gibson, Grimshaw, Hamilton, Hills, Hugh-Jones, John, Knight, Lewry, Littman, Lloyd, Meadows, Mac Cafferty, McNair, Moonan, Nemeth, Osborne, Peltzer Dunn, Phillips, Pissaridou, Platts, Powell, Rainey, Robins, C Theobald, West, Wilkinson, Williams and Yates

PART ONE

12 DECLARATIONS OF INTEREST

- 12.1 Councillors Williams, Osborne, Pissaridou and Knight declared a personal but not prejudicial interest as a member of ACORN union.
- 12.2 No other declarations of interests in matters appearing on the agenda were made.

13 MINUTES

- 13.1 The minutes of the Council meeting held on the 7 April 2022 and the Annual Council meeting held on 26 May 2022 were approved and signed by the Mayor as a correct record of the proceedings.

14 MAYOR'S COMMUNICATIONS.

- 14.1 The Mayor gave the following communications:
- 14.2 I am sad to announce the deaths of three former councillors, two of whom are former Mayors: Ann Norman, Pat Hawkes and Frieda Warman Brown. I would ask you to stand for a minute's silence to mark their passing, and our thoughts are also with Councillor Simpson whose husband also passed away recently.
- 14.3 As we have a lot to get through this evening I will be brief in my mayor's communications. Two months in and it has been a busy learning curve. I am pleased to say there was lots going on to celebrate the Platinum Jubilee weekend, with the family picnic event in Pavilion Gardens, numerous street parties and church services, so I certainly hit the ground running.

- 14.4 Since then, I have had 62 engagements, meeting residents and groups across the city as people are keen to get out and about again after the lockdown, and I'm looking forward to a wide variety of further engagements during the coming year. I would also like to thank Cllrs Robins and O'Quinn for their support in covering events when I had Covid.
- 14.5 The Mayor Making event, which was postponed in May, will now take place on Friday 21st October, with a particular focus on the Mayors charities, so a date for you to put in your diaries.
- 14.6 Members will be aware of the devastating effects of avian flu on our local wildlife and I have been asked to particularly thank officers and members of local bird group volunteers who are working incredibly hard to alleviate their suffering.
- 14.7 I would also like to thank all officers, emergency services and resident volunteers for the work that they have been doing over the past few days to help people during the extraordinary heat wave this week.

15 CALL OVER FOR REPORTS OF COMMITTEES.

(a) Callover

- 15.1 The following items on the agenda were reserved for discussion:

- Item 17 - Review of Arrangements for Council and Committee meetings
- Item 18 - Kingsway to the Sea
- Item 19 - Audit Report on Member Expenses

(b) Receipt and/or Approval of Reports

- 15.2 The Head of Democratic Services confirmed that all the Items listed on the agenda had been reserved for discussion.

16 WRITTEN QUESTIONS FROM COUNCILLORS.

- 16.1 The Mayor noted that written questions from Members and the replies from the appropriate Councillor were taken as read by reference to the list included in the addendum which had been circulated prior to the meeting as detailed below:

(1) Councillor Fishleigh

- 16.2 Please would you confirm who is responsible for the slip road to East Brighton Golf Club. This is a sloping road from Roedean Road to the walled entrance of the golf club. If it is the council, would you please start the process of moving on the lived-in vans whose inhabitants are disturbing the peace.

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

- 16.3 Thank you for your question.

This slip road is not owned by the council, so we have no jurisdiction over it and no records on who owns it. Further enquiries will need to be made on this.

Officers from our Traveller Liaison team undertook a site visit to identify the location, and found one lived in vehicle. However, given the land is not within council jurisdiction we will not be able to undertake any enforcement action to move this van on.

(2) Councillor Grimshaw

- 16.4 How many LA and Housing association tenant households are trying to transfer downsize through the Homemove system of bidding?
How long is the average wait time before a successful downsizing transfer happens?
How many bids does it take on average to successfully achieve a downsizing transfer ?
Is there any system in place to match down sizing transfers with households looking to upsize?

Reply from Councillor Gibson / Hugh-Jones, Joint Chair of the Housing Committee

- 16.5 On Homemove, there are currently 189 households who are seeking to transfer because they are under-occupying their current home. Of course, there will be other tenants who are under-occupying who want be registered for transfer.

Brighton & Hove City Council does not have access to data on all social housing tenants who are seeking to move. Some Housing Associations will re-let their properties outside of the Council's housing register, and most will retain a proportion of re-lets which are only offered to their tenants. Typically this would include people who are looking to downsize. Therefore, the true number of households looking to downsize is unknown to us.

How long is the average wait time before a successful downsizing transfer happens?
How many bids does it take on average to successfully achieve a downsizing transfer ?

Average timescales will vary based on a number of factors. For example, the property size needed. We will tend to have more 1-bed properties that become available for re-letting, because we have a high proportion of these in our stock, and people tend to move out of 1-bed homes more often because of changes in their household size and needs. However, 2-beds become available less regularly, so average waiting times tend to be longer. Waiting times will also vary depending on how selective bidders are on property type and location.. For example, street properties with a garden are very popular so only those with the highest priority (or longest waiting times) will be successful.

In practice, people who are looking to downsize will often have longer waiting times because . they tend to be more selective bidding on properties which are likely to have a high number of other households bidding.

Is there any system in place to match down sizing transfers with households looking to upsize?

Yes. This is called a 'mutual exchange'. This can be accessed via a dedicated address: mutualexchange@brighton-hove.gov.uk, where requirements can be registered. To qualify, each person must:

- have a secure tenancy agreement, not including introductory tenancies
- the properties being swapped meet everybody's needs
- be up to date with paying their rent

(3) Councillor Grimshaw

16.6 How many LA and HA homes in the city with an energy rating of C have the bare minimum 100mm of loft insulation? Recommendations have changed and new builds must have 300mm as minimum.

Should a private householder have loft insulation of 100mm or less they would qualify for grant funding to increase the insulation thickness.

Do Brighton and Hove City council have plans to increase loft insulation thickness in their properties to ensure that council tenants have the same levels of adequate insulation as private home owners?

Reply from Councillor Gibson / Hugh-Jones, Joint Chair of the Housing Committee

16.7 Achieving carbon reductions and sustainability in housing is a key priority in our Housing workplan. June Housing Committee considered a detailed Carbon Reduction in Housing update report, including progress on projects and future plans to support the council's ambition to be carbon neutral by 2030.

We have created a new cross tenure Housing Sustainability & Energy team which will be developing an Energy Plan for Council Housing, aligned to our Asset Management Strategy, and our Warmer Homes Scheme for private sector homes.

We do not currently have the information requested in relation to LA & HA homes.

We are currently in the process of reviewing our housing stock data to assess the feasibility of various energy saving and renewable energy measures. The condition of loft insulation will form a key part of this analysis. We are also working on the development of our private sector Warmer Homes scheme including reviewing data on non-Council-owned stock.

Installing or topping up loft insulation to recommended depths in all council homes where it is feasible will form part of our plans and programmes in future years to reduce Carbon emissions and residents' bills.

We are currently using existing programmes such as the Air Source Heat Pump programme to identify these opportunities now and will include it as an additional element in the Solar PV programme.

As part of our existing planned works roofing programme, we also install or increase insulation to 300mm.

In addition, the Housing Repairs & Maintenance roofing teams also undertake work around loft insulation top ups. This work is either generated by the tenant contacting us, roofing operatives noting the lack of insulation when inspecting the property or referrals from the damp team who are visiting the property to investigate damp/condensation. The team currently have a significant backlog of repair work. However once this backlog reduces we propose to encourage tenants to check their lofts and contact us

When undertaking replacement of loft insulation as part of our repairs service, this is either upgraded or replaced in full to 300mm to meet the current requirements.

(4) Councillor Childs

- 16.8 Given the 1000s of men in our city, both residents and visitors, suffer from incontinence, often brought on by cancer treatment, as well as a valued trans man community, will the council agree to install sanitary bins into all council owned men's toilets within a reasonable timeframe?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

- 16.9 Thank you for your question.

You raise a very important point. The team are undertaking a service review, and this can be included. However, budget would need to be allocated and Members can consider this as part of budget setting.

(5) Councillor Childs

- 16.10 Last year I asked that the Council provide an assurance that asbestos materials be labelled in situ in all school buildings. This does still not appear to have been undertaken. Will the council agree that upon re-survey, all ACMs in schools shall be prominently labelled with industry standard labels so as to warn occupants of the presence of this hazardous material and thus adhere to best practice in asbestos management?

Reply from Councillor Clare, Chair of the Children, Young People & Skills Committee

- 16.11 The Labour Group of councillors refused to agree a limit of written questions at a meeting of Policy & Resources Committee, despite having previously agreed it at Constitution Review Working Group. Since we have had repeated assurances that you will reduce the number of written questions you submit, to prove that a limit was not needed. Once again this is not being adhered to and as such I will not be providing an answer to your written question.

(6) Councillor Childs

- 16.12 Will the Council please agree to gate St James's Place in order to prevent the daily defecation and urination and other anti-social behaviour that our long suffering residents have to put up with?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.13 Thank you for the question. Unfortunately, it is not possible to gate this alleyway. About 15 or so years ago the rear section of this alleyway was subject to a highway extinguishment order and is gated from the rear boundary of the mind shop up to its northernmost boundary. This means that the current public highway designation runs from the street to the gate, and beyond the gate is no longer public highway and counts as the dwelling boundary for the properties beyond it.

There have been previous requests to gate the front section, however, as this would then completely restrict access to the residential properties further north on St James Place, this would not be possible under existing legislation. However, officers will ensure that the ASB issues highlighted is raised with police partners at the regular tasking meetings and also whether additional cleaning will be possible.

(7) Councillor Childs

16.14 Please can the Council provide details of compulsory purchase orders of land actioned or undertaken since May 2019?

Reply from Councillor Mac Cafferty, Leader of the Council

16.15 There have been no compulsory purchase orders of land actioned or undertaken since May 2019.

(8) Councillor Childs

16.16 Will the council agree to install two permanent iron footbridges over Madeira Drive to allow pedestrians to access the beach during motor rallies and other races and events?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.17 Motor events and speed trial events take place annually at Madeira Drive. The access to the beach will be able to be retained in future years during such events due to the new boardwalk access now created which allows access via the black rock station (at Black Rock) on the small number of occasions the Road is in use for these events. It is unlikely that permanent bridges would be acceptable from a planning view point in prominent locations over Madeira Drive and there is presently no funding allocated for such a proposal.

(9) Councillor Williams

16.18 I am involved in assisting a number of women who have been made homeless due to domestic abuse. I have found that accessing domestic abuse support services inadequate to say the least. I waited three weeks for a call back in one instance. Why is this and what is the administration doing about it?

Reply from Councillor Osborne / Powell, Joint Chair of the Tourism, Equalities, Communities & Culture Committee

16.19 Thank you for the question. I am sorry to hear of the experiences that you had accessing services to support those experiencing domestic abuse. The Department for Levelling Up, Housing and Communities (DLUHC) has awarded the city council additional funds to help it to meet its duties in relation to safe accommodation under the Domestic Abuse act. Amongst other things, TECC committee has agreed to use some of these funds to appoint a housing independent domestic violence advocate who will be co-located within the council housing teams. The role is to support individuals exploring housing options if they are subject to domestic abuse.

If details of the case/s can be shared we can look into these in more detail. Under changes introduced through the Domestic Abuse Act in 2021, people who are fleeing Domestic Abuse are now automatically deemed to be in Priority Need if they are homeless. In the first instance this will involve ensuring they are safe regardless of their tenure situation and then working with them to, if necessary, secure safe alternative housing. Understanding what happened in the case/s raised will help us ensure our process is working effectively and enable us to make improvements where this isn't.

(10) Councillor Appich

16.20 Would the Leader please set out what progress has been achieved in establishing a pilot care co operative called for by the Labour group a year ago and agreed unanimously?

Reply from Councillor Mac Cafferty, Leader of the Council

16.21 The care co-operative model can now be explored as commissioning plans are starting to move forward once again following the pandemic, which delayed the majority of the commissioning plans.

P&R Committee in July 2021 requested the Council to support a Care co-operative feasibility study which would look to develop a model of co-operative care services for homecare in the city for older adults and those with disabilities, in co-production with client groups. Due to the pandemic the majority of commissioning plans have been affected and in most cases, where put on hold, these are now starting to move forward. Care co-operatives are in the majority developed, owned and managed by their members and as such the commissioning relationship is different from traditional care services and the council would not look to establish a pilot scheme itself. However HASC are due to meet with an interested party and this model will be explored to consider the feasibility of care cooperatives models within the city and identify what support they may require.

(11) Councillor Brown

16.22 Why has the Council not publicised the consultation for the draft Pharmaceutical Needs Assessment more widely as it is a critical document for residents?

Some areas of the City , such as Hove Park Ward , are not well served. We have no doctors surgery, no dental practice and only one pharmacy that is located in a supermarket.

Reply from Councillor Shanks, Chair of the Health & Wellbeing Board

16.23 As part of the Pharmaceutical Needs Assessment (PNA) process to ensure we captured robust feedback from Brighton and Hove residents we conducted a telephone survey of 1000 residents that are representative of the population of Brighton and Hove. The findings from this survey are included in the full report and informed the report recommendations. The consultation process is another opportunity to check with residents regarding their views of community pharmacy. The consultation was put on the public consultation portal and was shared with all members of the PNA Steering group to share with their stakeholders, this included Healthwatch as well as Local Pharmaceutical Committee, NHS Sussex and NHS England. Healthwatch sent round the link to the consultation survey to its networks. A news story about the PNA assessment consultation was shared on the council's website and with local media on 29 June. A link to this has been shared on BHCC social media accounts a number of times and will continue to be shared regularly on social media until the closing date of 7 August. Information about the consultation were also shared with staff on the council's intranet on 30 June and was shared with all councillors from the HWB and has gone round to community and voluntary sector groups.

(12) Councillor Theobald

16.24 The civic flowerbed at Patcham Roundabout has been in a poor state this year. There are more weeds than flowers in it during the Jubilee weekend. Last year the Council planted the flower bed out but this year it didn't. Why is that?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.25 Thank you for your question.

I am pleased to let you know that the bed was planted at the beginning of July with a mixture of Cosmos and Salvias- Due to a national labour shortage, caused in parts by Brexit, City Parks are struggling to recruit sufficient numbers of staff, which has led to significant service disruption.

(13) Councillor McNair

16.26 When will CCTV be fitted at Birchgrove Crescent to stop the constant flytipping?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.27 Thank you for your question.

We recognise that there is a severe fly-tipping problem at Birchgrove Crescent. It is anticipated that cameras will be installed in October 2022. This will be reviewed after 6 months when I would expect to see a significant improvement.

(14) Councillor Bagaeen

16.28 The second public consultation on the City Downland Estate Plan closed on 8 July. What percentage of the city's BAME population took part in this consultation?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.29 Thank you for your question.

As at 8th July 2022, 10% of the respondents to the second consultation on the City Downland Estate Plan identified as BME. The consultation has been extended to the 15th July 2022 in order to give as much time as possible for all our residents to be able to read and comment on the plan and the latest feedback/figures are currently being analysed.

Officers have worked with Trust for Developing Communities during this second consultation in order for them to both publicise and promote the consultation through their existing channels of communication. We contacted them once the decision was made to extend the consultation and they have been proactive in getting the word out, to try and get as much reach as possible.

We have also met with the council's Equalities and Inclusion officer to look at ways we can increase the engagement with our BAME groups in the all-important implementation phase of the Plan. We are working on a programme for engagement with all our communities, including all our minority groups, for this stage and are looking to implement this advice and to also continue to work with the Trust for Developing Communities and the Downland Advisory Panel to ensure all groups are involved.

Feedback was received during the first consultation that more groups will want to be involved once we are at the implementation stage and discussing actual projects, as this offers more tangible changes for them and their families/communities. This engagement will therefore represent a critical element in the 'next steps' plan for the City Downland Estate Plan once endorsed by the council's Policy & Resources Committee in December and South Downs National Park Policy & Resources Board in early 2023.

(15) Councillor Bagaeen

16.30 Thursday 30 June was the deadline for council staff to complete mandatory information governance, GDPR and cyber security e-learning. According to an email from the chief executive late in June, Brighton and Hove was heading towards failing to meet the required 95% compliance meaning key partners could stop sharing vital information with us impacting our ability to deliver vital services. How did we as a city end up in this situation? Who bears responsibility?

Reply from Councillor Mac Cafferty, Leader of the Council

16.31 Our end of June figure was 79% against the target of 95%. We have sought an extension of 2 months to reach to the 95% target i.e. by the end of August 2022. It is particularly important for us to reach this target for our social care IT system users within children's and adults social care – their compliance rate is currently 85%. There is an officer steering group which is supporting staff to meet this revised deadline. Feedback from the steering group is that officers feel confident that the revised deadline will be met. Officers will generate regular compliance reports to track progress.

(16) Councillor Barnett

16.32 Can the Leader of the Council provide a date when staff will return to work and face to face services will resume so that residents can speak to a voice?

Reply from Councillor Mac Cafferty, Leader of the Council

16.33 It is not true to claim that council staff aren't working. Council staff have worked throughout the pandemic to support the city and maintain essential services. Many council services, such as street cleansing, refuse and recycling and home care services have continued to operate face to face throughout the pandemic while other services moved online in order to provide customer services in accordance with government guidance. The council is proud of staff that have continued to provide these essential services, and has ensured they are supported with safe methods of working during what has been a very difficult time.

Brighton Customer Experience Centre re-opened in September 2021. Hove Customer Experience Centre re-opened in April 2022. This has repeatedly been told to councillors – but something which you repeatedly ignore.

Our Hove and Brighton customer service centres are open Monday to Friday from 9am to 4.30pm. They provide support for people who need help in accessing council services or who need a computer or phone to do so. There is free internet access, computers, scanners and telephones for customers to use to contact or transact with the council. Staff are on hand to help people use these facilities. They can also advise on how best to contact particular council services either online or over the phone. All of our key services are contactable by phone

Where it is not possible for services to fulfil customer need either online or via telephone, face-to-face appointments are being provided.

There are many services where learning from the pandemic can improve customer service in the long term. For example, some of our most vulnerable residents are now able to access services digitally, and in a way that is much more convenient. In an environment where the council is seeking to deliver services in the most efficient way possible, we will use the experience of the pandemic to make long term changes that make council services such as parking or council tax easier for customers to access when and where needed using online access, whilst supporting those residents that may not be able to access services in this way.

(17) Councillor Lewry

16.34 What progress has been made on the following park improvements requested:

- a) Hangleton Park (Astro turf resurfacing of the Basketball Courts)
- b) Knoll Park (New Skate Park facility)

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.35 Thank you for your question.

The Astro turf at Hangleton Park was repaired in February.

There is no money available at present for a new skate park facility at Knoll Park. City Parks desperately want to improve multi use games areas across the city, but no money has been identified (other than what is currently in the teams' work plan) and there is no additional capacity to take on any new projects. The team receive many requests for new skate parks and outdoor facilities, but to do this requires the capital investment and officers to deliver the works.

At the moment, the team are focusing on delivering a 3 million refurbishment programme improving play facilities across the entire city which is one of the largest investments in playgrounds anywhere in the country in recent years and demonstrates that we are prioritising the wellbeing and happiness of residents of all ages.

At the beginning of this month, Councillors agreed to submit the Kingsway to the Sea design to planning which will create a £13m park which incorporates sports facilities, including a new skate park, roller skate area and many other facilities for the whole of the city to enjoy.

