



**Employment, Learning and Skills Policy
and Performance Board**

**Wednesday, 14 January 2009 at 6.30 p.m.
Civic Suite, Town Hall, Runcorn**



Chief Executive

BOARD MEMBERSHIP

Councillor Eddie Jones (Chairman)	Labour
Councillor Frank Fraser (Vice-Chairman)	Labour
Councillor Dave Austin	Liberal Democrat
Councillor Marjorie Bradshaw	Conservative
Councillor Susan Edge	Labour
Councillor David Findon	Conservative
Councillor Harry Howard	Labour
Councillor Stan Parker	Labour
Councillor Christopher Rowe	Liberal Democrat
Councillor John Stockton	Labour
Councillor Philip Worrall	Liberal Democrat

*Please contact Lynn Derbyshire on 0151 471 7389 or e-mail lynn.derbyshire@halton.gov.uk for further information.
The next meeting of the Board is on Monday, 9 March 2009*

**ITEMS TO BE DEALT WITH
IN THE PRESENCE OF THE PRESS AND PUBLIC**

Part I

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2. DECLARATIONS OF INTEREST (INCLUDING PARTY WHIP DECLARATIONS)	
Members are reminded of their responsibility to declare any personal or personal and prejudicial interest which they have in any item of business on the agenda no later than when that item is reached and, in respect of personal and prejudicial interests (subject to certain exceptions in the Code of Conduct for Members), to leave the meeting prior to discussion and voting on the item.	
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In accordance with the Health and Safety at Work Act the Council is required to notify those attending meetings of the fire evacuation procedures. A copy has previously been circulated to Members and instructions are located in all rooms within the Civic block.

REPORT TO: Employment Learning and Skills Policy & Performance Board

DATE: 14 January 2009

REPORTING OFFICER: Strategic Director, Corporate and Policy

SUBJECT: Public Question Time

WARD(s): Borough-wide

1.0 PURPOSE OF REPORT

- 1.1 To consider any questions submitted by the Public in accordance with Standing Order 34(9).
- 1.2 Details of any questions received will be circulated at the meeting.

2.0 RECOMMENDED: That any questions received be dealt with.

3.0 SUPPORTING INFORMATION

3.1 Standing Order 34(9) states that Public Questions shall be dealt with as follows:-

- (i) A total of 30 minutes will be allocated for dealing with questions from members of the public who are residents of the Borough, to ask questions at meetings of the Policy and Performance Boards.
- (ii) Members of the public can ask questions on any matter relating to the agenda.
- (iii) Members of the public can ask questions. Written notice of questions must be given by 4.00 pm on the working day prior to the date of the meeting to the Committee Services Manager. At any one meeting no person/organisation may submit more than one question.
- (iv) One supplementary question (relating to the original question) may be asked by the questioner, which may or may not be answered at the meeting.
- (v) The Chair or proper officer may reject a question if it:-
 - Is not about a matter for which the local authority has a responsibility or which affects the Borough;
 - Is defamatory, frivolous, offensive, abusive or racist;
 - Is substantially the same as a question which has been put at a meeting of the Council in the past six months; or

- Requires the disclosure of confidential or exempt information.
- (vi) In the interests of natural justice, public questions cannot relate to a planning or licensing application or to any matter which is not dealt with in the public part of a meeting.
- (vii) The Chairperson will ask for people to indicate that they wish to ask a question.
- (viii) **PLEASE NOTE** that the maximum amount of time each questioner will be allowed is 3 minutes.
- (ix) If you do not receive a response at the meeting, a Council Officer will ask for your name and address and make sure that you receive a written response.

Please bear in mind that public question time lasts for a maximum of 30 minutes. To help in making the most of this opportunity to speak:-

- Please keep your questions as concise as possible.
- Please do not repeat or make statements on earlier questions as this reduces the time available for other issues to be raised.
- Please note public question time is not intended for debate – issues raised will be responded to either at the meeting or in writing at a later date.

4.0 POLICY IMPLICATIONS

None.

5.0 OTHER IMPLICATIONS

None.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 **Children and Young People in Halton** - none.

6.2 **Employment, Learning and Skills in Halton** - none.

6.3 **A Healthy Halton** – none.

6.4 **A Safer Halton** – none.

6.5 **Halton's Urban Renewal** – none.

7.0 EQUALITY AND DIVERSITY ISSUES

7.1 None.

8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

8.1 There are no background papers under the meaning of the Act.

REPORT TO: Employment, Learning and Skills Policy and Performance Board

DATE: 14 January 2009

REPORTING OFFICER: Chief Executive

SUBJECT: Specialist Strategic Partnership Minutes

WARD(s): Boroughwide

1.0 PURPOSE OF REPORT

1.1 The Minutes of the Employment, Learning and Skills Specialist Strategic Partnership are attached at Appendix 1 for information.

2.0 RECOMMENDATION: That the Minutes be noted.

3.0 POLICY IMPLICATIONS

3.1 None.

4.0 OTHER IMPLICATIONS

4.1 None.

5.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

5.1 Children and Young People in Halton

None.

5.2 Employment, Learning and Skills in Halton

For consideration by the PPB.

5.3 A Healthy Halton

None.

5.4 A Safer Halton

None.

5.5 Halton's Urban Renewal

None.