(18) Councillor Bell

16.36 In 2017 the Council received a £12.1 million grant from the Coast to Capital Local Enterprise Partnership for Black Rock to fund some basic public regeneration works and bring the public realm back to an acceptable standard which could be accessed by the community.

The scope of works was to include ground works to prepare the site for future uses and some renovation of the historic buildings such as the Library buildings and a new sea defence wall. There was also provision for some basic investment to make the area attractive for people to visit with public toilets, a temporary pump track, play area and seafront classroom and a board walk along the beach.

The Black Rock rejuvenation is much needed to bring to life back to this part of the city. As the Coast to Capital Partnership said five years ago when awarding Brighton and Hove City Council the grant, 'as a progressive and growing City, Brighton would benefit greatly from the regeneration of this area'.

Having received the funding, it should have been a priority for the Council to get this work delivered, but like many other projects along the seafront, including Madeira

Terraces restoration, the Council has seemed slow and unable to deliver projects it has funding for or provide answers as to why the projects are not underway.

In March, five years on from this grant being awarded to the Council to conduct the works and with limited progress having been made on the ground, the council announced that it will now require an extra £3.9 million from local taxpayers to undertake it, bringing the total budget to £16 million.

The failure of the Council over so many years to regenerate this space has had a negative impact on the area, with large parts of the site looking like an industrial wasteland.

A large part of the site has been fenced off for years, attracting some of the worst graffiti in the city and acting as a physical barrier between Brighton Marina and the seafront. As the area has declined there have been problems with antisocial behaviour and the development of other social issues in the Black Rock area, including the degradation of the city's historic reading rooms and van dwellers. Many residents of the neighbouring residential areas at the Marina have felt unsafe walking around the area, particularly after dark.

Will the Leader of the Council advise:

- a) Does he feel that the Council has the capacity, skills and correct organisational structure to deliver large scale public works projects in the City?
- b) Will he personally take oversight to fix the issues that are causing delays with Madeira Terraces restoration and Black Rock Regeneration?
- c) Will lessons from the delays be learned for the rollout of future public works project, such as the Kingsway to the sea project, which received £9.5 million from the Government in the Budget last year?

Reply from Councillor Mac Cafferty, Leader of the Council

16.37 The Black Rock project is currently on site and making significant progress in transforming this important area of Brighton's seafront and has cross-party member oversight. The project has already successfully delivered its first phases of works including:

- Significant improvements to Duke's Mound including new road layout, signalling, landscaping and removal of many tons of waste & litter
- Relocation and expansion of the Local Wildlife Site with the support of Kew Garden's team: The bio-diversity net gain required from the project is a model of good practice in terms of the changes it will bring to mitigate the climate and the Bio-diversity Emergency.
- Moving the Seawall to enable a larger developable area. There was previously a complete lack of information about existing concrete structures in this area which the developer team mitigated with the completion of selective trial pits.
- Development of an 800 meter boardwalk to improve access to the beach which is open for use by the public and well received

The next phase will include the development a new access link between Black Rock and Brighton Marina, renovation of the historic Reading Rooms & Temple, and a temporary event space. The Reading Room and Temple are currently being marketed – and are

attracting strong interest , the council is confident it will let well with a good income stream. Occupation is targeted for the end of October 2022.

- The Project Team is collaborating with Parks and Highways to improve landscape design and reduce the use of high carbon footprint materials ie concrete
- Technical design is almost complete on the new access and contract procurement proceeding with final phase Contract to be signed now revised design has progressed.

Members continue to be updated at the Member Working Group meetings – with overall completion of the final phase due Q2 2023.

The project has already made significant progress making physical changes to a previously run-down area of the seafront. This has involved gaining planning permission, procuring a design team and construction partners and making significant progress with works. This has been within a context of unprecedented challenges for the construction industry with the combined impact of COVID, Brexit, global supply chain disruption and now the war in Ukraine all of which together are having a significant impact on costs, availability of skills/labour and delays with materials. These pressures are affecting many construction projects in the city and council regeneration projects the length and breadth of the country.

A key issue has been that the link road package had the tender returned significantly above its anticipated cost on second tender, after attracting no interest first time around. The team have now worked with our cost consultant and preferred contractor to significantly reduce this. The project team have also worked hard to protect the costs of the other ongoing works packages to limit the increases elsewhere.

The council manages a range of major projects and is continually looking at how lessons can be learnt and improvements made. But the amount of development in the city, evidenced by the number of cranes on the skyline, show that the council has a positive attitude towards good quality development and a track record of delivering project like Circus Street – which has started winning awards. As a member of the Strategic delivery board you have the opportunity to engage in the oversight of the Black Rock as well as all major projects in the city. Given your interest in this area of work I can look forward to seeing you at the next meeting, especially since you've not been to a meeting of the Board all year.

The project is transforming Black Rock, making it a pleasant and interesting area for residents and visitors to enjoy. Regular updates are posted on the Black Rock rejuvenation web pages and residents are able to contact a Black Rock community feedback email address with any queries blackrock@communityfeedback.co.uk.

(19) Councillor Meadows

16.38 We have been told there are 3,000 drain gullies that are either blocked or damaged.

What is the current plan to clear these?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.39 Thank you for your question.

There are in the region of 20,000 gullies in the city and 800 have been identified as being blocked, however this does not mean that the particular gully results in flooding as this depends on many factors. The adoption of a risk based approach means that the focus will be on those gullies with the highest risk (risk of flooding) and the city will continue to have a cyclical programme of emptying so that the risk of surface water is kept to a minimum.”

(20) Councillor Nemeth

16.40 Will the Chair agree to make plans to introduce more CCTV on Ingram Crescent in Wish Ward to tackle fly-tipping?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.41 Thank you for your question.

Housing have six cameras city wide, with one of these on the Ingram estate. This was positioned in the area experiencing the most fly-tipping, most of which was being driven to the site.

We recognise there is a wider problem with fly-tipping on the estate, however some of the fly-tipping hot spots are inaccessible for a CCTV camera, such as tunneled areas, so these cannot be considered. There are also further challenges with the other areas.

The most effective way of identifying fly-tippers is by use of a vehicle recognition system. Most of the fly-tipping in areas on the Ingram Estate not already covered by CCTV, is done by people bringing waste on foot, identifying them is not straight forward, we are looking at ways we can do this. If we are able to do this we will consider the Ingram estate, along with other areas when we move the cameras. This happens every six months and will next happen in October 2022. When we undertake the October review we will target areas with the highest-level fly-tipping and consider coverage city wide.

(21) Councillor Peltzer Dunn

16.42 Will the Chair agree to carrying out an audit of all Councillor expenses over the past seven years?

Reply from Councillor Wilkinson, Chair of the Audit & Standards Committee

16.43 As indicated in the recent report taken at Audit & Standards Committee, the process for managing Member Allowance claims needs to be digitised. Work to implement this action has begun and this will make the audit and review of claims simpler and quicker in the future. The officer resource required to review all past Councillor paper expense claims going back 7 years would be very significant and whilst I appreciate the request, this would not be a proportionate use of resources in my view. I am keen for the Council to ensure that the officer resource we do have is now focused on implementing a robust new digitised system which all members can have confidence in going forward.

(22) Councillor Simson

16.44 What plans does the Chair have to reduce traffic on Falmer Road which is now being used as a rat-run following changes to Lewes Road?

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.45 Thank you for your question.

There are many factors that can affect traffic flows on individual roads. The Lewes Road transport scheme was completed a number of years ago now, but there has been some significant development there since then too. We have also experienced the more recent effects of Covid-19 which has disrupted and changed many people's work and journey patterns, and increased home deliveries. This has no doubt had an effect on traffic flows on roads approaching the city.

Falmer Road is classified as a B road and therefore it is expected that it will be a key route for some drivers. It is also the only connection between the A259 and the A27 and therefore there is no alternative route for some essential journeys that have origins or destinations along the coast and further inland.

I totally agree that we need to reduce traffic levels as a priority, as our city has limited roadspace for people and vehicles. This would lead to better air quality, less carbon emissions, quieter streets and safer roads – all of which will help our communities to lead better and healthier lives. Active travel, public transport and cleaner vehicles all have a role to play in providing transport options for everybody's daily journeys, whether local or longer distance. We have just secured almost £28 million pounds to improve local bus services in the next few years, and work together with train operating companies. We are delivering more infrastructure for walking, cycling and wheeling, and we will deliver a new contract for the BikeShare scheme. Our electric vehicle charging programme is one of the best in the country in terms of access to that infrastructure. How we manage parking and improve our traffic management using

technology, using smart traffic signals and our Transport Control Centre, also helps with the efficient movement of people and vehicles.

We are therefore doing what we can to enable change, but ultimately that change has to come from people's individual and collective decisions, whether travelling from home, for work or for leisure. The council's current programme of transport initiatives and investment, and the future objectives of the next Local Transport Plan, will inform and enable people to make decisions about:-

- 1) whether or not they need to travel;
- 2) whether or not they can shift some or most of their journeys to more sustainable and environmentally friendly forms of transport if they do need to travel; and
- 3) using a cleaner vehicle, when motorised vehicles are needed for essential journeys.

Those decisions will make the differences that are necessary to reduce traffic flows across the city, including Falmer Road. The city is a popular place and many journeys start or finish outside the city and therefore the actions of our neighbouring local authorities and their communities will also have an effect on transport and traffic here. We need to work together on this to deliver the changes that you and many others want to see on local roads, so if you have suggestions about what we could do in your area to reduce traffic, I would be happy to hear them.

(23) Councillor Pissaridou

16.46 I was very surprised to receive this from a local GP. It is a much needed and valuable thing to do. Can we join please?

"I am a GP at Mile Oak Medical Centre and I was looking forward to joining my practice to this national Breastfeeding Welcome scheme. But after doing all the work needed to join, I've found out that Brighton and Hove council is not involved in the scheme. I think that's a real shame as breastfeeding is so important for mothers, children and the sustainability of the planet. Please could you look into signing the city up to the scheme so that many venues and GP surgeries are able to join and support increasing our cities breastfeeding rates?"

Reply from Councillor Shanks, Chair of the Health & Wellbeing Board

16.47 The most recent published data showed Brighton & Hove had the highest rate of breastfeeding initiation in the South-East, however we are always seeking to improve on this so continue to work with partner organisations to promote the benefits of breastfeeding and support families locally.

Public Health will present a scoping paper on the Breastfeeding Welcome Scheme to the Early Help Partnership Board in October. This is a multi-agency group which includes representatives from the Council, NHS and Community & Voluntary Sector.

(24) Councillor Bagaeen:

16.48 Why are there no council open vacancies for street cleansing and weeds removal on Blue Arrow? The advert closed on 7 July.

Reply from Councillor Davis / Heley, Joint Chair of the Environment, Transport & Sustainability Committee

16.49 There are open vacancies for Street/Beach/Weeding Operatives on Blue Arrow Website. (https://www.bluearrow.co.uk/jobs/jo220733485_1657525755-streetbeachweeding-operatives?currency=GBP&keywords=weeding)

Jobs are advertised across numerous different job boards and they are refreshed continuously. The feedback the Council has received is that the candidate pool is very sparse due to the Brexit and the ending of freedom of movement. We are offering a competitive rate for this level of role, however there is a shortage of candidates at the moment. This is not just affecting Brighton & Hove City Council, there is a national labour shortage.

17 REVIEW OF ARRANGEMENTS FOR COUNCIL AND COMMITTEE MEETINGS

17.1 Councillor Mac Cafferty introduced, and formally moved the report.

17.2 Councillor Brown moved an amendment on behalf of the Conservative Group which was formally seconded by Councillor Bagaen.

17.3 Councillor Allcock spoke on the matter.

17.4 Councillor Mac Cafferty in response to the debate confirmed that he did not accept the amendment.

17.5 The Mayor noted that an amendment to the recommendations had been moved and put it to the vote which was lost. The Conservative Group voted in favour of the amendment.

17.6 The Mayor then put the recommendations as detailed in the report listed in the agenda to the vote which was carried. The Conservative Group abstained from the vote.

17.7 RESOLVED:

- (1) That full Council agreed that the arrangements set out in the attached Protocol should cease to have effect immediately following the full Council meeting on 21st July 2022, subject to recommendations 2.2 and 2.3 below.
- (2) That full Council agreed that attendees are required to continue to wear masks at full Council and Committee meetings and to take an LFT test before attending those meetings, as set out at paragraph 3.6-3.7 of the report.
- (3) That the arrangements will be kept under review and the Chief Executive be granted delegated powers to modify the requirement regarding the wearing of masks and need for a lateral flow test ahead of Council or committee meetings if, following consultation with Group Leaders, he considers it appropriate.
- (4) That full Council noted the information in relation to ventilation at Hove Town Hall set out at paragraph 3.10-3.11 of the report.

18 KINGSWAY TO THE SEA

- 18.1 Councillor Mac Cafferty introduced the report, he highlighted that Kingsway to the Sea was a project which sought to transform the green spaces and sports facilities between the King Alfred and Hove Lagoon. The project would provide new and improved facilities in line with consultation, feedback, and future public expectations.
- 18.2 Councillor Appich spoke in support of the project.
- 18.3 Councillor Peltzer Dunn advised that he had referred the report to Council as he thought it was important that the Council appreciate the enormity of what had been achieved thus far. He thanked the Leader of the Council for his introduction of the report and extended thanks to Councillors Appich and Henry as members of the working party which met every month. He asked that there be further resident consultation. He stated that it was a wonderful chance for Hove and Portslade to benefit from an enormous Government grant. He concluded by thanking officers for the work undertaken on the scheme which had been second to none.
- 18.4 The Mayor stated that the report had been referred for information and moved that it be noted.
- 18.5 **RESOLVED:** That the report be noted

19 AUDIT REPORT ON MEMBER EXPENSES

- 19.1 The Mayor confirmed that the extract were draft minutes of the Audit & Standards Committee meeting held on 28 June 2022.
- 19.2 Councillor Wilkinson introduced the report. He advised that the report was referred to Council for information by the Conservative Group. He stated that a full debate took place at Audit & Standards Committee on 28 June 2022 and decisions were made to improve the current system for managing member expenses and a way forward agreed. Also, that all of the independent audit report recommendations were agreed with the following additional recommendations:
- All Members should be supported with, and regularly reminded of, their responsibilities to submit fully completed claim forms with supporting documentation within the relevant timeframe.
 - Democratic Services should consider whether it is possible to introduce electronic claim forms to reduce the possibility of a claim form being misplaced
 - That officers are instructed to consult with the Independent Remuneration Panel (IRP) regarding extending the time limit for submitting claims to three months
 - That the Committee receive an update report as soon as reasonably possible to a future meeting.

He further stated that as Chair of Audit & Standards Committee that allegations of misconduct, particularly in relation to taxpayers money were taken incredibly seriously, was keen to ensure that Audit & Standards retained oversight of the issue and received the update as agreed.

- 19.3 Councillor Meadows stated that she had heard that Councillor Phillips had paid back claimed expenses however wondered if this was accurate as there remained 6 missing claim forms which could hold other information meaning further amounts outstanding. She highlighted that 3 claims from Councillor Phillips were included in the report. She stated that her questions had gone unanswered with the Council assuming the matter was now closed. She added that without the missing forms there could be no assumptions just speculations.
- 19.4 Councillor Littman stated that at the beginning of the Audit & Standards Committee meeting that the Monitoring Officer made clear in his introduction that the report cleared Councillor Phillips of fraud. He highlighted that Councillor Meadows accusation of fraud was directly contradicted by the report and that the audit was carried out by a senior audit manager from another council.
- 19.5 The Mayor stated that the report had been referred for information and moved that it be noted.
- 19.6 **RESOLVED:** That the report be noted

20 STANDING UP FOR RESPONSIBLE TAX CONDUCT

- 20.1 The Joint Notice of Motion as listed in the agenda was moved by Councillor Allcock, and formally seconded by Councillor Clare.
- 20.2 Councillor Hugh-Jones spoke in favour of the motion.
- 20.3 Councillor McNair advised that the Conservative Group would be abstaining on the motion.
- 20.4 The Mayor then put the following motion to the vote:

This Council notes:

- Around 17.5% of public contracts in the UK have been won by companies with links to tax havens;
- Two thirds of people (66%) believe the Government and local councils should at least consider a company's ethics and how they pay their tax, as well as value for money and quality of service provided, when awarding contracts to companies;

This Council supports the Councils for Fair Tax Declaration which encourages Councils to:-

1. Lead by example and demonstrate good practice in our tax conduct, right across our activities;
2. Ensure IR35 is implemented robustly and contract workers pay a fair share of employment taxes;
3. Discourage the use of offshore vehicles for the purchase of land and property from the Council, especially where this leads to reduced payments of stamp duty;
4. Where appropriate, undertake due diligence to ensure that not-for-profit structures are not being used inappropriately by suppliers as an artificial device to reduce the payment of tax and business rates;

5. Where appropriate, demand clarity on the ultimate beneficial ownership of suppliers UK and overseas and their consolidated profit & loss position, given lack of clarity could be strong indicators of poor financial probity and weak financial standing;
6. Promote Fair Tax Mark certification especially for any business in which we have a significant stake and where corporation tax is due;
7. Support Fair Tax Week events in the area, and celebrate the tax contribution made by responsible businesses are proud to promote responsible tax conduct and pay their fair share of corporation tax;
8. Support calls for urgent reform of UK procurement law to enable local authorities to better penalise poor tax conduct and reward good tax conduct through their procurement policies.

20.5 The Mayor confirmed that the motion had been carried. The Conservative Group abstained from the vote.

21 SUPPORT FOR YEAR-ROUND TEMPORARY ICE RINK IN BRIGHTON AND HOVE

21.1 The Notice of Motion as listed in the agenda was proposed by Councillor Fishleigh - Independent Councillor and formally seconded by Councillor Atkinson.

21.2 Councillor Robins moved an amendment on behalf of the Labour Group which was formally seconded by Councillor Appich.

21.3 Councillor Osborne and Nemeth spoke on the motion.

21.4 Councillor Fishleigh noted the comments and confirmed she did not accept the amendment.

21.5 The Mayor then put the amendment to the vote which was carried. The Conservative Group voted against the amendment.

21.6 The Mayor then put the following motion as amended to the vote:

“This Council notes:

- An ice rink has not been included in the Sports Facilities Investment Plan, but this council is supportive of a year-round ice rink in the city if an appropriate bid comes forward at an appropriate site

This Council also notes that:

- The land on the West side of the King Alfred is vacant and available now, although may not be appropriate or feasible for a year-round ice rink
- Local residents could be consulted in order to utilise this land for some form of meantime-use to community benefit, including a pop-up ice rink if feasible, before long term plans for the King Alfred take shape”

21.7 The Mayor confirmed that the motion had been carried.

22 ABORTION RIGHTS

- 22.1 The Notice of Motion as listed in the agenda was proposed by Councillor Ebel on behalf of the Green Group and formally seconded by Councillor Mac Cafferty.
- 22.2 Councillor Grimshaw moved an amendment on behalf of the Labour Group which was formally seconded by Councillor Appich.
- 22.3 Councillor Meadows spoke on the motion stating that it was not a matter for Brighton and Hove and the Council should be discussing local issues, not matters which were the responsibility of other authorities or countries and advised that the Conservative Group would be abstaining from the vote.
- 22.4 Councillor Knight spoke in favour of the motion.
- 22.5 Councillor Ebel noted the comments and confirmed that she accepted the amendment.
- 22.6 The Mayor then put the following motion as amended to the vote:

In light of the recent US Supreme Court decision to overturn Roe v Wade and the public perception that this could in turn erode abortion rights in the UK, this Council:

1. Reiterates its support for a woman's right to choose free, safe & legal abortion at a local, national and international level
 2. Expresses solidarity with women internationally and within the UK and its fundamental belief that women need to feel safe attending an abortion clinic. We deplore intimidating behaviour outside clinics. Where abortion is or has been made illegal, it still continues but unsafely
 3. Expresses support for the women of Northern Ireland where the government has failed to commission abortion services, despite legalisation to extend, forcing women to travel abroad for an abortion
 4. Expresses its support for women's rights organisations campaigning for a woman's right to choose, including the Alliance for Choice in Northern Ireland and Abortion Support Network which are supporting women with practical information, accommodation and the costs of travelling
 5. Expresses dismay that abortion continues to be criminalised in England, Wales and Scotland, unless certain criteria apply, and that women are increasingly being prosecuted for accessing abortion, including migrant women, many of whom are denied access to free abortions on the NHS
 6. Requests the Chief Executive write to the Government to ask them to enshrine the right to abortion in public law and remove abortion from the criminal statute book and regulate it as a health matter instead, ensuring free, safe and legal access across the UK
 7. Notes that since the closure of the BPAS clinic, local residents in need of abortions are finding it extremely difficult to access services causing delays and unnecessary trips to London
 8. Requests officers work with local healthcare partners to ensure local abortion services are running efficiently and providing a local service to those who need it
- 22.7 The Mayor confirmed that the motion had been carried.

23 TAKE ACTION TO TACKLE GENDER INEQUALITY: FROM PERIOD POVERTY TO SAFETY, HEALTH AND EDUCATION

- 23.1 The Notice of Motion as listed in the agenda was proposed by Councillor Moonan on behalf of the Labour Group and formally seconded by Councillor Appich.
- 23.2 Councillor Powell moved an amendment on behalf of the Green Group which was formally seconded by Councillor Llyod.
- 23.3 Councillor Meadows spoke on the motion advising that this was a matter for consideration of the Health & Wellbeing Board and stated that the Conservative Group would therefore abstain from voting on this motion.
- 23.4 Councillor Fishleigh spoke in support of the period poverty element of the motion.
- 23.5 Councillor Moonan noted the comments and confirmed that she accepted the amendment.
- 23.6 The Mayor then put the following motion as amended to the vote:

Council notes:

- The US Supreme Court decision to overturn Roe v Wade
- Systematic and institutional misogyny meaning women being failed in areas ranging from justice to health
- Brighton & Hove has been ranked the worst city in the country for period poverty, with almost HALF of women and girls unable to afford basic sanitary protection
- Charities are still supporting red boxes in schools and food banks with sanitary products and commends the work of projects like the young-people led Brighton Period Project who collect and distribute products in the city
- Healthwatch survey data which shows over a THIRD of women in Brighton & Hove missed smear tests and critical cervical screenings last year although recognises the limitations of the data provided, meaning this may not be an accurate picture
- That Government intervention is needed, but that there are concrete real actions we can take to tackle period poverty, female health inequalities, and to improve safety and education some of which is already taking place in a variety of settings
- Services already provided by Brighton & Hove City Council, including support in schools such as the equality service provided on BEEM
- The recent consultation on the creation of a Violence Against Women and Girls Strategy

Therefore, resolves to:

- 1) Request Tourism, Equalities, Communities and Culture Committee to ask officers to bring forward a report, in consultation with residents who self-define as a woman or another marginalised gender identity, and women's organisations and other organisations such as youth services and public sector partners in the city, that outlines a new Gender Equality Strategy, aimed at tackling gender inequality in the city

- 2) Further requests TECC to ask officers to include in the report information on work already ongoing, alongside any new proposals to work in partnership to tackle gender inequality to focus on four key areas;
- Poverty (to consider distributing free sanitary products at community centres and youth clubs)
 - Health (including requesting that the NHS to consider a public health awareness campaign to improve cervical screening rates)
 - Safety (including improvements to support services for victims of VAWG, and a Night Time Safety Charter and a consultation to hear from women and girls on improving street safety)
 - Education (including rolling out further commissioned services such as anti-misogyny and gender equality training)

23.8 The Mayor confirmed that the motion had been carried. The Conservative Group abstained.

24 LICENSING SCHEME FOR SHORT TERM HOLIDAY LETS AND AIRBNBS

24.1 The Notice of Motion as listed in the agenda was proposed by Councillor Williams on behalf of the Labour Group and formally seconded by Councillor Allcock.

24.2 Councillor Osborne moved an amendment on behalf of the Green Group which was formally seconded by Councillor Gibson.

24.3 Councillor Lewry spoke in favour of the amendment as in the last few years the matter had previously been investigated by the council and concluded on each occasion that the council had no power for licensing short term lets which was a national matter.

24.5 Councillor Williams confirmed that she did not accept the amendment.

24.6 The Mayor then put the amendment to the vote which was carried. The Conservative Group voted in favour.

24.7 The Mayor then put the following motion as amended to the vote:

This committee notes:

- The disruption, distress, and exacerbation to the housing supply crisis that the rise in short term holiday lettings such as AirBnB have inflicted on our local communities
- That some short-term holiday lets have replaced long term rental accommodation, stifling supply of rented accommodation and in turn driving rents up and conditions down
- The detrimental impact holiday lets have on local hotels, bed and breakfast establishments and our aim for a circular local economy that builds community wealth

This council also notes:

- The council has previously reviewed options to regulate short term lets (1) (2), which confirmed that it has no powers to license short term lets
- The government have recently assessed the impact of short term lets in England (3) and have launched a consultation on regulation in June 2022, which closes on 21st September. (4)

Therefore, this Council resolves to:

- 1) Request a report to come to next TECC Committee which provides updates on the report from March 20, including new legislation in Wales, changes in tax policy, and suggestions made by AirBnB themselves (5)
- 2) Submit a response to the government's call for evidence
- 3) Request the Chief Executive write to the Housing Secretary, lobbying for powers to;
 - Designate a minimum percentage of rented housing to be reserved for long term lets, and place a cap on the number of holiday lets
 - Introduce a licensing scheme similar to that laid out by the Welsh Government, to not only limit the number of second homes and holiday lets, but to ensure fair taxation is extracted from them
 - Change planning laws to require landlords wishing to convert their property into a holiday let to have to apply for change of use to a new class use for holiday lets

24.8 The Mayor confirmed that the motion as amended had been carried. The Conservative Group voted in favour.

25 CUSTOMER SERVICE

25.1 The Notice of Motion as listed in the agenda was proposed by Councillor McNair on behalf of the Labour Group and formally seconded by Councillor Meadows.

25.2 Councillor Clare moved an amendment on behalf of the Green Group which was formally seconded by Councillor Yates.

25.3 Councillor Yates spoke in favour of the motion.

25.4 Councillor Meadows confirmed that she did not accept the amendment.

25.5 The Mayor then put the amendment to the vote which was carried. The Conservative Group voted against the amendment.

25.6 The Mayor then put the following motion as amended to the vote:

This Council:

- Recognises and appreciates that the pandemic has seen an unprecedented challenge for staff at the City Council;

- Notes that some services have not offered a face-to-face customer support service for many years, with services such as City Clean offering a phone/digital only service since at least 2007
- Notes that there has been a 55% increase in stage 1 complaints regarding customer service but notes that this represents an 11% increase compared to pre-pandemic year of 2019/20 when adjusted against customer contact levels;
- Believes that a satisfaction rate of 57% for transactional council services is disappointing but commends council teams for achieving 1% above the national average for satisfaction and improving satisfaction in the year where the national average was dropped;
- Notes that against the backdrop of continued cuts from Government to the council's budget, we need to adjust our method of delivering customer service to best use our resources.
- Believes that customer satisfaction will increase if we provide a range of ways to contact the council, including a 24/7 digital service, as is standard in industry and deploy our resources to meet customer demand across all channels.
- Welcomes that an in-person service has been offered at Hove and Brighton Customer Service Centres since as early as September 2021, and welcomes these services continuing to be well-staffed with direct links to key service teams, to ensure residents can access key services such as Housing, Parking, Libraries, Benefits and Bereavement, and Financial Advice 9-5 5 days per week in-person, alongside a focus on improving digital access, which will help to ensure that the most vulnerable residents, including often the poorest, the elderly, the dyslexic, and the hard of hearing, are able to access council support in the way that works for them.

Therefore, resolves to:

1. Express its support for ensuring that key services such as Housing, Parking, Libraries, Benefits, Bereavement, and Financial Advice, and Rubbish and Recycling will provide customer service in a variety of ways that meets customer needs through the continued development of the current operating model taking into account customer feedback;
2. Further express its support its support for an improved contact rate to letters, phone and online
3. Expresses support for continued hybrid working where appropriate, so long as working from home does not impact upon residents being able to access services over the phone or in-person

25.7 The Mayor confirmed that the motion as amended had been carried.

25.8 **RESOLVED**

This Council:

- Recognises and appreciates that the pandemic has seen an unprecedented challenge for staff at the City Council;
- Notes that some services have not offered a face-to-face customer support service for many years, with services such as City Clean offering a phone/digital only service since at least 2007

- Notes that there has been a 55% increase in stage 1 complaints regarding customer service but notes that this represents an 11% increase compared to pre-pandemic year of 2019/20 when adjusted against customer contact levels;
- Believes that a satisfaction rate of 57% for transactional council services is disappointing but commends council teams for achieving 1% above the national average for satisfaction and improving satisfaction in the year where the national average was dropped;
- Notes that against the backdrop of continued cuts from Government to the council's budget, we need to adjust our method of delivering customer service to best use our resources.
- Believes that customer satisfaction will increase if we provide a range of ways to contact the council, including a 24/7 digital service, as is standard in industry and deploy our resources to meet customer demand across all channels.
- Welcomes that an in-person service has been offered at Hove and Brighton Customer Service Centres since as early as September 2021, and welcomes these services continuing to be well-staffed with direct links to key service teams, to ensure residents can access key services such as Housing, Parking, Libraries, Benefits and Bereavement, and Financial Advice 9-5 5 days per week in-person, alongside a focus on improving digital access, which will help to ensure that the most vulnerable residents, including often the poorest, the elderly, the dyslexic, and the hard of hearing, are able to access council support in the way that works for them.

Therefore, resolves to:

1. Express its support for ensuring that key services such as Housing, Parking, Libraries, Benefits, Bereavement, and Financial Advice, and Rubbish and Recycling will provide customer service in a variety of ways that meets customer needs through the continued development of the current operating model taking into account customer feedback;
2. Further express its support its support for an improved contact rate to letters, phone and online
3. Expresses support for continued hybrid working where appropriate, so long as working from home does not impact upon residents being able to access services over the phone or in-person

26 PUBLIC TOILETS

- 26.1 The Notice of Motion as listed in the agenda was proposed by Councillor Nemeth on behalf of the Labour Group and formally seconded by Councillor Bagaeen.
- 26.2 The Mayor noted that there were two amendments in relation to this motion as set out in the addendum papers.
- 26.3 Councillor Hugh-Jones moved the first amendment on behalf of the Green Group which was formally seconded by Councillor Mac Cafferty.
- 26.4 Councillor Allcock moved the second amendment on behalf of the Labour Group which was formally seconded by Councillor Appich.

- 26.5 Councillor Bagaeen spoke in favour of the motion.
- 26.6 Councillor Nemeth confirmed that he would not accept the amendments.
- 26.7 The Mayor then put the Labour Group amendment to the vote which was lost.
- 26.8 The Mayor then put the Green Group amendment to the vote which was lost.
- 26.9 The Mayor then put the following motion to the vote:

This Council:

- Recognises huge public dissatisfaction over the current state of the public toilets across the city;

Therefore, resolves to:

1. Request that officers consider the immediate provision of portaloos where appropriate;
 2. Request the Chief Executive to widely communicate existing information regarding the list of proposed refurbishment dates for each toilet block;
 3. Request that the Environment, Transport & Sustainability Committee asks officers to bring forward a report which outlines options for other interim measures.
- 26.10 The Mayor confirmed that the motion had been lost. The Conservative Group voted in favour of the motion.

26.11 **RESOLVED**

That the motion was lost.

27 CLOSE OF MEETING

The meeting concluded at 9.18pm

Signed

Chair

Dated this

day of

2022

Brighton & Hove City Council

Council

Agenda Item 56

Subject: Written questions from Councillors.

Date of meeting: 15 December 2022

Report of: Executive Director for Governance, People & Resources

Contact Officer: Name: Anthony Soyinka
Tel: 01273 291006
Email: anthony.soyinka@brighton-hove.gov.uk

Ward(s) affected: All

For general release

The following questions have been received from Councillors and will be taken as read along with the written answer detailed below:

1. Councillor Appich

Mental Health Rapid Response service:

The Mental Health Rapid Response Service was launched during 2015 to improve community mental health services across the city. Sadly, I am informed that it is neither rapid, nor responsive, and only staffed by one person. Despite numerous complaints, there appears to have been no discernible improvement in the service provision, as reported to me.

Could the Chair of the Health and Well Being Board explain what actions she will take to ensure this vital service is improved given the mental health crisis we are experiencing and that we are now in an era of partnership working with the NHS?

Reply from Councillor Shanks, Chair of the Health & Wellbeing Board

2. Councillor Grimshaw

Roof Repairs:

Please can I be provided with an update as to who is responsible for roof repairs of ex council properties if the premises below the roof is now in the possession of a leaseholder?

Who maintains responsibility for repairs to the roof?

Reply from Councillor Gibson / Hugh-Jones, Joint Chairs of the Housing Committee

3. Councillor Allcock

Weeds:

How many times have each street in our City had weeds cleared by Council or other contracted staff since Summer 2020?

How many times have each street in our City had leaves cleared during the Autumn since and including 2020?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

4. Councillor Grimshaw

EPC legislation:

Can the Chair of Housing confirm that housing associations who house residents through our Homemove policy are being urged to observe EPC legislation (in line with privately rented housing which came into force in 2020 but SHL have until 2030)?

Reply from Councillor Gibson / Hugh-Jones, Joint Chairs of the Housing Committee

5. Councillor Grimshaw

Damp Surveys:

Can the chair of housing confirm if Housing Association and Local Authority properties are surveyed by an CRDS or CSRT (certified remedial damp) accredited surveyor?

Reply from Councillor Gibson / Hugh-Jones, Joint Chairs of the Housing Committee

6. Councillor Grimshaw

Mould:

Does the chair of housing agree that Mould is life threatening so should be investigated by a qualified expert as a vast subject? Can the chair of housing confirm that tenants are advised they should not try to remove themselves due to sporing? And recognise that hidden mould in cavities is more dangerous than visible mould? Dead mould is even more dangerous as particles/spores smaller so more invasive to humans. Condensation mould sits on the surface, dangerous toxic mould lives in building materials and is usually caused by water ingress or burst pipes. Can the chair of housing also confirm that training is given on Environmental Health and that the relevant housing staff should be properly educated about mould?

Reply from Councillor Gibson / Hugh-Jones, Joint Chairs of the Housing Committee

7. Councillor Grimshaw

Ventilation:

Can the chair of housing seek to ensure that ventilation in housing is a priority and that windows should have filtered trickle vents for fresh air entry? There should then be a quiet extractor strategically placed to draw the old air 24/7.

Reply from Councillor Gibson / Hugh-Jones, Joint Chairs of the Housing Committee

8. Councillor O'Quinn

Enforcement – dogs off leads and cyclists on seafront lower promenade:

There are regularly a large number of dogs who are walked off lead on Brighton and Hove seafront, lower esplanade, which causes significant issues for those people who obey the rules and walk their dogs on leads. There are also a number of cyclists who cycle along the seafront where they are banned from doing so creating a hazard for pedestrians. How many enforcement notices have been given in the last year in the two situations described?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

9. Councillor Wilkinson

Parking Enforcement:

Given the increasing numbers of parking schemes, ETROs, and TROs across the city, what plans are in place to increase officer capacity to take action on parking infringements?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

10. Councillor Wilkinson

Hanover and Tarner LTN Pilot Scheme:

- a) When can the city's residents expect to see the complete results of the consultation into the Hanover and Tarner Low Traffic Neighbourhood Pilot Scheme?
- b) What specific monitoring of traffic levels has occurred to date in respect to the scheme and if so, at which locations?
- c) Is there any indication to date that congestion will occur in any part of the city as a result of the schemes current design?
- d) Is air quality monitoring specific to the scheme taking place and what data is currently held on the levels of the various pollutants on the surrounding roads before the implementation of the LTN, now and what is predicted to happen on the surrounding roads. Please specify any roads on which this information is held and how residents can access such information?

- e) What criteria is to be used to evaluate the scheme and which areas will be included in any such evaluation. Will account be taken of the quality of life to people outside this area through any changes such as increase in traffic movements, compromised road safety for pedestrians and raised levels of pollution?
- f) Has any monitoring been carried out on travel behaviours or car ownership before the implementation of this Low Traffic Neighbourhood?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

11. Councillor Wilkinson

VAWG:

What actions has the Council taken over the last 12 months to tackle the issue of violence against women and girls?

Reply from Councillor Mac Cafferty, Leader of the Council

12. Councillor Wilkinson

Care co-operatives:

What work has the Council done to explore the role of co-operatives in the social care sector, and whether the co-operative model could support adult social care in Brighton and Hove, and what is your assessment of the viability and benefits of more co-operatism in the city's social care sector?

Reply from Councillor Mac Cafferty, Leader of the Council

13. Councillor Wilkinson

Cost-of-Living Emergency:

In October this Council supported a Labour motion to declare a Cost-of-Living Emergency in the city. It is clear to all that the cost-of-living crisis is spiralling out of control and will affect all our residents, from the most vulnerable to homeowners and renters, pensioners and businesses. What has the council done since to;

- a) Promote the emergency?
- b) Develop plans for a formal emergency response?
- c) Convene a cost-of-living summit?

Reply from Councillor Mac Cafferty, Leader of the Council

14. Councillor Yates

Can the administration reassure residents of Moulsecoomb that the authority has no intention of allowing properties it owns the freehold of in Moulsecoomb Way become additional student housing. These properties provide valuable employment and economic benefits to the area and the whole city and should not be sold off or leased out for a quick buck from developers to the detriment of the local community.

Reply from Councillor Mac Cafferty, Leader of the Council

15. Councillor Bell

Proposed Happy Valley cycle path

The council is proposing constructing a new cycle path through Happy Valley adjacent to Falmer Road, whilst there is already a cycle path that runs between Ovingdean and Woodingdean that is well-used. The current path would be used even more if it had a proper surface which it doesn't, despite having been repaired several times.

Can the Chair provide a breakdown of how many times the walking & cycling path between Ovingdean and Woodingdean that serves Old Parish Lane has been resurfaced over the past five years, how much this has cost and the reasons why the Administration is considering funding a second path so close to the first one?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

16. Councillor Simson

Problems with solar panels on council houses in Woodingdean

Several years ago the council fitted solar panels to a small number of tenants' properties in Woodingdean.

There have subsequently been problems with birds nesting under the panels, as no protective netting was fitted at the time.

Also, I'm told by tenants living in those properties that they've never seen any reduction in the cost of their electricity supply, despite hosting these solar panels.

Can the Chair advise:

a) Why protected netting has not been fitted to solar panels on council houses to protect them; and whether council is considering installing such netting now?

b) What monitoring the council has done on these panels, including into whether electricity costs are being reduced, considering the substantial original cost of supplying them?

Reply from Councillor Gibson / Hugh-Jones, Joint Chairs of the Housing Committee

17. Councillor Barnett

Housing repairs answerphone

Council tenants chasing up their housing repairs are still having to listen to a council voice mail when they call. The voice mail says that the council is behind on its repairs 'due to covid' and that the council is 'working hard to catch up'.