6.0 RISK ANALYSIS

6.1 None.

7.0 EQUALITY AND DIVERSITY ISSUES

7.1 None.

8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

8.1 There are no background papers under the meaning of the Act.

Employment, Learning & Skills SSP

Minutes of Executive Group Meeting 27 November 2008

9.30 am, Jobcentre Plus, Runcorn

Present:

Mark Wilson
 Gary Collins
 Gerry Fitzpatrick
 Andy Guile
 Neil Maguire
 Jane Trevor
 Mark Grady
 Diane Sproson
 Cath Sharples
 Eleanor Carter
 Andrew Pannell
 Maria Salcedo
 Claire Bradbury
 Jean Morris

Organisation:

Jobcentre Plus
 Economic Regeneration (HBC)
 Enterprise & Employment (HBC)
 Halton Voluntary Action
 LSC
 Jobcentre Plus
 HBC Policy & Partnership
 Connexions
 Jobcentre Plus
 External Funding (HBC)
 HBC Planning
 Amion
 YMCA
 Procurement (HBC)

1. Welcome/Apologies

- 1.1 Mark Wilson welcomed everyone to the meeting The Group provided introductions. MW apologised that he would only be able to chair the meeting until 12.15 pm with Gary Collins assuming the Chair for the rest of the meeting.
- 1.2 Apologies had been received from:
- | | |
|-------------------|-------------------------------|
| Kevin Mothersdale | LSCGM |
| Lyn Rhodes | Riverside College |
| Siobhan Saunders | Adult Learning & Skills (HBC) |
| Colin Billingsley | Jobcentre Plus |
| Cheri Kelly | Jobcentre Plus |

2. Previous Minutes & Matters Arising

- 2.1 The previous Minutes were reviewed and the Group agreed on their accuracy. Matters arising were:
- 7.3: Benefits bus – JT informed that she now has a couple of projected dates to take this forward. MW felt it important that this is an appropriate gateway for pre-recruitment This has also been picked up by the Health SSP.
- 7.8: WNF Commissioning pot – next steps: GC will email MW his views on best way of bringing the core funding and commissioning pot together into one clear programme.
- 10 : Engagement Strategy – Skills Sub-Group pulling this together with the appointment of Marie Hoyles as Strategic Skills Officer.
- 12.1: DAF (Deprived Areas Funding) - The final paperwork has been signed off and GC will ask for invoices to be sent in.

3. Local Employment Issues Section 106

- 3.1 Andrew Pannell (HBC Division Manager Planning & Policy) explained the meaning of 106 Agreements (of the Town and Country Planning Act). It covers both planning agreements (as part of planning permission) and unilateral arrangements and is intended to make a proposed development acceptable by means of community benefits, local employment & training strategies, open spaces etc., that would otherwise be unacceptable in planning terms
- 3.2 MW provided an example of S106 being used in the Tesco and Debenhams developments in Warrington where permission was only granted with agreement that a number of jobs would be available, although not necessarily guaranteed. Working in partnership with Debenhams, who designed the pre-recruitment training and offered interviews to candidates with a range of needs, JCP ran a series of recruitment programmes.
- 3.3 Andrew Pannell felt that Halton should take a consistent and universal approach where developers were informed of what would be required of them. It is recognised that S106 works best with partnership working starting with regeneration officers and those responsible for planning the different streams for Halton.
- 3.4 GC queried whether a quick framework for sector specific local training places could be established with the legalities following on and how funding could be injected. It was felt that maybe a filtering document could be issued which has several criteria.
- 3.5 NM informed that LSC have a routeway programme for pre-employment. The Halton Investors' Handbook was launched at the recent Skills Sub-Group meeting.
- 3.6 AG suggested specific advertising of jobs according to type and on a voluntary basis and that at LSP level all partners could sign up to this. Jean Morris informed that contractors would need to be advised how scoring took place when the tender packs were issued.
- 3.7 MW emphasised the importance for Halton, especially LSOAs. GC enquired whether any unallocated WNF could be used
- Action:** MW and GC to reflect on the best way to formulate this, looking at putting into place a cross-cutting piece of work with an approach to the LSP board by correspondence.

HBC Procurement

- 3.8 Jean Morris (Head of Procurement) informed the Group that there is currently a lot of focus on working with other Merseyside authorities since within Halton there is no central procurement unit. The team is working on setting standards for documents and have created a website to advise contract opportunities.
- 3.9 MW suggested a further meeting with JM to review forthcoming contracts from which it may be possible to invite local providers with brokerage arrangements to deliver a project. JM felt it would be necessary to look at standing orders with a need to be proactive. Review of the procurement strategy for the next 3 years has now commenced.

Construction Employment Integrator Project

- 4.0 Maria Salcedo of Amion Consulting provided a background to Amion, the core functions of the CEI and outlined the project. A briefing paper was circulated.
- 4.1 A question and answer session followed:
- AG queried whether the model had been tried outside the construction industry. MS replied that it had not been but felt it could be applied.
 - It was suggested that it might be possible for Wirral to champion the model on behalf of the City Employment Strategy and whether the NWDA would be interested in this type of approach.

- DS explained that for Connexions success would be turning poor quality candidates into good candidates and how you could go about it. Training programmes are available but there is a mismatch between the candidates' ability and their moving into industry.
- From an LSC perspective it would seem that construction is the natural sector to pick with jobs ranging from the actual construction to end use.
- GC said he didn't see much difference between the model and other construction initiatives.
- MW cautioned that previous house building initiatives had worked in a small way but looking at scale the numbers of local people into local jobs had not been realised. However, Halton does have a range of opportunities most of which will happen, such as the Bridge, Widnes Waterfront and within a 2-year span there are enough projects to consider how to proceed providing a model has been put in place.
Action: NM to speak to SS/Skills Group to prepare a proposal to bring back to the Group recommending how Halton can adapt the model, real cost/funding implications, integration with HEP approach, inclusivity, etc.

5. Credit Crunch/Redundancies

- 5.1 MW has written to David Parr and other colleagues setting out JCP's perspective on redundancies and action to be taken. There has been a doubling of the Regional Redundancy Fund. He felt it important that local partners have a joint approach. JT to discuss with everyone to make sure have quick response in place. GF commented that in Halton there are a high number of SMEs (up to 250 employees) and any scheme will need to be able to support these. LSC have an early response model and together with JCP/NWDA have put together a regional redundancy blue print. GC felt the main issue is to keep individuals motivated with the focus on making a good transition and 'holding on' to the individual. It is a real challenge for the LSP.
AG felt that there will be lessons to be learned for the Group over the next few years and it would be timely to review action plans.
JCP will be contacting everyone re the letter sent out including the letter sent to MPs. If anyone has not received this they should contact JT for a copy.
- 5.2 MW outlined presentations and discussions for care leavers at the last LSP meeting. This year there seems to be no funding for care leavers. MW stated he needs to be involved in discussions regarding care leavers. In the subsequent discussion:
- MW promised to try and make more placements with appropriate individuals and providers.
 - GC queried the lack of funding for the care leavers employment work as he understood £65,000 of WNF had been allocated from the CYP SSP.
 - DS informed that Connexions are learning lessons and there is real work to be done. A report showing Connexions data will be brought to the next meeting.
Action: DS
 - NM felt a potential solution would be for an employer pool to provide placements on a short term basis (as was a previous Merseyside project). Now out to tender. Must have a link either as a sector or group of bodies.
 - The Commissioning pot plan has £120,000 for wages to cover the first year cost of employing a care leaver. However, this was based on there being a dedicated employment officer to support the care leavers and their supervisors. With no progress made on appointing such a post (it was to be funded as part of the care leavers employment project mentioned above), this brings into question the waged scheme.

- CB suggested links with V... (Vocational & Community Sector Learning and Skills Consortium). If care leaver jobs are to be increased then more funding will need to be made available.

6. Budget

6.1 GC outlined the revised Financial Plan as regards particular proposals. He advised that it is necessary to ensure that all SLAs are in place.

- Apprenticeships : Gerry Fitzpatrick
- Pre L2 : Siobhan Saunders
- Foundation Learning: Riverside College
- NEET : Allocated to NEET Strategy Group
- Employability : Siobhan Saunders
- NEO : Gerry Fitzpatrick
- Moped : Transport (David Hall)
- Inward Support : Gerry Fitzpatrick
- Enterprise : Gerry Fitzpatrick

6.2 DAF is now resolved with the small balance to meet the costs of the New Start Centre.

7. Riverside College

7.1 JW and JT to meet on 15 December to progress the Pre-Recruitment Programme and Foundation Training and agree on how the programme is to be implemented.

7.2 **Action: College to produce an SLA within the deadline.**

8. Sub-Group Reports

- GF informed that there had been 112 new business start-ups since the project started, creating 79 jobs. New businesses now receive a £500 start-up grant.
- GC reported that from NWDA meetings, it looks as though Merseyside local authorities are to be used to promote/deliver the NWDA business start-up programmes. The Halton figure is c180k per annum probably for the next 3 years although this money can only be used for start-up advice and priority customers. (NWDA works on approx. 2.5k per start-up). There are a number of issues yet to be resolved and it is planned to take a report to the Enterprise Board.

9. LSP Update Reports

9.1 MG outlined the reports circulated with the agenda and the following was noted:

- Sustainable Community Strategy mid-term review – this is updating the original Strategy to ensure it remains relevant through to 2011. The update document will include the LAA indicators. MG stated that support in updating the ELS indicators, as well as the SSP's version for 2025 would be welcome.
- LAA Review and Refresh – the report highlighted the timetable for the review and refresh through to March. MD noted that action plans on each indicator for Halton were submitted to Government Office earlier this week and feedback has yet to be received.

10. Any Other Business

10.1 There was no other business.

11. Date and Time of next meeting

11.1 Date: Thursday 15 January 2009
Time: 9.30 am
Venue: To be confirmed.

Working Neighbourhoods Fund

ELS SSP Core 2008-09

Skills for life assessor

The Skills for Life project will continue to bring together the organisations supporting and delivering Skills for Life learning provision in Halton to work collaboratively to provide initial and diagnostic assessment for a range of individuals e.g. employed and unemployed people, parents and carers etc to establish their starting point. This will support the decision making process when advising and guiding learners to the most appropriate learning provision.

YMCA Skills for Life project worker

Halton YMCA is an accredited Foyer and Provider of accommodation and Training. We work with the most disadvantaged residents of Halton, many having a number of barriers which can reduce their ability to moving on (including alcohol and drug abuse.) If these barriers are ignored, this may in turn affect the ability to sustain employment. 70% of our residents have a basic skills need. Working with Basic Skills Agency online material we will utilise our IT Centre and deliver our "Everyone can learn to Learn" Skills for life programme, which involves creative media and art, together with basic skills. One worker will be attributed to this Project.

YMCA lone parents IAG

We aim to take four Information Officers out into the Community within the deprived wards and deliver Information in regard to In Work benefit Calculations and Tax credit information in partnership with CAB and JCP. We will take ex claimants from these circumstances and train them to engage the very communities which they understand, learning from their own experiences.

Business Survey

Survey of local businesses skills issues and needs. Next survey 2009/10

Childcare

The project would be two part-time childcare courses, each incorporating 2 two-hour sessions of contact time each week for 32 weeks. Costings are initially for 2 groups of 15 students. In addition, learners would be expected to fulfil work placement requirements of 40 days for full achievement of the qualification. The teaching will take place in the Kingsway Learning Centre and will be delivered by HNC's Adult Learning and Skills Development Team. Childcare for adults attending the course will be offered as part of this project. Participants will also complete a basic paediatric first aid certificate and receive safeguarding training as part of the course. The course is accredited by the Council for Award in Children's Care and Education at level 2. The project will support Halton's Children's Workforce Strategy and will attempt to address the skills shortages within the childcare sector. Whilst full time qualifications are available in Halton, those adults who attend Family Learning courses at Level 1 on a part-time basis find it difficult to make the transition to full time study. However, there are currently no part time level 2 qualification courses and this project would attempt to fill this gap.

Halton Family Groups

The project aims to foster a culture of learning which is valued and raises skill levels through the adult population within Halton.

Originally run through Halton Family Groups and have now become an independent NCH project working in partnership with Halton Children's Centres.

The project is run by NCH, and offers local people within Halton the opportunity to complete an NVQ 2 in Children's Care Learning and Development, which is run through NCH learning Centre, and accredited by City and Guilds.