This information is not correct. Since the Council insourced the housing repairs service in March 2020, the housing repairs backlog has been going up each and every month and been increasing consistently. For example, since October this year the backlog has increased from 9,000 to above

10,000. This is nothing to do with Covid and there is no catch-up going on.

Can the chair advise:

- a) Will this voicemail be changed to reflect the accurate current situation?
- b) When can residents expect to speak to a person when they call the Housing Department Housing Repairs line instead of receiving an answer phone message?

Reply from Councillor Gibson / Hugh-Jones, Joint Chairs of the Housing Committee

18. Councillor Barnett

Empty seniors council houses

Statistics from the Council's Seniors Housing Department show that there are currently 37 seniors housing properties sitting empty.

Why, when there are many elderly residents in the city desperate for a place in a sheltered block, are there so many empty seniors council homes with no one living in them, right across the city?

Reply from Councillor Gibson / Hugh-Jones, Joint Chairs of the Housing Committee

19. Councillor Bagaeen

Greenest city centres in the UK

In a recent study on Britain's greenest city centres published in November, which compared 68 municipalities in Great Britain with populations of at least 100,000, Brighton and Hove came 40th out of 68.

Three metrics of "greenness" were used:

- 1) Tree cover using an algorithm to randomly sample recent aerial imagery
- 2) The presence of green spaces using open-source data from Ordnance Survey (Great Britain's national mapping agency)
- 3) The normalised difference vegetation index (NDVI), which uses satellite observations of light absorption and reflection to measure vegetation cover in a given area

This is another unwelcome ranking result for Brighton city centre, after it was ranked the 8th most crime-ridden out of 33,000 LSOAs in England and Wales.

Much of the vegetation in the city centre has been neglected by the Council and areas that were once vibrant vegetation spaces have become desolate and deprived of vegetation. Victoria Gardens is a case in point. Planter boxes are left vandalised and overrun with weeds.

Why after twelve years of Green/Labour Councils is Brighton performing so poorly in the greenest city centre national index and what steps will be taken to turn this around?

Reply from Councillor Mac Cafferty, Leader of the Council

20. Councillor Brown

Hove drains

Parts of Hove Park Ward, particularly Goldstone Crescent and Goldstone Close were very badly flooded recently. The leaves were obviously part of the problem but as a state of the art pumping tanker was unable to completely unblock a drain there has to be a serious maintenance failure.

How often are the drains inspected and what is going to be done about the badly blocked ones?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

21. Councillor McNair**Security at the Gathering Place, Hollingbury**

The Gathering Place laundry keeps on being vandalised despite recently having a new door fitted. Would it be possible to have CCTV fitted to reduce the prevalence of antisocial behaviour?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

22. Councillor Meadows**Parking arrangements at Old Boat Community Centre, Hollingbury**

Many children and vulnerable adults visit the Old Boat Corner Community Centre and the Nautical Training Corp at the bottom of Carden Hill. Carden Hill is a major artery where cars drive fast, and there are many parked vans and a bend at the bottom of the road making crossing particularly dangerous. Would it be possible to investigate providing a pedestrian crossing at the bottom of Carden Hill to help children and adults negotiate the road safely?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

23. Councillor Theobald**Council flood prevention measures in Patcham**

Homes in Warmdene Road have gates to prevent water flooding their homes. During the recent torrential rain, it is also apparent that selected homes in Winfield Avenue also suffer from significant flooding, possibly because of inadequate drainage and also because of the camber of the road. Will Officers look into fitting gates for relevant flood victims in Winfield Avenue?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

24. Councillor Lewry

Bin service on Harmsworth Crescent, Hangleton

There are recurring issues with the City Clean bin collection service at Harmsworth Crescent that are related to the council's dedicated bin storage area.

The bin storage area at Harmsworth Crescent serves three flats and was put in place by the council. However, City Clean frequently does not move these heavy bins out from the storage area for collection. This means that bins are often not collected, resulting in residents having to subsequently chase up catch-up collections with City Clean.

Can this situation be resolved, so that residents' bin services are completed each week for the residents of Harmsworth Crescent?

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

25. Councillor Theobald

Schedule of public toilet refurbishment

At the last meeting of the Full Council, in response my oral question, I was promised a schedule of refurbishment for public toilets in the city, which I have yet to receive.

Please can you provide me with this information here, in written form.

Reply from Councillor Davis / Hills, Joint Chairs of the Environment, Transport & Sustainability Committee

Brighton & Hove City Council

Council

Agenda Item 57

Subject: Oral questions from councillors.

A period of not more than 30 minutes is set aside for oral questions from Members, at the expiry of which, the mayor will call a halt and proceed to the next item of business of the agenda. Any Member whose question then remains outstanding will be contacted to determine whether they wish to have a written answer provided or for their question to be carried over to the next meeting.

The following Members have indicated that they wish to put questions to the Leader, Chairs of Committees or Members of the Council that have been appointed to an outside body. The Councillor asking the question may then ask one relevant supplementary question which shall be put and answered without discussion:

The following questions have been received from Councillors and will be taken as read along with the written answer detailed below:

Date of meeting: 15 December 2022

1. Councillor Appich

Subject Matter: **Temporary Accommodation**

Reply from Councillor Gibson / Hugh-Jones, Joint Chair of the Housing Committee

2. Councillor Bell

Subject Matter: **Brighton Marathon**

Reply from Councillor Mac Cafferty, Leader of the Council

3. Councillor Allcock

Subject Matter: **Cycle Hangars**

Reply from Councillor Davis / Hill, Joint Chair of the Environment, Transport & Sustainability Committee

4. Councillor Simson

Subject Matter: **Royal Pavilion Gardens**

Reply from Councillor Mac Cafferty, Leader of the Council

5. Councillor Knight

Subject matter: **Mould**

Reply from Councillor Gibson / Hugh-Jones, Joint Chair of the Housing Committee

- 6. Councillor Platts**
Subject Matter: Covid-19 and public toilets' provision

Reply from Councillor Davis / Hills, Joint Chair of the Environment, Transport & Sustainability Committee
- 7. Councillor Nemeth**
Subject Matter: **Memorial to Cllr Garry Peltzer Dunn**

Reply from Councillor Mac Cafferty, Leader of the Council
- 8. Councillor Pissaridou**
Subject Matter: **Freedom Leisure Sports Centre North Portslade**

Reply from Councillor Gibson / Hugh-Jones, Joint Chair of the Housing Committee
- 9. Councillor Hamilton**
Subject Matter: **Public Toilets**

Reply from Councillor Davis / Hills, Joint Chair of the Environment, Transport & Sustainability Committee
- 10. Councillor McNair**
Subject Matter: **Trees policy**

Reply from Councillor Davis / Hills, Joint Chair of the Environment, Transport & Sustainability Committee
- 11. Councillor Fishleigh**
Subject Matter: **Council-owned land at the Gasworks site**

Reply from Councillor Davis / Hills, Joint Chair of the Environment, Transport & Sustainability Committee
- 12. Councillor Wilkinson**
Subject Matter: **Committee Reports**

Reply from Councillor Mac Cafferty, Leader of the Council
- 13. Councillor Bagaean**
Subject Matter: **Aldrington Tunnel**

Reply from Councillor Davis / Hills, Joint Chair of the Environment, Transport & Sustainability Committee
- 14. Councillor Robins**
Subject Matter: **RPMT staff backpay**

Reply from Councillor Osborne / Powell, Joint Chair of Tourism Equalities Communities & Culture Committee

15. Councillor Lewry
Subject Matter: **Dangerous dogs' policy**

Reply from Councillor Davis / Hills, Joint Chair of the Environment, Transport & Sustainability Committee

16. Councillor Grimshaw
Subject Matter: **Disability Advocacy availability**

Reply from Councillor Osborne / Powell, Joint Chair of Tourism Equalities Communities & Culture Committee

Brighton and Hove City Council

COUNCIL

Agenda Item 59

Subject: **Review of the Council's Constitution**

Date of Meeting: **15 December 2022**

Contact Officer: Name: **Lisa Johnson**
E-mail: lisa.johnson@brighton-hove.gov.uk

Wards Affected: **All Wards**

FOR GENERAL RELEASE

Action Required of Council:

To receive the recommendations of the Policy & Resources Committee for consideration.

Recommendations:

That Council:

- (i) Approves the proposed changes referred to in paragraph 2.1

That Policy & Resources Committee and Full Council:

- (ii) Authorise the Chief Executive and Monitoring Officer to take all steps necessary or incidental for the implementation of the changes agreed by the Policy & Resources Committee and by Full Council, and authorise the Monitoring Officer to amend and re-publish the Council's constitutional documents to incorporate the changes.
- (iii) Agree that the proposed changes come into force immediately following their approval by Policy & Resources Committee or by Full Council, as appropriate.

Brighton and Hove City Council

Brighton & Hove City Council

Policy & Resources Committee

4.00pm 1 December 2022

Hove Town Hall - Council Chamber

Draft Minutes

Present: Councillor Mac Cafferty (Chair) Allcock (Joint Opposition Spokesperson), Appich (Joint Opposition Spokesperson), Allbrooke, Evans, McNair, Yates, Hugh-Jones, Nemeth and Osborne

Also present: Dr Anusree Biswas Sasidharan, Standing Invitee

Part One

87 REVIEW OF THE COUNCIL'S CONSTITUTION

87.1 The Committee considered the report of the Executive Director Governance People & Resources which proposed changes to the Council's Constitution. The report had recommendations for both this Committee and Full Council. The report was introduced by the Assistant Director Legal and Democratic Services.

The following Officer Amendment to the report was provided:

1. *To add a new paragraph 3.28 after 3.27 as follows:*

Proposal relating to the appointment of a member to East Sussex Fire and Rescue Service

3.28 *Following the very sad death of Councillor Garry Peltzer-Dunn, the Conservative Group has nominated Councillor Robert Nemeth to be appointed as a member of ESFRS. This appointment can be made by Policy & Resources Committee as opposed to full Council for reasons of timing. The next Fire Authority meeting takes place on 8th December and therefore Policy & Resources Committee is requested to approve the appointment.*

2. *An additional recommendation to read:*

2.5 *Agrees the appointment of Councillor Robert Nemeth as a member of East Sussex Fire and Rescue Service as set out at paragraph 3.28.*

Brighton and Hove City Council

3. *The numbering of the following recommendations to be updated as follows:-*

Full Council

2.6 Approves the proposed changes referred to in paragraph

Policy & Resources Committee and Full Council:

2.7 Authorise the Chief Executive and Monitoring Officer to take all steps necessary or incidental for the implementation of the changes agreed by the Policy & Resources Committee and by Full Council, and authorise the Monitoring Officer to amend and re-publish the Council's constitutional documents to incorporate the changes.

2.8 Agree that the proposed changes come into force immediately following their approval by Policy & Resources Committee or by Full Council, as appropriate.

87.2 The Committee noted the amendment.

87.3 Councillor McNair noted the suggested limit of 150 words for Member Questions and felt that may not be achievable and was concerned with the shorter minutes and that it was important they still needed to be factual and clear.

87.4 Allbrooke supported the changes to shorter minutes and welcomed that an action log would now also be provided.

87.5 The Committee voted on the recommendations, and they were agreed with two abstentions from the Conservative Group members.

87.6 RESOLVED: That the Committee –

- (i) Recommends to full Council the proposals set out at paragraphs 3.1-3.9 (Council Procedure Rules), 3.14 (Sub-Committee reporting) and 3.20-3.23 (Contract Standing Orders and the Petitions Scheme);
- (ii) Noted the proposals set out at paragraph 3.10-3.12 (Minutes of meetings), 3.24 (the light touch annual survey on the Constitution) and 3.25 -3.27 of the report (the co-option of an additional Independent Person to Audit and Standards Committee);
- (iii) Agreed the proposals to make minor changes to the Scheme of Officer Delegations set out at paragraph 3.15 (Safer Communities) and 3.16 (authorised and unauthorised encampments);

Brighton and Hove City Council

- (iv) Agreed the proposals to make changes to the Downland Advisory Panel Terms of Reference set out at paragraphs 3.17 -3.19 and Appendix 2;
- (v) Agreed the appointment of Councillor Robert Nemeth as a member of East Sussex Fire and Rescue Service as set out at paragraph 3.28;
- (vi) Authorised the Chief Executive and Monitoring Officer to take all steps necessary or incidental for the implementation of the changes agreed by the Policy & Resources Committee and by Full Council, and authorise the Monitoring Officer to amend and re-publish the Council's constitutional documents to incorporate the changes;
- (i) Agreed that the proposed changes come into force immediately following their approval by Policy & Resources Committee or by Full Council, as appropriate.

The meeting concluded at 9.25pm

Brighton & Hove City Council

Policy & Resources Committee

Agenda Item 87

Subject: Review of the Council's Constitution

Date of meeting: 1st December 2022 – Policy & Resources Committee
15 December 2022 – Full Council

Report of: Executive Director Governance, People & Resources

Contact Officer: Name: Elizabeth Culbert
Tel: 01273 291515
Email: Elizabeth.culbert@brighton-hove.gov.uk

Ward(s) affected: All

For general release

1. Purpose of the report and policy context

- 1.1 The Council is under a statutory duty to keep its Constitution under regular review. This report proposes changes to the Council's Constitution for approval by Policy & Resources Committee and (where relevant) Full Council.
- 1.2 The proposals have been designed to assist in the smooth running of Committee and Council meetings.

2. Recommendations

Policy & Resources Committee

- 2.1 Recommends to full Council the proposals set out at paragraphs 3.1-3.9 (Council Procedure Rules), 3.14 (Sub-Committee reporting) and 3.20-3.23 (Contract Standing Orders and the Petitions Scheme).
- 2.2 Notes the proposals set out at paragraph 3.10-3.12 (Minutes of meetings), 3.24 (the light touch annual survey on the Constitution) and 3.25 -3.27 of the report (the co-option of an additional Independent Person to Audit and Standards Committee).
- 2.3 Agrees the proposals to make minor changes to the Scheme of Officer Delegations set out at paragraph 3.15 (Safer Communities) and 3.16 (authorised and unauthorised encampments).
- 2.4 Agrees the proposals to make changes to the Downland Advisory Panel Terms of Reference set out at paragraphs 3.17 -3.19 and Appendix 2.
- 2.5 Agrees the appointment of Councillor Robert Nemeth as a member of East Sussex Fire and Rescue Service as set out at paragraph 3.28

Full Council

- 2.6 Approves the proposed changes referred to in paragraph 2.1

Policy & Resources Committee and Full Council:

- 2.7 Authorise the Chief Executive and Monitoring Officer to take all steps necessary or incidental for the implementation of the changes agreed by the Policy & Resources Committee and by Full Council, and authorise the Monitoring Officer to amend and re-publish the Council's constitutional documents to incorporate the changes.
- 2.8 Agree that the proposed changes come into force immediately following their approval by Policy & Resources Committee or by Full Council, as appropriate.

3. Context and background information

Proposals to amend Council Procedure Rules to reflect existing custom and practice

- 3.1 Rule 11.5 permits the rejection of public questions, petitions and/or deputations by the Chief Executive or Mayor. It is proposed to clarify that this power vests in the Chief Executive or Chair in the case of Committees and sub-Committees.
- 3.2 Rule 9.12 provides that the Mayor 'may' allow an Independent Member to ask an oral question at a meeting of Full Council. It is suggested that the wording be amended to provide that they 'shall' allow an oral question from an Independent Member, to reflect custom and practice.

Proposal to limit the number of Notices of Motion ('NoMs') to Committees and to clarify the rules on referral of NOMs (Rule 8).

- 3.3 It is proposed to introduce criteria for rejecting NoMs on the basis that they are 'the same/ substantially the same as any other NoMs going to another Committee'. This would prevent duplication of the debate and assist in managing the Committee workload. It is further proposed that a six-month rule be applied to NoMS to Committees so that the same matter may not be debated again within a six month period.
- 3.4 In addition, it is proposed to clarify existing wording in Rule 8.5 to make clear that where a NoM is taken at a Committee, it is not also automatically referred on to full Council – ie a NoM will be either debated at Committee or full Council, not both.

Proposal to align speech times at Committees and sub-Committees with those of full Council

- 3.5 In order to provide clarity for Chairs and Committee members and to manage the duration of meetings, it is proposed that speech times should be

included in the Council Procedure Rules for Committees and sub-Committees as they are for full Council. This would mean that Council Procedure Rule 16.4 would be replicated for Committees and sub-Committees as below:-

'Except with the consent of the Chair, the mover of a motion shall not speak for more than five minutes and no other speaker shall speak for more than three minutes on any individual agenda item. For the purposes of this Procedure Rule, a person who moves an amendment is not moving a motion. The length of time allotted to the mover of a motion does not include any time permitted under a right of reply. This rule shall not apply to questions. Any extension of time for speeches consented to by the Chair shall normally be limited to five minutes.'

- 3.6 This the proposal would relate to the duration of each member's comments on each separate item on the agenda and would not restrict the number of items they might comment on. It would not apply to any questions members pose, and it would be at the Chair's discretion to accept additional comments.

Member written questions

- 3.7 A 150 word limit is proposed on member written questions for Committees and full Council.

Deadline for amendments for Committees/sub Committees and full Council

- 3.8 It is proposed that the deadline for amendments be brought forward from 10am on the day of the meeting to 4pm the day before the meeting. This will enable officers to have time to format, advise on and make any changes agreed to the proposed amendments in order to be able to circulate them and publish them as early as possible on the day of the meeting.
- 3.9 The current arrangement of a 10am deadline on the day of the meeting is very challenging. This is the case for full Council when the Whips meetings and other briefings take place on the day of the meeting, before it has been possible to advise on the amendments or publish them. This leads to a confusion of addendums and papers at the meeting and requires many officers to be involved because of the time constraints. Equally, for Committee and Sub-Committees, amendments received on the deadline need formatting, circulating to finance, legal colleagues and lead officers and then liaison with members to discuss the intention of the amendment and any perceived issues. The quality of advice, ability to manage the publication of the documents and the good governance of the meeting are negatively impacted by the current deadline.

Proposal for shorter minutes and an action log

- 3.10 The minutes currently prepared in respect of Council meetings are lengthy, but not a verbatim record. The resource involved in generating very detailed

minutes is significant and, as a result, it is often not possible to make them available soon after the meeting – sometimes not until just before the next meeting cycle. The webcast is available within 24 hours of the meeting.

- 3.11 It is suggested that the written minutes should be substantially shorter for those meetings where there is the availability of a webcast recording. This would not apply to Regulatory Committees and sub-committees such as Planning and Licensing. A transcript of the Teams meeting can also be made available. Shorter minutes would mean that attention could be focused instead on producing the Decision List and an Action Log promptly rather than lengthy minutes according to a much longer timescale. This will help officers and members to ensure that actions are followed up and to track progress.
- 3.12 It is proposed that the shorter minutes will include the subject matter description, the names of those who spoke on the matter and the Committee resolution. No change to the Council's Constitution is required in relation to this proposal as the requirement in relation to Minutes is to record the names of Members present and any decisions taken at the meeting. This proposal is therefore for Committee to note.

Proposal relating to Sub Committees reporting to parent Committee

- 3.13 Currently Part 4 of the Constitution requires annual reporting by Sub Committees ('All Sub-Committees are required to report annually on their activities to their parent Committee.')
- 3.14 It has been noted that the majority of Sub Committees are not complying with the requirement and that – in any event – it is not appropriate in all instances. It is therefore proposed that this requirement be deleted. Any member of a Sub-Committee may request that a report be made to the parent Committee at any time.