To be able to access this opportunity each candidate is inducted through NCH as a volunteer, this involves an application form and completing a CRB check. Through the safer care policy they will then be supported through their award by NCH.

Each candidate will then be inducted and registered onto the NVQ Programme, if the candidate already has a placement i.e. runs their own group, volunteers in a school, children's Centre then this can be used as their placement and this is where they will be assessed. If not a placement will be sort for the candidate.

Each candidate will need to be volunteering in the placement for min of 3 hours per week (L2) 8hpw (L3).

The candidates will receive access to workshops and regular meetings which are arranged to guide them through their award with their Assessor, they will also be able to access NCH training and Early Years training.

The Level 2 award is made up of 6 core units and one optional unit.

The Level 3 award is made up of 5 core units and 4 optional units.

Each unit is carefully planned with the candidate and the assessor, so that the candidate knows exactly what they need to do and can take ownership of their award.

The candidate has to show competency in skills and knowledge base within each unit (national standards). There is a variety of ways a candidate can provide evidence for this, although most of the evidence will be from their assessor observing their work within their placement.

The duration of the award is up to the candidate's and how quickly they can work with their assessor to show their competency at the correct level. But they will have a maximum of 2 years to complete a level 2.

Most candidates complete their award between 10 - 16 months again depending on quick turnover of evidence for their portfolio.

Candidates are certificated for individual Units and gain an over all certificate on completion.

Enterprise Development

The Community Strategy for Halton has identified that the following outcomes to be achieved by 2011 will contribute to supporting the key priority of fostering a culture of enterprise and entrepreneurship in the borough:

- Increase rate of self-employment by 20%
- Increase number of VAT registrations by 15%

The ELS SSP has developed the 'Connections, Connectivity and Communications : Enterprise Strategy and Action Plan' that sets out the steps that need to be taken to develop a thriving enterprise culture. The vision is that across Halton:

“Anybody with talent, potential and drive to succeed in business should have the opportunity and necessary support to do so, regardless of their background or where they live”.

The Enterprising Halton programme will be responsible for co-ordinating enterprise related activity across the borough and will provide an Enterprise Outreach and Coaching service to residents that are workless and/or unemployed who live in one of the 7 priority wards or are a member of the priority groups identified in the LAA. The Enterprise coaches will also offer ongoing advice and business support to new start-ups that have been assisted by the programme.

The Enterprising Halton programme targets for 2008/9 are:

- 220 new business enquiries
- 55 new start-ups
- 10 new VAT registrations
- 3 social enterprises created or expanded

Halton People into Jobs

Halton People into Jobs and HBC's Employment Team deliver a range of services from two separate sites. In 2008/2009 a proposed restructure will take place within the Enterprise & Employment Division, which includes the merger of the two services to provide a more streamline service to residents from the priority wards and priority customer groups.

The merge will require relocating up to 10 staff from the Heath to Rutland House. Full training for staff will be required to enable a more co-ordinated approach when targeting priority group customers offering a menu of work focused interventions via a range of activities delivered in Halton with particular focus on DAF wards, where there are high concentrations of people in receipt of working age benefits (JSA, IB, IS, DLA, etc)

What will be done: The service will tackle economic inactivity and workless ness by coordinating and integrating a range of employability and capacity building interventions offered by HPIJ and partner organisations such as JCP, Connexions, Adult Learning Team, Shaw Trust, Link Up etc. Access to MATRIX accredited Information, Advice and Guidance (IAG) from which an assessment of the individuals' need will be done in relation to employment support and a progression route developed. Individuals' can access direct support from HPIJ (Employment Charter, Halton Inspiring Women, Job Brokering, 121 IAG, In work Support and financial support), along with referrals and signposting to other suitable provision to help them on their progression route.

How will this be done: By working in partnership with internal/external organisations such as JCP, Link Up, Shaw Trust, Connexions, HBC's Adult Learning and Employment Teams. Individuals will be assisted in progressing towards work through being supported with: (not exhaustive) basic skills, confidence building, work experience placements, application and interview skills, job matching to local jobs and in work support.

Who will do this: Delivered directly by Job Brokers qualified to NVQ level and experienced in providing IAG in relation to employment and employability skills. Supported by two level 4 team leaders. The quality of IAG is quality assured via MATRIX (May 2007). Partners will include (not exhaustive): JCP, Shaw Trust, Connexions, Link Up, Adult Learning, Welfare Rights, Children's Centres, Crosby Training, A4E.

HPIJ partnership

The Partnership is an enhancement and improvement of existing work delivered by Halton People Into Jobs (HPIJ). The HPIJ team will re-focus activity to integrate with a wider approach that sees all ELSSP members and many from other SSP's in our LAA, work together to ensure that Halton residents in priority groups/wards are better able to compete for job and training opportunities over the next three years.

Led by HPIJ with close involvement of Jobcentre Plus and the ELSSP Skills Group, the Partnership will offer a total support package to priority customers, both those seeking work & training, and Employers. The Partnership will in effect offer help at all stages of a typical customer journey :

The existing HPIJ team will be refocused on an intensive programme of customer and employer engagement. Concentrating on the 7 priority Wards the team will increase outreach in the local community, agree a big increase in the number of local venues for training & pre recruitment across Halton, carry out a wide range of communication activities and gradually build a live database of customers agreeing to take part in skills and pre recruitment programmes.

For Employers the team will increase contacts and launch an awareness campaign throughout Halton & wider afield as agreed by the Partnership i.e. OMEGA - promoting the Pre Recruitment Partnership. The new design service will work directly with employers to tailor pre recruitment provision to company need and importantly identify and develop company specific training programmes for available vacancies. Overtime this will result in a business focused set of training programmes applicable to key sectors within Halton.

Supported Employment

Halton ILM

The project is aimed at improving the employability of local priority residents who are unemployed by placing individuals within high quality work experience placements coupled with job focused training. It will enhance the existing portfolio of LSC and other programmes by providing a period of 'paid' employment. Economic Regeneration's Enterprise & Employment Team will manage the project.

An Employment Officer will source work placements for ILM workers with local employers; arrange for any job focussed training that may be required; and will monitor and evaluate the programme. Prior to commencement the ILM, workers will undertake a 4 day Induction that will include Health & Safety, Manual Handling and First Aid. ILM workers will be paid minimum wage i.e. £3.40 p.h. at 16/17 year olds, £4.60 at 18 – 21 years old and £5.52 p.h. at 22 years plus, for up to 35 hours per week, and will initially be offered a paid work placement of upto 13 weeks, but on average 6-8 weeks. The work placement will also include weekly jobsearch. Weekly extensions to the paid placement will be agreed by the Employment Team Manager if the extension will lead to full time employment.

ILM Wages will be administered and paid, via an existing contract, by Jarvis Training Management Limited. If the ILM Worker has not found a job towards the end of their placement, they will be given the opportunity to opt to undertake the two-week Halton People into Jobs 'Employment Charter' training programme which will better prepare them for seeking permanent employment. Following the 'Charter' training course HPIJ Job Brokers will support individuals with progression into employment.

Employment Outreach

What will be done: This will be a HPIJ led partnership approach to provide access to a menu of work focused interventions via a variety of Outreach activity delivered from within the DAF wards, where there

are high concentrations of people in receipt of benefits (JSA,IB,IS, DLA, etc). The service will tackle economic inactivity and worklessness by coordinating and integrating a range of employability and capacity building interventions offered by HPIJ and partner organisations such as JCP, Connexions, Adult Learning Team, Employment Team, Shaw Trust, Link Up etc.

The service will provide access to MATRIX accredited Information, Advice and Guidance (IAG) from which an assessment of the individual's needs in relation to employment support will be done and a progression route developed. From this the individual can access direct support from HPIJ (Employment Charter, Job Brokering, 121 IAG, In work Support and financial support), along with referrals and signposting to other suitable provision to help them on their progression route.

How will this be done: By working in partnership with internal and external organisations such as JCP, Link Up, Shaw Trust, Connexions, HBC's Adult Learning and Employment Teams. Community engagement events at accessible locations within the DAF wards (Such as Community Centres, Children's centres, Community Houses, Places of Interest), 121 surgeries (such as Jobcentre Plus Offices, Halton Direct Links, Drs Surgeries) and promotional activity within the wards will be organised by HPIJ, in addition to HPIJ attending other community partnership events arranged by Neighbourhood Management and Community Development teams. Individuals will be assisted in progressing towards work through being supported with : (not exhaustive) basic skills, confidence building, work experience placements, application and interview skills, job matching to local jobs via HPIJ Job Brokering service, in work support.

Who will do this: Delivered directly by HPIJ Job Brokers with a level 3 (or equivalent) qualification, with experience of providing Information, Advice and Guidance in relation to employment and employability skills. Supported by two level 4 team leaders. The quality of IAG is quality assured via MATRIX (May 2007). Partners will include (not exhaustive): JCP Shaw Trust, Connexions, Link Up, Adult Learning Team, Welfare Rights, Children's Centres, Crosby Training, A4E.

Inspiring Women

The service will provide activities and services in relation to employment, learning, skills and enterprise support direct to Halton residents with particular focus on the DAF wards (as above), with particular focus on disadvantaged or excluded groups within those wards. These include: Lone Parents/Women returnees or people with a caring responsibility, residents 50 years and over, residents 16-19, in particular NEETS, people with a disability/health condition or in receipt of Incapacity Benefit, members of BME communities, Ex Offenders, alcohol & drug mis-users, homeless people and Low Income Families.

Benefits Express

The Benefit Express is a mobile office that can tour the borough.

From this office a variety of information and services can be obtained most notably Housing Benefit & Council Tax Benefit Advice, Welfare Rights and Money Advice. In addition through partnership working information on a whole range of council services is available. Other organisations such as Social Landlords, Employment Services and the voluntary sector are also providing services from the mobile office.

Officers by the use of 3G technology are able to process claims on-line from both the Benefit Express and the claimants home provided all the necessary information and supporting information to process the claim is available. This mobile working has been well received throughout the life of the project as the claimant obtains a decision regarding their claim for Housing and Council Tax Benefit immediately.

Budgeting Skills

The project, through its targeted action, will improve the budgeting skills of Credit Union members and raise awareness as to which debts should be regarded as a priority.

The Budgeting Skills Officer (BSO) will assess an individual's current liabilities in terms of debts and expected living expenses. The officer will determine a weekly/monthly amount the consumer would need in order to meet such commitments. The BSO will educate members on a one-to-one basis in relation to financial matters e.g. how to manage a budget, how to make sound economic choices when shopping and how to manage money properly. The officer will also provide basic advice on the rights members have in relation to credit agreements they already have. The BSO is able to assess debt problems, identify where specialist advice is required and put members in touch with specialist advice when needed.

The BSO will work with social landlords to promote the Credit Union to new tenants.

The BSO will identify any trends in the type of high cost credit being used and will liaise with the Illegal Money Lending Team as appropriate.

Sources of advice on energy efficiency (providing hints and tips on how to reduce energy bills) and the availability of grants for energy efficiency improvements will be promoted during one-to-one sessions along with details of local transport schemes. Information relating to household and car insurance will also be supplied to members.

Where appropriate the BSO will liaise with United Utilities and British Gas on behalf of members who are in arrears with these companies in an attempt to access their Trust Funds and arrange for the arrears to be written off. The existence of any winter rebate or other discount schemes will be promoted to members.

The Consumer Protection Service will identify consumers who would potentially benefit from the services of the Credit Union. With the permission of the consumer their details will be passed to the BSO who will be responsible for making contact with the consumer and explaining the benefits of belonging to a credit union.

CAB

The project has TWO key aims;

Aim 1: To tackle workless-ness through the provision of independent advice and practical support.