Proposal to change officer delegations relating to authorised and unauthorised encampments

- 3.15 Two proposals aim to update existing delegations to the Executive Director – Housing Neighbourhoods & Communities . First of all, the Drug Action team has been disbanded and the officers who exercise relevant powers now sit within 'Safer Communities'.
- 3.16 Secondly, minor amendments are proposed to the wording of the delegations to reflect a more inclusive approach which does not single out particular groups of the population. The proposed amended wording is set out at Appendix 1.

Proposal to update the terms of reference of the advisory body which inputs on the Downland (currently 'the City Downland Estate Advisory Panel')

- 3.17 In May 2021, BHCC set up a collaborative body to inform the Council's decision-making around the Downland. The City Downland Estate Advisory Panel ('the Panel') is listed in Part 4 of the Constitution as one of the 'Other Bodies' which provides a consultative function to the Council. The Panel harnesses the expertise which exists in the City by providing a vehicle for communicating the views of a wide range of interests in the Downland to inform the decisions the Council makes in this area.
- 3.18 In early summer 2022 the Panel's terms of reference were reviewed by its Chair and its members with support from officers. The reasons for the review included the following:
- To incorporate any changes needed to the way the Panel works. This has resulted in proposals to amend the terms of reference to a) provide that the Chair have two deputies, each representing a specific group of stakeholders, and also b) meet the strong request by Panel members that arrangements be changed to permit them to input into agenda-setting.
 - To revisit the membership to ensure that it is both up to date and that it includes representation from people with the right local expertise to advise on the different areas covered by the CDEP. Communications with stakeholders on this topic are ongoing. It may be (for example, if the Trust for Developing Communities does not wish to take up a place) that the Panel's membership may be further adjusted to accommodate alternative representation for minority communities who to date have been less likely to access the downland.
 - To ensure AMB members are properly aware of Panel discussions.
- 3.19 It is proposed that the work of the Panel – renamed 'Downland Advisory Panel' – will continue to be reported annually to Policy & Resources Committee via the Asset Management Board. It is proposed that the attached draft terms of reference at Appendix 2 will replace the version currently in force.

Proposed changes to the Council's Contract Standing Orders

- 3.20 The Council's current Contract Standing Orders require all contracts of an estimated value of over £250,000 to be executed as deeds. This means that a wax seal must be attached to a high proportion of the Council's contracts, each of which must be generated in hard copy and physically signed. This requirement prevents the Council from adopting a more streamlined process for signing contracts and storing them electronically.
- 3.21 Executing a contract as a deed extends the limitation period within which claims must be started to 12 years. However any need for legal action by the Council is expected to be apparent within the usual limitation period of 6 years. It is therefore proposed to raise to £1,000,000 (from £250k currently) the threshold for requiring that contracts be executed by deed instead of being signed by an authorised officer. Appendix 3 sets out the amended proposed wording. Where there are strong legal reasons for executing a

contract of any value as a deed (for instance, where there is no consideration) then that will continue to happen on a case by case basis.

- 3.22 It is also proposed that the requirement for Legal Services to comment on waivers where contracts are under the relevant financial threshold set out in the Public Contract Regulation 2015 be removed. Contracts which are under the threshold are not regulated and the lack of legal implications mean that this is not considered to be an appropriate to require legal comment. It is proposed that this be achieved by amending Contract Standing Order 20.3 as indicated in Appendix 3.

Proposal to bring the Petitions Scheme into line with the Council Procedure Rules – Part 8.10

- 3.23 The Petitions Scheme is not currently consistent with the Council's Procedure Rules regarding who makes the decision to accept a petition. It is therefore recommended that the Scheme be amended to ensure complete consistency with the Procedure Rules as set out at Appendix 4.

Public engagement re the Council's Constitution

- 3.24 It is suggested that a light touch survey be made available annually, via the Council's website, whereby the Council will check any comments or views held by the public or other stakeholders on aspects of the Constitution which are considered appropriate to review.

Proposal to update the Council's arrangements to permit the co-option of a third Independent Person

- 3.25 The Localism Act 2011 requires the authority to appoint at least one Independent Person whose views must be taken into account by the authority before it decides to investigate an allegation under the Code of Conduct for Members. The Council has appointed its two current Independent Persons as non-voting members of the Audit & Standards Committee in order to assist members by providing independent input into the Council's audit functions as well as its standards functions.
- 3.26 The Council's longest-serving Independent Person has given notice that she will not be seeking a renewal of her term when it expires on 1 March 2023. The increased burden of standards complaints received by the Council, combined with the ongoing financial challenges faced by all local authorities, means it is considered prudent to recruit two new Independent Persons to serve alongside the remaining Independent Person. The ambition will be to ensure that the skills of the new Independent Persons complement each other.
- 3.27 The appointment of any Independent Person(s) (once recruited) is a matter which requires full Council approval. It is proposed that Policy & Resources Committee note the proposal to recruit an additional (third) Independent Person, with the expectation that a detailed Report be brought to full Council in February 2023 seeking formal approval both for two new Independent

Person appointments from 1st March 2023 and at same time for the necessary changes to the terms of reference to Audit & Standards Committee.

Proposal relating to the appointment of a member to East Sussex Fire and Rescue Service

- 3.28 Following the very sad death of Councillor Garry Peltzer-Dunn, the Conservative Group has nominated Councillor Robert Nemeth to be appointed as a member of ESFRS. This appointment can be made by Policy & Resources Committee as opposed to full Council for reasons of timing. The next Fire Authority meeting takes place on 8th December and therefore Policy & Resources Committee is requested to approve the appointment.

4. Analysis and consideration of alternative options

- 4.1 The Committee could decide not to implement the changes set out in this report. The proposals are recommended for approval in order to achieve consistency, clarity and streamline processes.

5. Community engagement and consultation

- 5.1 The proposals in this Report have been reviewed in detail by elected Members and Leaders Group. The proposals do not represent changes to the decision-making structure or framework. Community consultation is proposed on an annual basis in the report, which will be reported back to Committee as part of future Constitution Reviews. The Downland Advisory Panel has discussed in detail the proposed changes in relation to its terms of Reference.

6. Conclusion

- 6.1 The proposals reflect the Council's ongoing efforts to review its Constitution to ensure that it is reflective of current practice and priorities and to achieve clarity and increased efficiency. As a result, it is recommended that the proposals in this report be approved.

7. Financial implications

- 7.1 There are no material financial implications arising from this report. Where costs do occur it is expected that these would be contained within existing resources.

Name of finance officer consulted: Peter Francis Date consulted 10/1/22

8. Legal implications

- 8.1 Policy & Resources Committee and, where specified in this report, full Council have the authority to make the changes to the Council's Constitution which are set out in the report. The intention is for the proposals to be

implemented with immediate effect following the decision of the decision-making body, unless expressly stated to the contrary.

Name of lawyer consulted: Elizabeth Culbert 091122

9. Equalities implications

- 9.1 The Council has a public sector equality duty under s149 of the Equality Act 2010. In the exercise of its functions the Council must have due regard to the need to eliminate unlawful discrimination, harassment and victimisation; advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and those that do not. The Council's public sector equality duty has been considered by officers and the proposals of this report have been assessed for their equalities impact. The majority of the proposals in the report relate to internal procedures which do not have an impact on those with protected characteristics. The proposal to undertake an annual survey will need to be delivered in such a way that access is made available to those with protected characteristics so that they can fully participate in the survey and their responses be taken into account when making future proposals. The proposal to publish shorter minutes is not considered to have an adverse impact on those with protected characteristics. The decisions and webcasts will remain available.

10. Sustainability implications

- 10.1 The proposal to limit the number of contracts that are executed by seal to those with a value in excess of £1m will lead to a significant reduction in printing and storage of paper files.

SUPPORTING DOCUMENTATION

Appendices:

Appendix 1: Extract from Part 6 of the Constitution: Scheme of Delegation to Officers

Appendix 2: Extract from Part 4 of the Constitution: Scheme of Delegation to Committees Sub Committees – 'Other Bodies'

Appendix 3: Extracts from Part 7.5 of the Constitution: Contract Standing Orders

Appendix 4: Extract from Part 8.10 of the Constitution: Petitions Scheme

Background Documents

None

Appendix 1

Part 6 of the Constitution- : Scheme of Delegations to Officers

VI. DELEGATIONS TO THE EXECUTIVE DIRECTOR OF HOUSING, NEIGHBOURHOODS AND COMMUNITIES

1. Authorised and unauthorised sites and encampments

To exercise the Council's functions in relation to ~~the management of~~ authorised and unauthorised sites and encampments, including all activities necessary or incidental to the Council's performance of its responsibilities in relation to all types of encampments ~~the following: a) Gypsies, Roma and Travellers; b) Van dwellers.~~

6. ~~Community Safety and Drug Action Team~~ Safer Communities

APPENDIX 2

PROPOSED UPDATED TERMS OF REFERENCE – DOWNLAND ADVISORY PANEL

NB to be included in list of ‘Other Bodies’

1. Name

Downland Advisory Panel

2. Purpose

- 2.1 The purpose of the Downland Advisory Panel (‘the DAP’) is purely consultative. It exists to allow Brighton & Hove City Council (‘BHCC’) to draw on and access local skills, experience and expertise, to advise on the management of the City Downland Estate and assist with the strategic direction and implementation of the City Downland Estate Plan – its policy development, plans and delivery.
- 2.2 The collective views of the DAP will contribute to presentations and committee papers which are prepared by officers of BHCC. In this way, the DAP will support and inform the decision making processes followed by BHCC as responsible authority (see below).

3. Status

- 3.1 The Downland Advisory Panel shall provide a purely advisory function to the Council’s Policy & Resources Committee and its Asset Management Board. It is a partnership body which includes both Council members and external organisations and does not have subcommittee status. While the political balance rules in section 15 of the Local Government and Housing Act 1989 will not apply, it is expected that those members of the DAP who are elected members of the Council (‘BHCC’) will be appointed on a cross party basis.

4. Areas of focus

- 4.1 The DAP’s aim is to provide advisory support to contribute to BHCC’s implementation of the following vision -

“A rejuvenated City Downland Estate will be carbon negative and climate resilient, its biodiverse grassland landscape fully restored and teeming with wildlife. The estate will be a locus for natural farming, where local food production will flourish.

By creating new amenities and opening up more land to the public - and by making it easier for all to visit and enjoy - the estate will fulfil its potential to boost the wellbeing of everyone who experiences it. The estate will be managed to reflect the will of the community. This land is yours.”

4.2 With the above in mind, members of the DAP will collectively:

- Work to monitor the proper implementation of the City Downland Estate Plan, its Vision, Purposes, and the Outcomes in the City Downland Estate Plan (CDEP);
- Broaden and deepen engagement with the City Downland Estate, in particular through the active involvement of individuals and groups for whom its relevance and potential benefits have been limited until now;
- Establish the DAP as a shared vehicle for collaborative change across partners and sectors.
- Mobilise additional resources, knowledge, skills and commitments for the highest priorities of the CDEP;
- Offer support to assist BHCC in over-viewing progress towards CDEP outcomes across partners and sectors, identifying weak areas and helping to address them.
- Give strategic advice and objective, independent feedback to BHCC Asset Management Board to assist with CDEP implementation as required.

5. Reporting

5.1 The work of the DAP will be reported annually through an officer report that will be agreed at the Asset Management Board and then presented to the Council's Policy & Resources Committee. The DAP may also report on an ad hoc basis to the Asset Management Board with recommendations as necessary, the expectation being that if a CDEP-related item is on the agenda for the AMB, the DAP's views will have been sought in advance. Separate reporting to the AMB may not be necessary if the councillor members of the Asset Management Board are also members of the DAP.

6. Membership

6.1 The Chair of the DAP will be the Chair of the Council's Asset Management Board, supported by 2 vice chairs to be selected from the DAP's membership, and representing different sectors. **The Chair and 2 vice chairs are referred to collectively in these Terms of Reference as 'the Chairs Group'.**

Membership of the Board shall consist of appointees from the following sectors. NB Substitutes will not normally be permitted given the complexity of the subject matter:

- 1) BHCC Members and officers
- 2) Organisational stakeholders
- 3) Farm tenants and independent agricultural experts
- 4) Community and voluntary Groups

These sectors will make up the core membership of the DAP. Make up of each of the sectors is as follows:

BHCC Members

- 5 members (reflecting the political balance of the council), including the chair of the Asset Management Board. In cases where councillor members of the DAP are not also members of the AMB, there is an expectation that the former will fully brief the latter on DAP proceedings. Councillors who are not selected by their group to sit on the DAP shall be able to attend DAP meetings as observers.

BHCC Officers

- Officers with responsibility for managing the downland estate and giving corporate advice including Property & Design, City Parks, Sustainability, Public Health, Sports & Leisure, Education and Planning

Organisational stakeholders (including those with statutory advisory role) One representative from each of:

- The Aquifer Partnership (TAP),
- South Downs National Parks Authority (SDNPA),
- The Living Coast (TLC)
- National Health Service (NHS)
- Sussex Wildlife Trust
- Brighton and Hove Food Partnership

Farm tenants/agriculture

- Two representatives from those holding farm tenancies within the BHCC downland estate and other tenancies
- One independent agricultural expert

Community Groups

- Brighton and Hove Estate Conservation Trust (1 representative)
- Brighton Downs Alliance (2 representatives)
- Trust for Developing Communities (1 representative)
- Brighton & Hove Archaeological Society (1 representative)
- Brighton & Hove Wildlife Forum (1 representative)
- Local Access Forum (1 representative)
- Local specialists / experts as set out below

6.2 Other relevant parties may be invited to participate in meetings on a meantime basis where particular areas of work would benefit from specialist input. Any additional individuals wishing to attend may do so as observers (at the reasonable discretion of the chair).

7. Quorum

- 7.1 A minimum of ten people is required for Panel meetings to proceed provided each of the groups listed at 1) – 4) in paragraph 6 above is represented.

8. Meetings and ways of working

- 8.1 DAP will meet at least 4 times a year. Meeting dates will be set annually to ensure optimal attendance and ensure coordination with other relevant meetings such as AMB.
- 8.2 The Chairs Group will be responsible for agreeing agenda items for DAP meetings.
- 8.3 The Asset Management Board and DAP Chairs Group will be supported by BHCC teams / staff/ officers and admin support.
- 8.4 Any DAP members identifying subjects for discussion at DAP meetings should contact either supporting officers from BHCC or members of the Chairs Group to add to agenda for a future meeting.
- 8.5 While the purpose of any potential items should be clearly stated, the DAP is not a decision-making body. It provides a consultative advisory input to the Council, which is responsible for all decision-making relating to the Downland. The purpose of the DAP is to enable to Council to seek the views of the wider community through the DAP's organisational stakeholders, farmers and community groups. Officers may be asked to provide context, but this is not the forum for officers or councillors to give their views.
- 8.6 BHCC officers may be asked to present input agreed by DAP to AMB.
- 8.7 DAP members will be invited to declare any conflicts of interest at the beginning of each meeting.
- 8.8 Where there is a discussion item on the DAP agenda that would benefit from expert input from organisations who are not DAP members, or from organisations not represented on DAP, DAP members may be invited to suggest people or organisations with relevant expertise. Any such request will be considered by the Chairs Group.
- 8.9 Task and Finish groups may be set up in between scheduled meetings to undertake specific pieces of work and present their findings to DAP.
- 8.10 Substitutes (whether of elected BHCC members or other representatives) will not normally be permitted due to the complexity of the subject matter and the sort of input required from all participants. With this in mind, there is an expectation that any representative who fails to attend a scheduled meeting three times or more shall be replaced by an appointee from the same sector (farmers/institutional stakeholders/community groups).

9. Review

- 9.1 Membership will be reviewed annually by DAP from May 2024 to ensure the correct balance is achieved and to take account of unforeseen issues arising following agreement of the CDEP by BHCC and the SDNPA.
- 9.2 These terms of reference may be reviewed annually and changes will in any event be subject to approval by the Council's Policy & Resources Committee.

Appendix 3

Extract from the Constitution Part 7.5: Contract Standing Orders

14.7 Subject to paragraph 14.8 below:

- (i) Contracts with an estimated value over ~~£250,000~~ **£1,000,000** shall be executed as a deed using the Common Seal of the Council;
- (ii) Contracts with an estimated value of ~~£250,000~~ **£1,000,000** or less may be executed as a simple contract and signed by an officer duly authorised for that purpose in accordance with CSO 3.1.

14.8 The Executive Director - Governance, People & Resources may, on a case by case basis or in relation to a particular class of contracts and taking all relevant circumstances into account, stipulate the method by which a particular contract or class of contracts is to be executed, irrespective of the overall estimated value of the Contract.

[...]

20.3 Subject to CSO 20.6, in relation to Contracts estimated to exceed a total value of £75,000, an Executive Director may, after consultation with the Chair of the relevant Committee and the Procurement Strategy Manager, waive the requirements of CSOs as long as:

- (a) the waiver report (the Report) is compiled after consulting with the Procurement Strategy Manager;
- (b) the Report is issued setting out the CSO being waived and the reasons for the waiver;
- (c) the Report includes legal comments **(if the contract is above the relevant Procurement Threshold, as defined above)** and financial comments, and highlights, as necessary, any future commitment (whether of a financial character or not) which the Contract may entail; and the Report justifies the method of Contractor selection so that value for money and compliance with the law can be demonstrated.

Appendix 4

Extract from The Constitution: Part 8.10 Petitions Scheme

Extracts from current Petitions Scheme – Part 8.10

[..]

Exceptions If the petition applies to a planning or licensing application, is a statutory petition (for example requesting a referendum on having an elected mayor), or on a matter where there is already an existing right of appeal, such as Council tax banding and non-domestic rates, other procedures apply. Further information on this is available on the Council's website, while general information on how you can express your views is available here.

We will not take action on any petition which ~~is considered by the Council's Monitoring Officer to be vexatious, abusive or otherwise inappropriate and, if this is the case, we will explain our reasons in our acknowledgement of the petition~~ the Chief Executive, Mayor or Chair consider, following consultation with the Monitoring Officer:

- not to be about a matter for which the Authority has a responsibility or which affects Brighton & Hove;
- that the meeting to which it has been addressed is not the appropriate forum; or that the petition is defamatory, frivolous or vexatious;
- that it is the same, or substantially the same, as a petition, deputation or public question which has been put at a meeting of a Committee or a Sub Committee in the past six months;
- that it requires the disclosure of confidential or exempt information;
- it to be from a member of staff on matters affecting them as employees; or
- otherwise inappropriate.

If the Chief Executive, Mayor or Chair rejects a petition then their decision is final. Reasons for the decision will be given.

Brighton & Hove City Council

Council

Agenda Item 59

Subject: Sussex Health & Care: the Sussex Health & Care Assembly Final Terms of Reference and the Sussex Integrated Care Strategy

Date of meeting: 15 December 2022

Report of: Executive Director, Health & Adult Social Care

Contact Officer: Name: Giles Rossington
Tel: 01273 295514
Email: giles.rossington@brighton-hove.gov.uk

Ward(s) affected: All

For general release

1. Purpose of the report and policy context

- 1.1 The Health & Care Act (2022) requires regional Integrated Care Systems (ICS) to be established to better coordinate the planning and delivery of health and care services. Our local ICS is Sussex Health & Care, bringing NHS organisations, local authorities and other bodies together in partnership on a Sussex-wide basis and as three 'places': East Sussex, West Sussex and Brighton & Hove.
- 1.2 Each ICS must have an Integrated Care Partnership (ICP); our local ICP is the Sussex Health & Care Assembly (SHCA). The Assembly provides strategic leadership, including developing a high-level plan: the Sussex Integrated Care Strategy (Improving Lives Together).
- 1.3 In May 2022, Policy & Resources (P&R) Urgency Sub-Committee agreed to establish the SHCA as a joint committee of Brighton & Hove City Council, East Sussex County Council, West Sussex County Council and NHS Sussex. However, at the time of the P&R Urgency Sub-Committee decision, the final Terms of Reference (ToR) for the SHCA had not yet been agreed. It was consequently resolved that, once the SHCA ToR were finalised, they would be taken to full Council for approval. This report presents the final SHCA ToR for agreement (see Appendix 1).
- 1.4 The SHCA has been meeting since summer 2022 to develop an Integrated Care Strategy for Sussex: Improving Lives Together. The Strategy is due to be formally adopted by the SHCA at the 14 December 2022 Assembly meeting. The Integrated Care Strategy is presented to Council for information; Improving Lives Together has been discussed at the ICS Member Working Group. (Improving Lives Together is included as Appendix 2 to this report; a meeting note from the ICS Member Working Group is included as Appendix 3.)