How will we do this;

Halton CAB is the only "not for profit organisation" in the borough that has a "Specialist Quality Mark" in both Debt advice and Welfare Benefits advice. This means that the service we provide is comparable to that of a firm of solicitors.

Because of the sheer demand for our advice service we have developed a unique "online referral system" which allows partner agencies who are dealing with vulnerable clients to fast-track people into

our advice service, especially our debt and needs advice and whether they actually get it.

This system now allows us to monitor who

The Debt advice process is fairly simple;

- We will help people prioritise their debts so that they do not face eviction, disconnection or even imprisonment.
- Then we look to see if we can maximise the debtors income by checking their entitlement to benefits, their tax codes, etc.
- Next we will debtors draw up a realistic household budget that allows them to keep on tops of their bills and pay for essential items like food, cleaning, etc.
- Finally we will them negotiate a repayment schedule with their creditors at a rate that is realistic and one which they can afford.

AIM 2: To encourage volunteering and providing a non-academic gateway to learning new skills and improving job prospects (in the last two years seventeen volunteers recruited, fourteen gained qualifications, seven found paid employment)

How will we do this;

Halton CAB has a very good recognition profile within the borough and there is quite a lot of interest from the public in joining our team. We offer two types of training; an 8 week course in how to be an Information Officer and a 16 week course in becoming a legal adviser. The latter course is certificated. We also provide all volunteers with ongoing training and support and we help them devise a personal development plan to maximise their employment prospects.

Voluntary Sector

Castlefields

This programme will bring together in a coordinated way for the first time in Halton in one specific geographic location - Halton Borough Council, Learning and Skills Council, Neighbourhood Management, Jobcentre Plus, RSLs (CDS), Health sector (local doctors) and the voluntary sector (YMCA proposed). It will particularly seek to engage and help people with ill health through the local surgery ('job doctor' – one meeting already held with doctors) and also through local tenants groups facilitated by CDS. This programme is overwhelming about delivering provision and only one extra member of staff will be employed to work in the locality to ensure maximum mainstream delivery and localised implementation of this programme.

The central activity of this project is to engage people who would not otherwise be looking for work. This will be done through outreach campaigns (such as the recent one that resulted in 21 new contacts), referrals from the voluntary sector (particularly YMCA), existing adult learning courses, RSL's and also the local doctors surgery. Ultimately the aim is to launch an 'introduce a friend' programme for people who have benefited.

The programme will create additional learning and employability opportunities. Development of local brand linked to major rebuilding programmes will increase awareness and encourage participation. The following links to other services and activities will be maximised:

- Employment and Enterprise – managing delivery
- Adult learning – delivering basic skills outreach and then connecting with progression to Riverside College
- Physical regeneration of Castlefields – Major Projects, RSLs – identification of placements
- Jobcentre plus – direct progression to programmes if eligible
- Neighbourhood Management – Working with neighbourhood manager to identify potential clients and to link placements into NM programme of activity. Provision of progress data to local board.

CES contribution

No longer required

Pre level 2 provision and Adult learners event

For the employability skills element of the project delivered by the Adult Learning & Skills Development Division residents living in the above listed local priority wards and who fall into one of the five priority groups will be targeted initially:

- People who are unemployed
- Lone parents
- Aged 16-19 NEET
- People aged 50+
- People with a disability or claiming incapacity benefit

Halton YMCA Learning Power award will be delivered for the benefit of disadvantaged residents of the Grange Ward aged 19+ who are all below level two qualified or with significant barriers to learning and achieving (mental health issues, alcohol abuse, drug abuse, homeless, offending etc.)

The Adult Learners Celebration event will recognise borough-wide learners achievements and progress in learning.

REPORT TO: Employment Learning and Skills Policy and Performance Board

DATE: 14^h January 2009

REPORTING OFFICER: Strategic Director, Environment

SUBJECT: Employment Learning and Skills Policy and Performance Board Work Programme 2009/10

WARDS: Boroughwide

1.0 PURPOSE OF THE REPORT

- 1.1 This report is the first step in developing a work programme of Topics for the Board to examine in 2009/10. While the Board ultimately determines its own Topics, suggestions for Topics to be considered may also come from a variety of other sources in addition to Members of the Board themselves, including members of the Council's Executive, other non-Executive Members, officers, the public, partner and other organisations, performance data and inspections.
- 1.2 The key tasks for Board Members are:
- to suggest and gather Topic ideas on issues relevant to the Board's remit:
 - to develop and prioritise a shortlist of possible Topics for examination, bearing in mind the Council's agreed selection criteria (Annex 1):

2.0 RECOMMENDATION: That the Employment Learning and Skills Policy and Performance Board

- (1) Put forward and debate its initial suggestions for Topics to be included in the Board's 2009/10 work programme
- (2) Develop and informally consult on a shortlist of its own and others' 2009/10 Topic suggestions ahead of the Board's meeting on March 9th, bearing in mind the Council's Topic selection criteria

3.0 SUPPORTING INFORMATION

- 3.1 Given that detailed scrutiny cannot be carried out on everything, Members are asked to target attention on a specific number of areas. The recommendation of the Chief Scrutiny Advisor is that good practice based on experience suggests that 2/3 Topics is manageable. Following their adoption by this Board these are then to be worked up as detailed topic briefs and agreed with the Chair of the PPB in conjunction with the

lead officer for this Board. The Council's Chief Scrutiny Advisor further suggests that this action is considered now so that an early start can be made on the scrutiny work.

3.2 In considering which are good topics to include in the work programme Members will need to keep in mind the Overview and Scrutiny Guide/Toolkit. Guidance on Topic Selection is attached as an aide-memoire. In particular the Board's attention is drawn to paragraphs 12, 13 and 14 which relate to added value, capacity and resources.

3.3 It has been suggested by the Strategic Director Environment, that the following might be appropriate issues to review at this time:

- A joint group with Urban Renewal PPB on Jobs and Skills for the Science and Technology sector.

4.0 POLICY IMPLICATIONS

4.1 The Corporate Plan identifies key objectives in relation to creation of a twenty first century business environment that can support high levels of business growth, to foster a culture of enterprise and entrepreneurship, to develop a learning culture and also to promote and increase employability. The Logistics Industry covers all these objectives and represents a substantial economic opportunity for the borough.

5.0 OTHER IMPLICATIONS

5.1 None at this stage

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

None at this stage

6.2 Employment, Learning and Skills in Halton

None at this stage

6.3 A Healthy Halton

None at this stage

6.4 A Safer Halton

None at this stage

6.5 Halton's Urban Renewal

None at this stage

7.0 RISK ANALYSIS

7.1 The most tangible risk that can be identified at this time is referred to in paragraph 3.2, namely ensuring there is capacity to undertake the review. By keeping the number to 2, this should be achievable.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 All topics finally selected will take into account equality and diversity implications.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
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None		
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Annex 1**OVERVIEW AND SCRUTINY WORK PROGRAMME****Topic Selection Checklist**

This checklist leads the user through a reasoning process to identify a) why a topic should be explored and b) whether it makes sense to examine it through the overview and scrutiny process. More “yeses” indicate a stronger case for selecting the Topic.

#	CRITERION	Yes/No
<i>Why? Evidence for why a topic should be explored and included in the work programme</i>		
1	Is the Topic directly aligned with and have significant implications for at least 1 of Halton's 5 strategic priorities & related objectives/PIs, and/or a key central government priority?	
2	Does the Topic address an identified need or issue?	
3	Is there a high level of public interest or concern about the Topic e.g. apparent from consultation, complaints or the local press	
4	Has the Topic been identified through performance monitoring e.g. PIs indicating an area of poor performance with scope for improvement?	
5	Has the Topic been raised as an issue requiring further examination through a review, inspection or assessment, or by the auditor?	
6	Is the Topic area likely to have a major impact on resources or be significantly affected by financial or other resource problems e.g. a pattern of major overspending or persisting staffing difficulties that could undermine performance?	
7	Has some recent development or change created a need to look at the Topic e.g. new government guidance/legislation, or new research findings?	
8	Would there be significant risks to the organisation and the community as a result of <u>not</u> examining this topic?	
3.0		
3.1 <u>Whether?</u> Reasons affecting whether it makes sense to examine an identified topic		
9	Scope for impact - Is the Topic something the Council can actually influence, directly or via its partners? Can we make a difference?	
10	Outcomes – Are there clear improvement outcomes (not specific answers) in mind from examining the Topic and are they likely to be achievable?	
11	Cost: benefit - are the benefits of working on the Topic likely to outweigh the costs, making investment of time & effort worthwhile?	
12	Are PPBs the best way to add value in this Topic area? Can they make a distinctive contribution?	

13	Does the organisation have the capacity to progress this Topic? (e.g. is it related to other review or work peaks that would place an unacceptable load on a particular officer or team?)	
14	Can PPBs contribute meaningfully given the time available?	

REPORT TO: Employment Learning and Skills PPB

DATE: 14 January 2009

REPORTING OFFICER: Strategic Director, Health & Community

SUBJECT: Free Swimming

WARDS: All

1.0 PURPOSE OF THE REPORT

1.1 To set out the Governments Policy initiative to provide free swimming to all those aged 60 and over and to all those aged 16 and under for a two year period starting on 1st April 2009.

2.0 RECOMMENDATION: That

(1) The report be noted.

3.0 SUPPORTING INFORMATION

3.1 The Government launched a four strand policy initiative in the summer of 2008 to provide free swimming at Local Authority swimming pools. The initiative aims to improve participation, health, impact on childhood obesity and help meet the Governments commitment to get two million people more active by the time of the London Olympics.

3.2 Free swimming will be offered in Halton at: -

- a. Kingsway Leisure Centre
- b. Brookvale Recreation Centre
- c. Runcorn Swimming Pool

The four strands of the policy are: -

- 3.2.1 **Free swimming for those aged 60 and over.** Free swimming will be provided during periods of general public use, in line with the centres existing programme. Halton has been allocated an annual grant of £31,299 to cover costs.
- 3.2.2 **Free swimming for those aged 16 and under.** Free swimming will be provided during periods of general public use, in line with the centres existing programme. Halton has been allocated an annual grant of £76,200 to cover costs.
- 3.2.3 **Capital Reward Grant.** This grant is only available to those council's that signed up to deliver both free swimming programmes. The grant is calculated on a per capita basis from a total allocation of £10m. Halton has been awarded a grant of £36,218 that needs to be spent on a project that helps to improve participation in swimming.
- 3.2.4 **Capital modernisation programme.** An annual grant fund of £25m has been made available for two years, ending 31st March 2011. Sport England will administer this grant programme which is to be spent on

larger projects to improve swimming pools. Bidding for this money is on a competitive basis with approximately 300 authorities eligible to bid.

4.0 IMPLEMENTATION

- 4.1 The free swimming programme will start on the 1st April 2009. Those taking advantage of the free swimming offer shall be issued with a "scheme membership" card. This will be used to help manage the scheme and provide information on patterns of use across the Borough.
- 4.2 The Government had stipulated that free swimming will be provided at times that are already designated for general public swimming. This is designed to create minimum disruption to the operation of the pools. However if attendances increase alterations to the programme may need to be made to ensure minimum disruption to existing users and the maximum take up amongst the over 60's and 16's and unders.
- 4.3 The programme will be publicised closer to the implementation date in order to maximise take up. Authorities where the grant allocation exceeds costs are permitted to spend the surplus on other swimming initiatives or on swimming lessons.

5.0 POLICY IMPLICATIONS

- 5.1 A total of 300 authorities have signed up to offer free swimming to those aged 60 and over. While 296 authorities have also signed up to offer free swimming to those aged 16 and under. This National policy also implements the council's policies on health, equality and community safety.