2. Recommendations

- 2.1 That Council agrees the Terms of Reference for the Sussex Health & Care Assembly (Appendix 1).
- 2.2 Notes the Sussex Integrated Care Strategy: Improving Lives Together (Appendix 2); and notes that Improving Lives Together has been considered and noted by the ICS Member Working Group (Appendix 3).

3. Context and background information

- 3.1 The Health & Care Act (2022) introduced Integrated Care Systems (ICS), new statutory partnerships of health and care organisations, to operate at both a regional/system and a local/place level. Within each ICS there is an Integrated Care Partnership (ICP) which sets the strategic vision and goals; and also an Integrated Care Board (ICB) which delivers the strategy, including exercising NHS commissioning functions previously carried out by Clinical Commissioning Groups. For Sussex, the ICS is called Sussex Health & Care, the ICP is called the Sussex Health & Care Assembly (SHCA), and the ICB is called NHS Sussex.

3.2 Sussex Health & Care Assembly Terms of Reference

- 3.2.1 ICBs are NHS bodies, although representatives from partner organisations, including local authorities, sit on them. ICPs are joint committees of the ICB and of the upper-tier local authorities within the ICS footprint. In May 2022 P&R Urgency Sub-Committee approved the appointment of the BHCC Director of Children's Services as a member of NHS Sussex (ICB), and also approved arrangements for the HWB Chair to attend ICB meetings as an observer. The sub-committee also recommended to Annual Council that the Chair of the HWB be appointed as a member of the Sussex Health & Care Assembly (ICP); this recommendation being subsequently agreed at Annual Council. P&R Urgency Sub-Committee also agreed to the establishment of the SHCA as a joint committee of the city council, East Sussex County Council, West Sussex County Council and NHS Sussex. However, at the time of the sub-committee meeting, the final Terms of Reference (ToR) for the SHCA had not been completed. P&R Urgency Sub-Committee agreed to establish the SHCA, and that the final ToR should come to a future Council meeting for approval. The ToR are included as Appendix 1 to this report and members are asked to approve them.

3.3 Integrated Care Strategy

- 3.3.1 A principal role of an ICP is to develop an Integrated Care Strategy. The Sussex Integrated Care Strategy is intended as a public-facing accessible strategic statement. Covering the period 2022 – 2027, it sets out the emerging areas that are being focused on for developing the five-year

strategy, which aims to improve the lives of everyone living in Sussex now and in the future, and will address the needs of all our communities.

Covering all ages across the whole life course it will:

- Help local people start their lives well;
- Help local people to live their lives well;
- Help local people to age well;
- Help local people get the treatment, care and support they need when they do become ill.

3.3.2 Following early Assembly and partner discussions, the Strategy sets out the rationale for supporting a key shared Sussex-wide ambition to deliver this aim. This ambition is focused on a new community-based approach, which will work with and within different communities to better understand local population needs and respond in the best possible way. This will enable a greater focus on keeping people healthy, supporting all aspects of people's lives and the specific needs of children and young people. The Strategy also sets out how a shared focus on the following critical areas will further enable this ambition to be delivered:

- Doing more to grow and support our workforce;
- Improving the use of digital technology and information, and;
- Building on the partnership working that has developed across health and care, including the Place-based Health and Care Partnerships that report into the three Health and Wellbeing Boards.

The strategy is consistent with the framework we require for implementation of Place based proposals, some of which are established but others will be subject to further development over future years.

3.3.3 More detail can be found in the Sussex Integrated Care Strategy (Appendix 2).

3.3.4 At May P&R Urgency Sub-Committee it was agreed that a Member Working Group would be established to oversee the development of the Sussex ICS. The ICS Member Working Group met on 06 December 2022 to consider the draft Sussex Integrated Care Strategy. The Working Group noted the Strategy, and the system and place priorities within the Strategy. (A note of the member working group meeting is included as Appendix 3.)

4. Analysis and consideration of alternative options

4.1 Members could choose not to agree the SHCA Terms of Reference. However, the SHCA is a body that is required, and to a large degree, defined by statute, and its ToR reflect this.

5. Community engagement and consultation

5.1 None undertaken directly for this report.

6. Conclusion

Members are asked to agree the Sussex Health & Care Assembly (SHCA) Terms of Reference, P&R Urgency Sub-Committee having previously

agreed to establish the SHCA as a joint committee. Members are also asked to note the Sussex Integrated Care Strategy, Improving Lives Together.

7. Financial implications

- 7.1 The Sussex Health and Care Assembly will build upon the local Health and Wellbeing Strategies and co-ordinate the strategic direction for meeting the broader health, public health and social care needs of the population of Sussex to settle an Integrated Care Strategy for Sussex.
- 7.2 This will inform priorities, budget development and the Medium-Term Financial strategy of the partner organisations, including the council. This requires a joined-up process for budget setting in relation to all local public services where appropriate, and will ensure that there is an open, transparent and integrated approach to planning and provision of services. Any changes in service delivery for the council will be subject to recommissioning processes and will need to be delivered within the available budget.

Name of finance officer consulted: Sophie Warburton Date consulted: 01/12/22

8. Legal implications

- 8.1 The legal background and statutory requirements for an ICP and Integrated Care Strategy are included in the body of this report. The ICP for Sussex – Sussex Health and Care Assembly (SHCA) is already approved as a joint committee of Brighton and Hove City Council and is a statutory requirement. In relation to the Terms of Reference, Section 26(4) of the Health Act 2022 amends The Local Government and Public Involvement in Health Act 2007 by inserting a new section 116(Z) (A) (2):

The integrated care partnership for an area is to consist of—

- (a) one member appointed by the integrated care board,
 - (b) one member appointed by each of the responsible local authorities, and
 - (c) any members appointed by the integrated care partnership.
- (3) An integrated care partnership may determine its own procedure (including quorum).

In accordance with its statutory duty SHCA has prepared the Integrated Care Strategy (Improving Lives Together). Paragraph 9 of the Terms of Reference make provision for revision of the Integrated Care Strategy. Paragraph 10 of the Terms of Reference provides for a report to each local authority and their Health and Well Being Board highlighting any actions following each meeting of the Assembly .

Name of lawyer consulted: *Sandra O'Brien* Date consulted 01.12.2022

9. Equalities implications

- 9.1 None directly to this decision. Equality issues have been considered in the formation of the Sussex Integrated Care Strategy and are detailed in the Strategy (Appendix 2).

10. Sustainability implications

- 10.1 None directly to this decision. Members may wish to note opportunities to use ICS partnerships, including the Sussex Health & Care Assembly, to work jointly with partners (e.g. NHS provider trusts) on sustainability and carbon reduction initiatives.

Supporting Documentation

1. Appendices [delete if not applicable]

1. Final Terms of Reference of the Sussex Health & Care Assembly (SHCA)
2. The Sussex Integrated Care Strategy, Improving Lives Together
3. Extract from the draft minutes of the 06 December meeting of the BHCC ICS Member Working Group

Sussex Health and Care Assembly (Sussex Integrated Care Partnership) Terms of Reference

Governance

1. The Sussex Health and Care Assembly (the Assembly) is a formal partnership forum jointly established by NHS Sussex, Brighton & Hove City Council, East Sussex County Council and West Sussex County Council (the three Local Authorities) in accordance with the Constitutions of each body. The Assembly is the Integrated Care Partnership for Sussex, established under the Health and Care Act 2022 and these Terms of Reference have been agreed by each of these bodies.

Purpose

2. The purpose of the Assembly is to support and promote greater integration and collaboration across health and social care at a strategic, Sussex-wide level. It will build upon the local Health and Wellbeing Strategies and co-ordinate the strategic direction for meeting the broader health, public health and social care needs of the population of Sussex to settle an Integrated Care Strategy for Sussex. It will undertake any other activities agreed by NHS Sussex and the three Local Authorities to help address the wider determinants of health and wellbeing and greater health equality at a strategic level. Its work will build upon and be informed by work at place level in Brighton & Hove, East Sussex and West Sussex, including through the local Joint Strategic Needs Assessments.

Responsibilities

The Assembly will:

3. Develop, approve and publish an Integrated Care Strategy for the whole population of Sussex, using best available evidence and data, covering health and social care and addressing the wider determinants of health and wellbeing. This will be built from local assessments of needs and assets identified at place level, based on Joint Strategic Needs Assessments.
4. Complement existing governance arrangements including Health and Wellbeing Boards (HWBs) and other place-based partnerships, and ensure governance and decision-making are proportionate, support subsidiarity and avoid duplication across the Sussex Health and Care System.
5. Promote and enhance integrated approaches, partnership working and collaboration within the Sussex health and care system, where these can improve planning, outcomes and service delivery.
6. Complement place-based working and partnerships, developing relationships on a pan-Sussex basis.

7. Highlight where coordination is needed on health and care issues and, through the development, promotion and oversight of the Integrated Care Strategy, challenge partners to deliver the action required. This includes, but is not limited to:
- helping people live more independent, healthier lives for longer;
 - taking a holistic view of people’s interactions with services across the system and the different pathways within it;
 - addressing inequalities in health and wellbeing outcomes, experiences and access to health services;
 - improving the wider social determinants that drive these inequalities, including employment, housing, education, environment, and reducing offending;
 - improving the life chances and health outcomes of babies, children and young people;
 - improving people’s overall wellbeing and preventing ill-health.
8. In preparing the Integrated Care Strategy:
- consider the extent to which the needs could be met more effectively by the making of arrangements under section 75 of the National Health Service Act 2006 (rather than in any other way);
 - have regard to—
 - (a) the mandate published by the Secretary of State under section 13A of the National Health Service Act 2006, and
 - (b) any guidance issued by the Secretary of State;
 - involve the Local Healthwatch organisations for Sussex and involve the people who live or work in Sussex; and
 - may include a statement of its views on how arrangements for the provision of health-related services in the area could be more closely integrated with arrangements for the provision of health services and social care services.
9. Each time the Assembly receives an assessment of relevant needs it will:
- (a) consider whether the current Integrated Care Strategy should be revised, and
 - (b) if so, prepare a revised Integrated Care Strategy.
10. Report to NHS Sussex and the Health and Wellbeing Board of each of the three Local Authorities after each meeting of the Assembly, highlighting any issues that require action.

Members

11. As set out in the Health and Care Act 2022, the core membership of the Assembly (as the Integrated Care Partnership) is NHS Sussex and the three local authorities. The composed Assembly may then appoint others. The three Local Authorities and NHS Sussex will each appoint their members to the Assembly in accordance with their respective Constitutions. Members are bound by the Standing Orders and Codes of Conduct of their respective appointing bodies, including those relating to equalities, confidentiality and information governance.
12. The Assembly will consist of the following members representing the four statutory

partners:

NHS Sussex [the Integrated Care Board] (3)

- Chair, NHS Sussex
- CEO, NHS Sussex
- Chief Delivery Officer, NHS Sussex

Brighton & Hove City Council (1)

- Health and Wellbeing Board Chair (or their nominated substitute)

East Sussex County Council (1)

- Health and Wellbeing Board Chair (or their nominated substitute)

West Sussex County Council (1)

- Health and Wellbeing Board Chair (or their nominated substitute)

One officer from each of the local authorities will also be permitted to attend to contribute towards the work of the Assembly and/or assist and advise the Health and Wellbeing Board Chairs as appropriate.

In addition to the membership from the statutory partners, the following members will also be appointed to support the work of the Assembly:-

- 3 x Place Executive Members, one from each place in Sussex
- 3 x Place Clinical Members, one from each place in Sussex
- 3 x Voluntary, Community & Social Enterprise Members, one from each place in Sussex
- 3 x Independent Health and Social Care Champion Members, one from each Healthwatch in Sussex
- 3 x University Members, comprising the three Vice Chancellors of the University of Brighton, the University of Chichester, and the University of Sussex respectively
- 3 x Specialist Members representing the further education, housing and local enterprise sectors respectively.

The Assembly will appoint further members or observers as it considers appropriate in line with its agreed work programme.

Procedure

Chairmanship

13. The Assembly will appoint its chair at its first meeting and will agree the term of office for the Chair. Assembly members may appoint a Vice Chair from amongst their membership. The Chair will be responsible for agreeing the agenda and draft minutes, and ensuring matters discussed meet the objectives as set out in the Terms of Reference.

Meeting proceedings and quorum

14. The Assembly will meet formally, in public, at least twice per year, unless the Assembly resolves to meet in private in accordance with reasons permitted by the legislation relevant to the meetings of public bodies. Additional meetings may take place as required, with the agreement of the Chair.
15. Meetings held in person will be at venues providing accessibility to the public. Members of the Assembly may attend remotely with the agreement of the Chair. Any formal public meetings held entirely virtually will be webcast to provide openness and transparency to the public.
16. The Assembly is quorate when there are four members of the Assembly present including at least one representative from NHS Sussex and each of the three Local Authorities. If the quorum has not been reached, the meeting may proceed if those attending agree, but no decisions may be taken. Members attending meetings virtually will be counted towards the quorum.
17. In any circumstance where a decision is required the Chair shall strive to ensure a consensus is achieved. If a vote has to be taken, in the event of an equality of votes, the Chair shall have a second or casting vote. Each core (NHS Sussex and local authority) member of the Assembly will be entitled to a single vote. The voting rights of any other members appointed by the Assembly will be determined by the Assembly.

Attendance

18. Where a member cannot attend a meeting of the Assembly, they may send a nominated substitute who will have equivalent voting rights.

Engagement

19. Where relevant to its responsibilities, the Assembly may engage and consult with partner organisations to promote strategic integration and collaboration across the health and social care sector in Sussex. This should not duplicate existing engagement/consultation arrangements, such as carried out at place level by Health and Wellbeing Boards. Key consultees of the Assembly will include:
 - Healthwatch Brighton and Hove, East Sussex and West Sussex
 - Patient Forums for each area of Sussex
 - Place-based partnerships
 - Higher and Further Education representatives
 - Housing representatives
 - Local Enterprise representatives
 - Others TBC.

Administration and access to agenda and reports

20. NHS Sussex will provide secretariat support to the Assembly.
21. Copies of the agenda and reports for meetings of the Assembly will be provided to Members (either via e-mail or in paper copy) and published on the NHS Sussex website (for public access) at least five clear working days before the meeting.

Assembly papers will be available online for a period of six years, after which time they will be archived.

22. Minutes of meetings shall be recorded by the secretary and submitted in draft form to the NHS Sussex Board, and the Health and Wellbeing Board of each of the three Local Authorities. The draft minutes will also be published on the NHS Sussex website once approved by the Chair. Minutes will be subject to final agreement by the Assembly.
23. The secretary will support the Chair of each Health and Wellbeing Board to prepare and deliver reports to the three Local Authorities' Health and Wellbeing Boards and the NHS Sussex Chair to deliver reports to the NHS Sussex Board.

Terms of Reference publication and review

24. These Terms of Reference will be published on the websites of NHS Sussex and the three Local Authorities.
25. As a new partnership forum, it will be important to ensure there is a robust review process for the Assembly. Its Terms of Reference will be reviewed by Assembly six months after its first formal meeting and after that on at least an annual basis. Any proposed changes will require the approval of NHS Sussex and the each of the three Local Authorities.

Document Control

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Change Record

Date	Change	Comments

Improving Lives Together
Our ambition for a healthier
future in Sussex

Our ambition for a healthier future

We want to improve the lives of people living across Sussex now and in the future and we will be working differently with our communities to make this happen. We want people to thrive and be the best they can be; to be healthier and feel supported; and have the best possible services available to them when needed.

We know this is not happening often enough at the moment, particularly for those who are the most disadvantaged in our communities.

Not enough people are being supported to live healthier. Too many people are living in poor health. And too many people are waiting too long for treatment or care. This is despite our dedicated health and care staff working hard every day to give local people the best care they can.

In some areas, this has been the case for many years, but things have been made worse by the impact of the pandemic and the current pressures on people's lives due to the cost-of-living crisis.

A lot of work has already taken place across health and care to make improvements and we have made some progress for our population. But this has still not gone far enough for some people and more needs to be done.

A lot of the issues we face can only be resolved with long-term change. We need to think and work differently to make a bigger difference to local people. And this needs an even greater and longer-term ambition to build on what we have done in the past.

Improving Lives Together represents that ambition.

We are building on the Health and Wellbeing Strategies we have in place across Brighton and Hove, East Sussex and West Sussex that focus on the priorities across our local populations.

In addition to this, we have agreed the areas that will make the biggest positive difference to people's lives that can be best achieved by working across the whole of Sussex. These are:

- **A new joined-up community approach to health and care.**
- **Growing and developing our workforce.**
- **Improving the use digital technology and information.**
- **Maximising the power of partnership working.**

We now have a better opportunity to make our ambition a reality because of the different way we – the organisations responsible for planning, providing, supporting and influencing health and care - are working together.

We will be strengthening how our organisations work formally in partnership across our populations in Brighton and Hove, East Sussex and West Sussex - what we call working at "place". This is where our organisations have already been working to

better join-up care and take positive action, co-ordinated through three Health and Care Partnerships whose work is overseen by Health and Wellbeing Boards.

We cannot do this alone though and will be working with local people, our communities, and our staff to make it happen. We will all need to be committed to making the changes we want to make and help support each other to do so.

Who we are

The Sussex Health and Care Assembly is a formal joint committee set up between NHS Sussex, Brighton & Hove City Council, East Sussex County Council and West Sussex County Council. Its membership includes representatives from universities, voluntary and community organisations, Healthwatch, further education, housing and local enterprise, across Sussex. Although each organisation is responsible for decisions about its own priorities and resources, we want to use the approach outlined in *Improving Lives Together* to keep us focussed on the things we can only achieve well by working together. You can read more information on the Assembly [here](#).

About our Health and Wellbeing Boards and Strategies

There are three Health and Wellbeing Boards in Sussex covering Brighton and Hove, East Sussex and West Sussex. They have a statutory role to bring together representation from local government, including borough and district councils, local NHS organisations, Healthwatch and voluntary, community, social enterprise organisations, and other key public services to assess needs and agree strategies, focussed on improving health, care and the overall social and economic wellbeing of their populations.

The Health and Wellbeing Board Strategies use local evidence, data and insight to set out the priorities for improving health and wellbeing of their populations, responding to the distinct issues and challenges in these places.

There are three Health and Care Partnerships that support the Health and Wellbeing Boards to deliver these strategies. The additional improvements we want to make in *Improving Lives Together* aim to support, build on, and accelerate these local priorities.

- [Brighton and Hove Joint Health and Wellbeing Strategy](#)
- [Healthy lives, healthy people: East Sussex Health and Wellbeing Board Strategy](#)
- [West Sussex Joint Health and Wellbeing Strategy](#)

1. Where we are now: Why we need to change

The majority of people in Sussex receive good quality support, care and treatment most of the time. Satisfaction rates are still high among those using services and a lot of work has taken place to improve health and care over the last few years that has brought real benefits.

This includes giving people better and quicker access to the right services when they need them. For example:

- We are creating more appointments at GP practices at more convenient times of the day.
- We have improved how people get urgent care by introducing Urgent Treatment Centres at hospital sites and expanding the 111 service.
- There has been an expansion of mental health services to include a single point of access service in West Sussex, to go along with that already in place in Brighton and Hove and East Sussex.
- More is being done to prevent people going to hospitals for care, such as the 'virtual wards' we are creating to support people at home, and the community diagnostic centres being rolled out to provide people with tests, scans and treatments closer to where they live.
- There has been greater focus and improvements on how people can manage long-term conditions and on supporting people's wellbeing.

During the Covid pandemic, all health and care organisations and staff worked together, and with our communities, to rapidly do whatever was needed to keep local people as safe and well as possible. Many of these ways of working have been maintained and improved, and the partnership working and learning from the pandemic has continued. We successfully rolled out the biggest vaccination programme in history and to date have delivered more than 3.8m jabs to keep people protected thanks to the efforts of health and care staff, and our partners.

Case study: Supporting people at home during Covid

The Covid Oximetry at Home (CO@Home) and Covid Virtual Ward services were rapidly rolled out from December 2021 as part of the Sussex response to the pandemic. These supported patients to manage their Covid symptoms at home using simple technologies, that identified deterioration early. Patients were monitored virtually three times a day and clinical questions from doctors and healthcare professionals were sent via a portal, text, email or telephone call. Feedback shows the simple equipment and flexible contact methods made it easy for patients to monitor and report on their health and worked well for patients with learning difficulties, sensory impairment and mental health conditions, as well as those for whom English is not their first language. Across five months, over 2,100 patients were cared for by the services.

People are telling us things need to change

Despite the good work to improve and maintain high quality health and care, local people are telling us they are not always getting what they need, when they need it.

We are constantly hearing feedback from individuals, communities and staff and we need to listen and respond to what they are saying. A lot of feedback is positive, but we also hear a lot about areas that need to improve. Every person has a different experience and story to tell, but there are common themes people keep telling us:

- **People say we need to improve access to services**

“Getting to see the right service can be slow, inaccessible and makes you reluctant to ask for help. You don’t want to bother emergency services which are already stretched and not the correct first point of call, so you just muddle through and feel unwell.”

- **People are finding care disjointed and a confusing ‘system’**

“Services can be disjointed and appointments often seem unnecessary. Some services could be made much more accessible by being community based.”

“My mother has a complex condition, both mental and physical. The biggest challenge has been dealing with all the different teams, being batted around, and no one really taking responsibility. You don’t want to have to repeat your situation with each person you come into contact with. You can feel like you’re going back to square one.”

“I am carer for my husband who has Alzheimer’s. I struggle to get help as the whole process from diagnosis is too confusing. You end up feeling you have been left to get on with it.”

- **People need more involvement in their own care**

“Someone’s health belongs to them, not to the system. A person knows their body and mind best even if they can’t diagnose what’s wrong. They know what motivates and disincentivises them. A system built around the needs and preferences of an individual is more likely to see that person fully engage with it.”

- **People need more focus on their individual needs**

“I think the thing that gets missed is the individual person - what people actually need for them beyond a one size fits all. That’s where people fall through the gaps.”

- **People need better access to information**

“I know the information I need is out there but I either cannot find or access it. This is a problem that other family members have faced.”

- **People need support for all aspects of their lives**

“I think you should be working with local activity and social groups to help get people out in their local community to show that people can help them.”

- **We need to better support our workforce**

“Tackling the issues and supporting local people better can only be done if the workforce is sufficient and encouraged, not stressed to the point of leaving the service or becoming ill themselves.”

“I work in healthcare and don’t really feel I can progress beyond my current role. I’ve done the same thing for many years and would like to develop and learn new skills but I don’t know how best to do it.”

How we have engaged with local people

We have collated feedback from local people over the last two years to help shape our ambition. This includes:

- Direct feedback from **18,000** people.
- Face-to-face and virtual workshops with **420** people.
- **500** interviews and direct feedback through partners, including Healthwatch.
- **1,440** survey responses on our ambition priorities.
- Online communication that has reached more than **200,000** people across our website, social media and podcasts.
- **800** individual conversations in public engagement events during the summer and autumn of 2022.
- Engagement with communities who experience health inequalities and marginalised groups, working with the voluntary and community sector.

Understanding the reasons behind the need to change

More people living across Sussex now need more support, care and treatment more often and the services currently available cannot keep up. This is causing some people to get sicker, experience delays and is putting staff under more pressure. We need to understand what the reasons are behind this so we can tackle them and make improvements.

Across Brighton and Hove, East Sussex and West Sussex, there are unique strengths and challenges, which contribute to differences in the overall health of their populations. This informs the different approaches being taken in the three Health and Wellbeing Strategies and other local plans. There are also common themes across Sussex that we need to tackle and improve.

Different factors affecting health

Many factors influence a person's health and wellbeing, most of which they are unable to control or improve themselves without support. Many different organisations are responsible for influencing these factors and they have not always worked in a joined-up way in the past. To make improvements, we need to consider all the factors and make sure all the organisations are working more closely together.

What influences a person's health

- 40% socioeconomic factors, including education, employment, family support and income.
- 30% health behaviours, including smoking, diet and exercise and alcohol use.
- 20% health care, including access and quality of care.
- 10% physical environment, including housing and air quality.

Growing and ageing population

We have a growing population, with the main reason being that more people are coming to live in Sussex. We also have an ageing population. This means more people are needing more care and support more often.

Brighton and Hove

- 291,000 people live in Brighton and Hove.
- The population is predicted to increase by 3% by 2032.
- There is a younger population with 83% are aged under 60, but the greatest population increase is expected in the 65 and over age group.

East Sussex

- 559,000 people live in East Sussex.
- The population is predicted to increase by 4.1% by 2032.
- Over half the increase in population is expected to be people aged 65 years and older.

West Sussex

- 867,000 people live in West Sussex.
- The population is predicted to increase by 5.3% by 2032.
- Over half the increase in population is expected to be people aged 65 years and older.

Living with long term conditions

Many people are living with long-term conditions that are affecting their day-to-day lives and need to be better supported to manage their condition. The common causes across all our populations are:

- Respiratory problems
- Mental health problems
- Lower backpain and joint problems
- Cardiovascular disease

Health inequalities

There are avoidable and unfair differences in health between different groups of people across Sussex that we need to reduce. There are many reasons for 'health inequalities', including employment, where someone lives, income, housing, education, their ethnicity and their personal situation.

People living in more **deprived areas** have worse health and outcomes and there are big differences in life expectancy across Sussex which matches deprivation. The greatest levels of deprivation in Sussex are along the coast and in South West Crawley.

Brighton and Hove

- The difference in life expectancy between the most and least deprived areas is 9.9 years for men and 7.7 years for women.
- The difference in the number of years a person can expect to live in good health ('healthy life expectancy') is **xxx** for men and **xxxx** for women.

East Sussex

- The difference in life expectancy between the most and least deprived areas is more than 11 years for men and almost 10 years for women.
- The difference in the number of years a person can expect to live in good health ('healthy life expectancy') is **xxx** for men and **xxxx** for women

West Sussex

- The difference in life expectancy between the most and least deprived areas is **xxxx** years for men and **xxxx** years for women.
- The difference in the number of years a person can expect to live in good health ('healthy life expectancy') is **xxx** for men and **xxxx** for women

The impact of Covid and cost-of-living

The Covid pandemic, and the lockdowns we lived through, impacted on people's health and wellbeing in different ways. As a result, we have seen:

- More children needing support for mental health issues.
- Increasing alcohol consumption, smoking and obesity among adults.
- Physical and mental wellbeing of older people getting worse.
- Waiting times for procedures and treatment growing.
- Sicker patients coming into hospital.
- Inequalities made worse for some people, including ethnic minority communities.
- More health and care staff leaving the profession.

The current cost of living crisis is also having an impact on people's wellbeing and more are likely to need support and care as a result in future.

Why services cannot keep up with the need

There are a number of reasons services are not always able to keep up with the growing need. These include:

- **How services are arranged and organised:** Services are currently run by different parts of the NHS, local authorities and other organisations and many people need support and care from more than one service at a time. Services do not always work seamlessly, which means they can sometimes feel disjointed, slow, and people have to repeat their stories many times.
- **Emphasis on prevention:** The majority of health and care services are focused on treating and supporting people when they become ill. This is often necessary but there is more that could be done to focus on helping to prevent people becoming ill in the first place.
- **Digital technology:** We have been developing new ways of using digital technology over the last few years to improve health and care services. But we are still not using it in the best possible way and not tapping into all the benefits it could bring.
- **Limited money and facilities available:** There is a limited amount of public funding available for health and care and this has an impact on investment in services. There is not enough money available to do everything we ideally would want to do, so we have to get the best value out of the funding we have. We are still using ageing buildings in some areas, which can make it difficult to provide high quality care and we need to think differently around how we can best use the buildings and land we have.

Our workforce challenge

When we talk about workforce, we are describing those that keep people safe and who deliver care and support, either through paid employment or volunteering. Working in health and care is incredibly rewarding and those that do want to give the best possible care, in the best possible way. They are currently not always able to do this because of the growing pressure on services and the way some services are run. There are three main issues we need to tackle:

- **Retaining our staff:** The increasing pressure, and the lasting impact of their efforts during the pandemic, has resulted in some staff being stressed, overworked and tired, which is resulting in more going off sick and leaving health and care professions.
- **Recruitment:** We are currently not able to recruit enough health and care professionals to cover vacancies in our services and it takes time to train and develop future staff. Housing is also very expensive in some parts of Sussex, which can mean some staff are not able to afford to live locally and makes it more difficult to recruit and keep a local workforce.

- **Development:** We are not doing enough to support staff to develop new skills which can be used in the best possible way across different teams and services.

Other areas we need to improve

Alongside our commitment to give greater support to our most disadvantaged people and communities, we have agreed three other areas that need particular focus:

Children and young people

Our early years have a big impact on the rest of our lives. More children and young people are needing help and care, and the issues they have are more complicated and severe than they were, but services are not always able to meet this growing need. We have to give more focus on our children, young people and families, to better support them in all aspects of their lives. This includes the environment they grow up, their education, and the support around them. We need to give particular focus to children in and leaving care, those who need support to keep them safe, and young people as they become adults.

Unpaid carers

Unpaid carers play an important role and on average have poorer health than people who are not carers. Over 10% of adults across Sussex say they provide unpaid care to a relative or friend. Many carers do not get the support they need and we need to do more to help them maintain their own health and that of those they are caring for.

People who feel lonely and live in social isolation

The feeling of being alone and a lack of social connections can have major impacts on someone's health and wellbeing. This is an issue for people of all ages, but particularly for our older population, and we can make a big positive difference by giving them more support.

2. Where we want to get to: Our ambition for a healthier future

We are taking collective action to respond to what local people are telling us and to tackle and improve the issues.

Our ambition is to improve the lives of people living across Sussex by supporting them to live healthier for longer and making sure they get the best possible care and treatment when needed.

To make this a reality, we have four goals we want to achieve:

- Improve health and health outcomes for local people and communities, especially those who are most disadvantaged.
- Tackling the health inequalities we have.
- Working better and smarter, and getting the most value out of funding we have.
- Doing more to support our communities to develop socially and economically.

We will do this by organisations working closer together and differently with and within our communities to support people through each stage of their lives. We want to:

- **Help local people start their lives well by:**
 - Improving mother and baby health and wellbeing, especially for those most in need.
 - Creating healthy environments for children, young people and families to grow up in.
 - Supporting parents and carers.
 - Linking health and care up in a better way with education and schools.
 - Supporting good mental health for all children and young people.
 - Doing more to support the most vulnerable children and young people, including those in and leaving care, and those who need to be kept safe.
- **Help local people to live their lives well by:**
 - Supporting people to look after their own health and wellbeing.
 - Supporting people to live, work and play in places that promote health and wellbeing.
 - Supporting people to know how they can look after themselves better when they have a health issue.
 - Supporting people who have physical disabilities, learning disabilities and mental health conditions, to have good health and joined-up care and support, including access to opportunities such as accommodation, housing and employment.
 - Ensuring more access to services for people who have traditionally been under-served, for example homeless people and other groups

- **Help local people to age well by:**
 - Ensuring fewer older people feel lonely or isolated.
 - Helping older people to stay healthy and live independently for longer.
 - Reducing the number of older people who suffer falls.
 - Helping people receive good quality care at the end of their lives and to die at a place of their choosing.

- **Help local people get the treatment, care and support they need when they do become ill by:**
 - Tailoring care to support people in their own homes, or as close to home as possible.
 - Supporting the health and wellbeing of informal carers.
 - Giving them access to the most appropriate and best experts and professionals as early as possible that best suits their needs.
 - Managing risk factors for long-term conditions.
 - Giving greater joined-up care and support for people with long-term conditions and a number of health issues.
 - Making sure people only need to use health and care services when they really need to.

- **Help our staff to do the best job they can in the best possible working environment by:**
 - Providing more support to them and creating a more diverse, inclusive and healthier working environment.
 - Encouraging and supporting more people to go into health and care professions, particularly young people and students.
 - Developing our staff to give them the skills they need to work more flexibly and progress their career.

3. What we will do to get there: Making our ambition a reality

We are not starting from scratch as we look to achieve our ambition. We have our Health and Wellbeing Board Strategies and other pieces of work underway that are making improvements all the time to try to meet the immediate needs of local people.

We will now be building on this with bolder long-term action and change that aims to make a greater positive difference to local people.

This involves developing '**Joined-up Community working**' that will better meet the specific needs of local residents.

To support this, there are three 'success factors' that we need to develop and improve:

- **Growing and supporting our workforce**
- **Improving the use of digital technology and information**
- **Maximising the power of partnerships**

So how will this work and what difference will it make?

Joined-up Community working

In future, health and care organisations will work in a more joined-up way with and within communities to better understand and respond to their specific needs. Support and services will be shaped around local people, rather than expect them to fit into the 'system'. When we say communities, we mean both the local area people live in and also communities that we know people identify with, such as those with the same interest, beliefs, or way of life.

What will be different?

This will involve a very different way of working to how health and care organisations have often worked with communities in the past. There will be three big differences:

- **Greater joined-up working:** Joined-up Community Teams of professionals and experts will work together across different organisations and within local communities to tailor support, care and treatment to what local people need. This will involve linking up all the services and organisations that influence a person's health, care and wellbeing - including primary care (GP services, pharmacy, dental and eye health services), social prescribing, community, mental health and social care services, hospitals, the full range of support provided by local voluntary and community organisations, and wider services such as public health, schools and lifelong learning institutions, leisure, housing, environment and support for business. When someone needs more specialist care and treatment, they will be better supported to get it as quickly as possible.

- **Different relationship with communities:** We want to change the relationship between health and care organisations, the staff providing services and those who are receiving care and treatment. We will work with, rather than 'doing to', people and communities to better understand their needs and circumstances, maximise the use of what already works well for them, and find solutions together to issues they face. This will involve greater engagement with local people, community leaders and those with lived experience.
- **Greater involvement of individuals:** Local people will be more involved in, and get more support for, their own health, wellbeing and care. People will be given more support to have the confidence to keep themselves healthy and, if they do become ill, help them manage better themselves so they can carry on living a fulfilled life. There will also be more involvement of, and support for, carers so they can stay healthy themselves and can better support the person they are caring for.

We know every community is different so there will not be a one-size fits all approach, and we will start by specifically focusing on communities who experience the poorest health and have the biggest needs.

As well as changes to how services work, this new way of working will have three differences in how we approach health and care:

- **Greater focus on all aspects of a person's life:** We will be focusing more on all the factors that influence a person's health. This will include doing more to support and contribute to local communities, such as supporting local businesses and employment, working in a more joined-up way with housing and education, the community and voluntary sector, and supporting and working with community groups and local initiatives that encourage healthy living.
- **Greater focus on supporting you to stay healthy:** We want to shift more of our effort, resource and expertise into helping people stay healthy and supporting them to continue to live a fulfilled life if they do have a health issue. This includes more of what we call 'proactive care' which focuses on prevention and not just cure. We will make sure more people get urgent, emergency and specialist care as early as possible when they need it to avoid their condition getting worse.
- **Greater focus on our children and young people:** We will focus more on supporting children, young people and families with every aspect of their lives to help them stay healthy and get the support, care, and access to services they need when they need it. This includes more support during the early years, working closer together with schools and further education, and providing more career opportunities.

Bringing our ambition to life: Case study on Universal Healthcare in Hastings

The local NHS is currently working with councils, community and voluntary organisations and local people in Hastings to design and develop health and care services and support in the future. A project called 'Universal Healthcare' is already underway with a number of community engagement workshops taking place to understand the needs of local people and help shape how they can be better supported in the long term. We intend to be able to start new ways of working from Spring 2023 and this is a good example of the way we want to work with our communities in future.

Our success factors

We have three success factors – workforce, digital technology and information, and partnership working - that need to be improved and developed. Without these, there will not be enough staff and the right expertise to give local people what they need, and services and organisations will not work in the best way.

Growing and supporting our workforce

We want to support our staff and volunteers to do the best job they can by growing and developing our workforce. The number of people working in health and care has grown and we need to carry on increasing staff numbers but recruiting more is not the only answer. We need to also get the best out of the staff we already have.

There are five objectives we want to achieve:

- **Working as 'one team':** We want to create a 'one team' approach across health and care, as well as the voluntary sector, other professionals and volunteers, so they can work together and across different areas to help local people get the support and care they need.
- **A more multi-skilled workforce:** We will support staff to develop new skills and expand the skills they have. This will allow them to work across different disciplines and areas and help staff to have more opportunities to progress in their careers.
- **Creating an inclusive environment:** We want to create a more inclusive working environment that recognises diversity and has a workforce that better represents the population they care for.
- **More recruitment and career opportunities:** We will encourage, and make it easier for, more young people, students, and people who have never considered a career in health and care, to work with us. We will do this by working more closely with local further education, colleges and our universities. We want to employ more local people and we will give greater opportunities for those living in the most disadvantaged areas.

- **Learning culture:** We want to create a culture where people feel valued and supported to develop their skills and expertise. We want to take a 'lifelong learning' approach where people never stop developing their skills throughout their career.

Improving the use of digital technology and information

We will build on the work that has already taken place to improve the use of digital technology. This will help staff make better decisions, work more efficiently and provide better care. It will also help local people access services more easily, to tell their story once and have more involvement and control over their own health and care.

There are five objectives we want to achieve:

- **Connecting services:** We want to connect information better across our different services to help them work in a more joined-up way.
- **Improving technology and sharing data:** We want to support organisations to improve the way they use technology and how they share data to improve the support, care and treatment they provide.
- **Supporting staff:** We want to help staff access the information they need, wherever they are and whenever they need it.
- **Giving local people information:** We want to support local people better to access and manage their own health and care information, care preferences and choice, and the way they wish to interact with those providing services.
- **Supporting people to use technology:** We want to do more to help people use and know how to use digital technology that will best suit them and their needs. This will help those who do not have regular access to technology or are unsure how to use it.

Maximising the power of partnerships

In addition to working at a local level across our communities, organisations responsible for influencing health and care will be working more closely together and with other organisations for the benefit of local people.

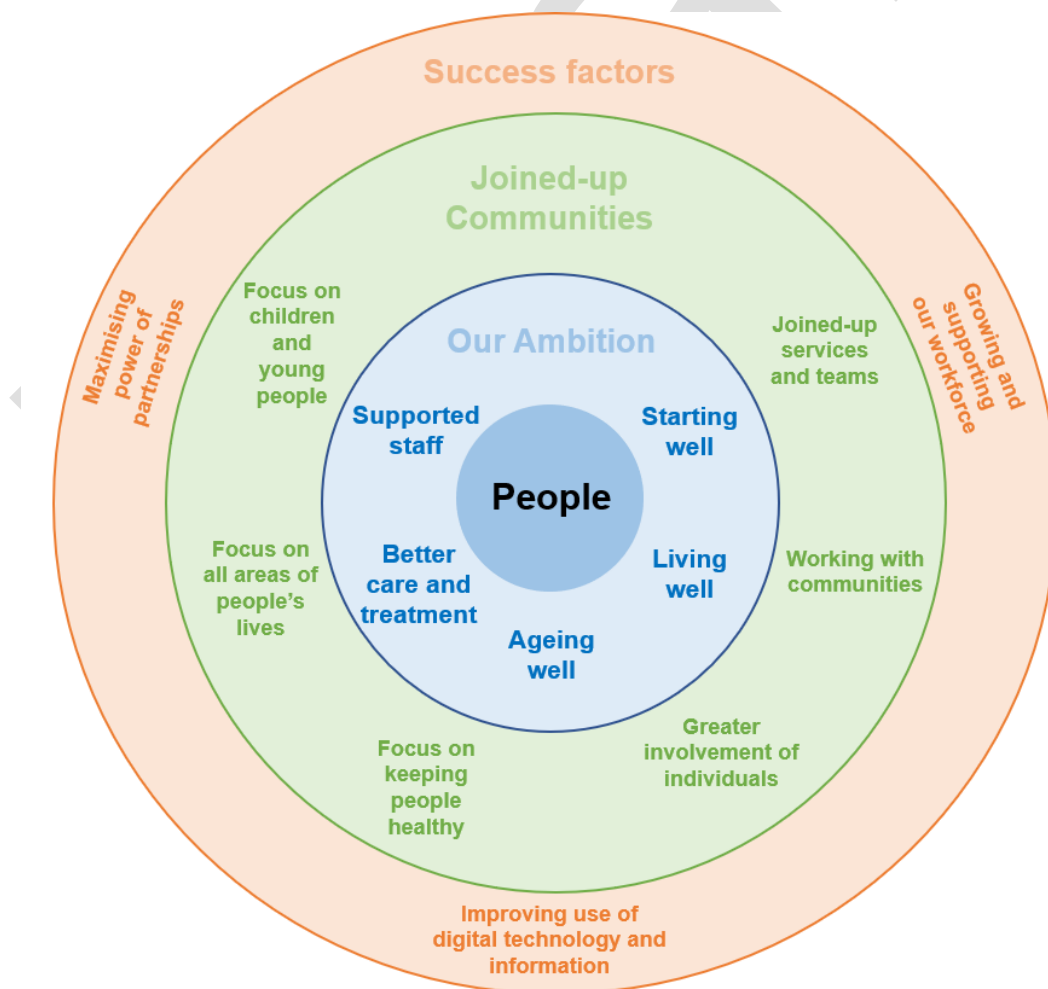
There are three objectives we want to achieve:

- **More leadership at “place”:** We will strengthen how our organisations can work together formally across our populations in Brighton and Hove, East Sussex and West Sussex, focussing on the distinct needs and challenges in our local areas. We call this working at “place” and it is where the local NHS, local government and a wide range of local partners come together to shape and transform health and care, and make the most of the collective resources

available. We will do this by working in our three Health and Care Partnerships to increase ways for our staff and volunteers to work together to deliver joined-up care and improve health in our local communities. More information can be found in the Appendices about how each place has made a start with this, and what we plan to do next.

- **Working across Sussex:** Our new Health and Care Assembly will strengthen how key organisations can work together formally on the complex and challenging issues that are shared across Sussex. This is a new way of working and will mean more organisations will be able to contribute to improving health and care.
- **Greater joining-up of the local NHS:** The local NHS will be doing more to join-up services in future. The NHS across Sussex is made up of 1,100 different organisations and we will be supporting them to work in a more effective and seamless way to improve the care and experience of local people.

Our ambition in summary



How this will benefit local people and staff

Achieving our ambition will bring real benefits to the lives of local people. Examples of what this will look like in future are set out below and are based on the situations of real people living across Sussex.

Emily, 13, lives with her mum, brother and cat in a block of flats. She used to like doing gymnastics but gave it up last year and now spends most of her spare time chatting to her friends on social media. She has been feeling quite anxious recently, is having more arguments with her mum and is less keen on going to school than she used to be. What will be different for Emily in future?

- There will be more health and wellbeing support for her at school.
- There will be more opportunities for her and her family to be supported by healthy activities, facilities, groups and services where she lives, both virtually and physically.
- There will be more and quicker access to health, care and wellbeing services if she does become ill or need support.
- She will have more opportunities to make health and care a career choice when she leaves school.

Harpreet, 42, is a mum of two and lives with her husband in an old Victorian terraced house. She is relatively healthy, goes to the gym whenever she can, and hasn't needed to use health and care services for a long time. What will be different for Harpreet in future?

- She will be better supported and informed to make her feel more confident about what she and her family can do to stay healthy.
- Her family will have more access to healthy activities.
- If she does become ill, she will be able to access the right service for her at a time that is more suitable for her busy life.
- She will be able to access services, and keep better track of her own health, through digital technology, such as her mobile phone.

Dave, 82, lives alone and has a number of long-term health conditions. His mobility is restricted, he doesn't go out of his house very often and needs support to travel. He needs care from a number of different professionals and services and his daughter is increasingly helping to look after him. What will be different for Dave in future?

- He will have a personalised care and support plan in place so she doesn't have to repeat his story and the number of contacts he has with services will be reduced.
- All the health and care professionals supporting him will know his needs and what is important to him.
- His daughter will be treated as one of the team supporting Dave and will also be supported herself.
- His condition and health will be regularly reviewed to prevent him from deteriorating.
- If he needs a higher level of care, this will be done in his own home through a 'virtual ward' and Urgent Community Response service.
- He will be supported to have more opportunities to meet other people socially.

4. How we will get there: Achieving our ambition

Achieving our ambition will need change, with how health and care organisations, services and teams work, and how communities interact with services and are involved in their own health, care and wellbeing.

We want to achieve our ambition over the next five years and we will not be able to do everything at once, with some things taking longer than others to get up and running. We need to be focused on what we can do and when. We will also need to do it in a realistic way, using the funding, staff and facilities we have available. This is alongside all the work that we continue to do every day to improve and maintain the immediate and short-term support, care and treatment local people need.

This will be a big challenge but we need to be ambitious and bold because just doing what we have always done, or what we are doing now, is not going to make the difference we want and need. This will need a collective effort and everyone will need to play their part.

How we will achieve our ambition is something we will be discussing across organisations, staff, and our communities over the coming months. We will be developing a plan that clearly sets out what actions need to be taken and will be agreeing across organisations how they will need to work differently in the future. We will engage with local people and staff to discuss what will be different for them and how they can play a role in supporting the change.

We will also be setting out how we will measure progress and success to make sure we know whether or not our ambition has become a reality.

How we developed *Improving Live Together*

Improving Lives Together has been developed with input from a large number of people. The Sussex Health and Care Assembly has been established to oversee its development and representatives have been involved in shaping what it looks like and agreeing the areas we want to focus on.

We have engaged with representatives and experts from NHS organisations, public health, social care, voluntary and community organisations, Healthwatch and other people who have an interest and knowledge of health and care.

We have used a significant amount of feedback from local people and communities from engagement carried out over the last two years and have been testing what we are proposing across our communities over the last six months.

Our ambition responds to a number of national strategies, plans and guidelines.

As well as being informed by the Health and Wellbeing Strategies across Brighton and Hove, East Sussex and West Sussex, we have used a range of evidence and supporting information. [This can be viewed here.](#)

5. Appendices

The following section summarises the key areas of focus and plans in Brighton and Hove, East Sussex and West Sussex. These form the basis of the work we are doing to achieve our ambition.

Appendix 1: Brighton and Hove

Brighton and Hove has a population of 290,855 people (ONS estimates) and is the 131st most deprived local authority in England (of 317) according to the 2019 Index of Multiple Deprivation (IMD).

Brighton and Hove is a diverse city with:

- A younger population: 83% are aged under 60, but in planning for the future we know the greatest population increase is expected in the 65 and over age group.
- An estimated 11-15% of residents lesbian, gay or bisexual and an estimated 2,500 transgender residents.
- 19.5% of our population who are from a black or minority ethnic group and 20% of the population born outside the UK (higher than England at 16% and the South East at 14%).
- Over 3,000 known refugees/globally displaced migrants.

Some areas of the city - Whitehawk, Moulsecoomb, Hollingdean and pockets of Woodingdean - fall in the 20% most deprived areas in England. There is a life expectancy gap of 9.9 years between men in the most and least deprived areas and of 7.7 years between women in the most and least deprived areas. The gap in healthy life expectancy is 14 years between men and 12.5 years between women in the most and least deprived areas.

The city has the fifth highest rate of homelessness, the ninth highest rate of deaths related to drugs misuse, and higher than average rates of self-harm and suicide by local authority in England.

Alongside this, however, there are a number of positive health promoting assets across the city – such as access to green space - and higher rates of some positive lifestyle behaviours and activity. For example we have high rates of breastfeeding, and more people use outdoor spaces for exercise or health reasons in Brighton and Hove than England (18.3% compared with 17.9%) and are physically active.

Our vision is for everyone in Brighton and Hove to have the best opportunity to live a healthy, happy and fulfilling life. Our Joint Health and Wellbeing strategy, adopted by the Health and Wellbeing Board in 2019, reinforces the Sussex-wide ambition and focuses on improving outcomes by prioritising prevention and reducing health inequalities throughout the key life stages: starting well, living well, ageing well and dying well. We are making health and wellbeing everyone's business and so the Health and Wellbeing Strategy has adopted a collaborative approach to support partners across the city to take action that improves health and reduces health inequalities.

Brighton and Hove Place-based Plan

The establishment of the Health and Care Partnership Executive Board in January 2020 enables us to continue and build upon the work already started and is now becoming formalised with the Sussex-wide ambition. The firm foundations of the Board enable us to develop and mature service design, delivery and governance over the coming years.

The Board has developed a plan that includes five priority areas for Brighton and Hove:

- 1) **Children and Young People:** We will improve and expand access and existing support to children and young people and their families for mental health, emotional wellbeing, autism, attention deficit hyperactivity disorder (ADHD) and other neurodevelopmental conditions with a focus on population prevention approaches and vulnerable groups. We will improve early diagnosis and outcomes for children and young people.
- 1) **Mental Health:** We will implement the key recommendations of the 2022 mental health Joint Strategic Needs Assessment (JSNA). We will expand our support for people with mental health needs and further develop joined-up community mental health services, connecting mental health services with community assets.
- 2) **Multiple Compound Needs:** We will improve and join-up services to better support people with multiple needs by delivering an integrated service model, co-produced for and by people with lived experience.
- 3) **Multiple Long-Term conditions:** We will improve services to people with long-term conditions to deliver personalised care, tailored to individual needs, strengths and capabilities. We will aim to better understand the interaction of mental and physical health conditions as a factor to improve outcomes. We will proactively identify and/or support and meet the needs of those at risk of or living with long term conditions.
- 4) **Cancer:** We will complete the recovery of cancer services affected by the pandemic, improve performance against cancer waiting times standards and deliver the ambitions of the NHS Long Term Plan to diagnose more people with cancer at an earlier stage, with a particular focus on disadvantaged areas and underserved communities where rates of early diagnosis and screening uptake are lower.

We will have a particular focus on those interventions which can help deliver better outcomes for our priority areas such as:

- Prevention and early detection.
- Supporting communities and building on our community assets approach working with Voluntary and Community Sector services.

- Holistic transformational programmes across the NHS and local authority aimed at supporting communities to thrive.

We will do this by ensuring we have shared ambitions which will help us to deliver:

- Continuing to work across the city to influence the building blocks of health as well as health and care services, including community engagement to reduce health inequalities.
- A joined-up approach to meeting our population needs as opposed to individual organisations working separately.
- Localised provision to meet the needs of communities, prioritising those with the greatest need.
- Having joint teams and posts that work across all settings.
- A more efficient use of technology to ensure better flows of patient data across health and care services.

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Appendix 2: East Sussex

Responding to our population health and care needs

The following characteristics of our population significantly drive our local plans for integrated health and care in our communities:

- Our growing and ageing population - by 2026 almost one in four people (24%) will be aged 65-84, and more than 4% of our population will be over 85. Added to this by 2028, around 20,000 more people in East Sussex will be living with two or more long-term health conditions than was the case a decade earlier.
- Increasing numbers of children and young people with Education, Health and Care Plans, some of whom will have complex medical and care needs. There are growing levels of need and complexity in relation to safeguarding for children and young people.

More information about East Sussex, its strengths and challenges and our plans overall can be found in our Health and Wellbeing Board [Strategy](#).

In response, we have worked together to offer joined-up care that can enable more support for complex needs in community settings, across all age groups. For children and young people this has meant:

- An integrated service for 0-5 year olds including health visitors, family keyworkers, communication support workers.
- Multidisciplinary staff teams for youth offending, specialist family service (SWIFT) assessments, young people's substance misuse services, and mental health services for children in care and adopted children.
- An integrated Single Point of Advice and front door joining early help, social care and mental health.
- Developing stronger links between mental health and emotional wellbeing services, and enabling access to shared information.

With more older people, which includes those who are frail and have multiple conditions, East Sussex is likely to have higher health and care needs than other areas of our size. To help with this we have put in place a model of integrated care aimed at supporting independence, reducing avoidable admissions to hospital and improving discharge into community-based care. This includes:

- Health and Social Care Connect – a single gateway for community health and care queries open to staff and the public and operating 24 hours a day, seven days of the week throughout the year.
- Joint Community Reablement – a partnership between Adult Social Care and health providing short-term rehabilitation and packages of care in people's own homes after episodes of ill health or time in hospital.
- Crisis response team – responding to certain health pathways as an alternative service to hospital.

- Discharge to assess – a joint approach to assessing people in short-term beds or their own home rather than hospital.
- Integrated health and social care teams – community nursing and social work services aligned and sometimes co-located, with integrated management arrangements and working with local GP surgeries, care homes and home care agencies.

Alongside key voluntary sector and housing services, and support for carers and families, this joined-up offer of care contributes to enabling people to live independently and well, for as long as possible in their own homes.

How we want to build on this - integrated health, care and wellbeing in our communities

Our next steps as the East Sussex Health and Care Partnership will be to build on these strengths to expand the integrated community model for our population in the following ways:

- Designing and agreeing an approach for working together in our communities across primary care, community healthcare, education, social care, mental health, and the full range of local voluntary and community and housing organisations, driven by a deeper shared understanding of local needs.
- Making sure we keep strengthening our offer of integrated care. For children and young people this is about working with whole families (including through the Family Safeguarding model), and linking ever more closely with early years settings, schools and colleges. For adults this includes further developing Trusted Assessor roles, rapid crisis response and support with discharges from hospital, as well as exploring ways to build more integrated leadership and roles to deliver better coordinated care.
- To support improved population health overall and therefore the years of life people spend in good health, we have agreed our model needs to link strongly with the wider services in local areas that impact on social and economic wellbeing as well. This includes leisure, housing and environment services provided by borough and district councils and others.

Our partnership plans to embed hubs in communities to help coordinate access to local sources of support and activities, for example to boost emotional wellbeing and help with loneliness and isolation. We want to develop our plans for using our power as employers and buyers of services to stimulate economic and social wellbeing in our communities. This model will bring:

- Greater capacity in communities to promote mutual support, and deeper levels of joined-up and personalised care, building on the strengths and assets of individuals, families and communities.
- Greater levels of prevention, early intervention and ways to anticipate health and care needs.
- New ways to remove the barriers that prevent staff and volunteers working in different teams from working together on the ground.

Appendix 3: West Sussex

The West Sussex Health and Care Partnership

The West Sussex Health and Care Partnership was formed in 2020, bringing together key local health and care partner organisations to work collaboratively to deliver the objectives of the Joint Health and Wellbeing Strategy and the Sussex-wide strategy through a Place-based Plan. The partnership leads on delivering shared population health objectives on behalf of the Health and Wellbeing Board. Having a place-based partnership allows us to adapt our working to the specific population needs that we have in West Sussex and use our local assets to deliver the solutions.

Partnership working to empower local communities

At the early stages of our partnership formation in 2020, we agreed with our Health and Wellbeing Board to embark on our journey to develop a model of collaboration that brings changes to people directly within their community. This model is our six Local Community Networks. These are co-located with district and borough footprints and are empowering communities to deliver change through collaborative working between primary care, district and borough councils, local Public Health, and voluntary sector enterprises.

All six of our Local Community Networks are already up and running and delivering life-changing differences for local people within their communities. As we continue on our partnership development journey, we will maintain our focus on how Local Community Networks can continue to make the positive changes for people who live in West Sussex.

The West Sussex Place-based Plan

The West Sussex Health and Care Partnership Place-based Plan uses evidence from our Joint Health and Wellbeing Strategy to determine local priorities and key areas for change agreed across our partners. Our three local priorities in West Sussex are to **tackle health inequality, deliver transformation together** and to **integrate health and care services** for a joined-up experience. In addition to our Sussex-wide priorities, there are six specific priority areas for change that have been identified from the Health and Wellbeing Strategy for West Sussex:

- 1. Tackling the wider determinants of health:** Our partnership will work together to influence the many determinants of healthy living, such as how services are accessed and how communities can be empowered to support healthy living for their residents. This is being done by:
 - Delivering our Crawley transformation programme with new models for accessing health and care.
 - Tackling the heart of health inequality experienced by communities within West Sussex, using public health data to target resources to close the gaps in health inequalities within communities.
 - Building on our commitment to social prescribing to support people with managing their health with help and support.

- 2. Addressing health inequalities:** We will have a targeted and focused approach for those with most need and who need additional support. This is being done by prioritising the key health inequality related areas such as heart disease, respiratory illness and cancer and utilising approaches such as tobacco control, targeted cancer screening and health checks to target activity and resources where it is needed most based on local evidence.
- 3. Adults Services:** Our strategic objective is to help people 'live the life they want to lead', by remaining independent for as long as possible and maintain a high quality of life. Building on our early models of integrated health and social care, we want to grow our model of care in the community to deliver more health services and care to people in their home-setting and local community, supporting people living with long-term conditions.
- 4. Children and Young People:** We will improve the existing support to children and young people so they can have the best possible start to live. This is being delivered through our health priorities set out in our West Sussex Children First programme, improving maternity experiences amongst more deprived people, delivering the best standard health-checks for children who are in care, and developing new services and support for the emotional wellbeing of all young people.
- 5. Mental Health:** We will expand our support for people with mental health needs to address the growing need. We aim to deliver the best standard physical health checks for people with mental illness, and to develop sustainable housing solutions for people living with long-term mental illness, linking to our Health, Housing and Social Care Memorandum of Understanding.
- 6. Learning Disabilities and Neurodevelopmental Needs:** We will provide greater focus and support for those with a learning disability and neurodevelopmental needs. We are reforming our children's and young people's neurodevelopmental diagnosis and care pathway, including social support. We want to ensure regular high-standard health checks for people with a learning disability, and we want to create more long-term paid employment opportunities for people with a learning disability.