6.0 OTHER IMPLICATIONS

- 6.1 The financial impact on the council will be neutral. If the growth in usage is higher than anticipated then DC Leisure Management Ltd will accept the risk involved, providing that the full grant allocation is paid to them. If the costs in running the programme are less than the grant allocation then the surplus will be spent on promoting swimming at the three participating centres.

7.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

7.1 Children and Young People in Halton

Develop continued participation in physical activity.

7.2 Employment, Learning and Skills in Halton

Increase participation in line with the Council's sports strategy and Governments objective to leave an "Olympic" legacy.

7.3 A Healthy Halton

Improve the health of the over 60's, combat childhood obesity levels.

7.4 A Safer Halton

Free junior swimming has been offered by the council during school holidays since 2001 to combat anti social behaviour. This programme will extend this measure.

7.5 Halton's Urban Renewal

None identified

8.0 RISK ANALYSIS

8.1 The risk that costs will exceed the grant available has been accepted by DC Leisure Management.

9.0 EQUALITY AND DIVERSITY ISSUES

9.1 The programme removes any financial barriers to participation on the basis of age. The council operates The Halton Leisure Card scheme that is designed to remove financial barriers to participation by offering half price admissions to groups facing financial hardship.

REPORT TO: Employment Learning and Skills Policy and Performance Board.

DATE: 14th January 2009.

REPORTING OFFICERS: Strategic Director Environment

SUBJECT: Child Poverty in Halton

1.0 PURPOSE OF REPORT:

1.1 To initiate the development of a child poverty action plan in the Borough

2.0 RECOMMENDATIONS:

2.1 **That the Employment Learning and Skills Policy and Performance Board note the progress made on child poverty and considers how more support can be given to help working households with children that live in poverty.**

3.0 SUPPORTING INFORMATION

3.1 In March 1999, the Prime Minister committed the government to end child poverty by 2020, and to halve it by 2010. There have been numerous announcements and initiatives since that time and in October 2007 the government announced PSA Delivery Agreement 9, ending child poverty.

3.2 Across Merseyside child poverty has recently been led by Knowsley MBC as part of the City Employment Strategy (CES). The latest CES thinking is to develop a child poverty strategy for Merseyside with each local authority area having its own action plan to meet local circumstances. Knowsley has already facilitated a series of workshops to examine the issues in each local authority area. The summary of strategy sessions is attached as an appendix to this report.

3.3 In Halton there have been some progress since 1999. These include the following:

- Some reduction in the numbers in poverty and some evidence that we are narrowing the gap between ourselves and comparator authorities;

- The development of our local economy through the regeneration strategy;
- An increase in the supply of child-care;
- Progress in partnership working impacting upon strategy design and the delivery of services;
- Significant improvements in educational outcomes although not enough evidence yet to show a narrowing of the gap in disadvantaged areas;
- Some success in helping people move of workless benefits and into employment.

3.4 The following table uses statistics from the national child poverty toolkit to show how child poverty has changed in Halton since 1999.

	1999		2008	
	Workless (known)	In work (estimated)	Workless (known)	In work (based on working tax data)
Children	10,000	10,220	6,810	6,650
Families	5,350	5,460	3,640	3,550

3.5 The data shows that whilst much has been achieved, there is still a considerable number of children living in poverty (as defined by households with less than 60% of the median income). To date much of the government activity has concentrated on worklessness households, but as the table demonstrates child poverty within working households is a major issue too. It is also important to note that helping a workless household into employment will not automatically mean children will come out of poverty if the job is a low pay job. As such, employment with progression is essential.

Halton has already signed up to a child poverty target within the new Local Area Agreement. The 2007 baseline was that 27% of children (in workless households only) lived in poverty and the target is to reduce this to 24.2 by the end of the LAA. This is a major challenge as nationally the reduction is rapidly slowing – in 2007 the reduction for Halton was only 0.4%. Also. The target will be subject to refresh as the method of calculation is to change to include both workless and in-work child poverty.

3.6 In terms of developing this work at CES and borough level the strategic priorities identified for securing improvements are:

- Reducing poverty through work
- Reducing poverty through raising incomes
- Tackling poor living conditions
- Focussing delivery on at-risk groups

- Engaging with users
- Establishing clear governance and accountability mechanisms.

3.7 Some of the key challenges identified locally are:

- The need to have an increased focus upon family-friendly policies and maximise the opportunities provided by children's centres;
- The transition from school to adulthood, with a particular focus upon vulnerable groups;
- The need to be explicit locally about in-work poverty, the scale of it and reasons behind it;
- Stronger evidence and data base

3.8 The next step is to support the development of a Merseyside Child Poverty Strategy. When this has advanced Halton will then need to develop its local action plan. Given that child poverty issues affect all partners on the LSP, it is proposed that the action plan be developed through that route. The first step would be to deliver a short presentation to the LSP Board.

4.0 POLICY IMPLICATIONS

4.1 The Community Strategy has a cross cutting improvement target for child poverty. This is to reduce the number of children living in income support eligible households to under 20%.

5.0 OTHER IMPLICATIONS

None

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

Tackling child poverty is a key priority for narrowing the gap in achievement for young people in the Borough and improving their outcomes enabling them to be health, be safe, to enjoy and achieve, make a positive contribution and achieve economic well being.

6.2 Employment, Learning and Skills in Halton

Tackling workless and the development of the local workforce to enable them to participate in the Regional Economic Strategy is key to address child poverty in the Borough.

6.3 A Healthy Halton

Health inequalities are experienced by the poorest and most vulnerable members of the community. Targeting reducing poverty will impact positively on reducing health inequalities.

6.4 A Safer Halton

Reducing inequality and poverty in families will contribute towards the improved well being of children. Poverty places pressures upon families. There is a correlation between referrals to Children in Need and super output areas.

6.5 Halton's Urban Renewal

As demonstrated by the statistics in paragraph 3.4, there are a large number of children in poverty where households are in employment. This is a significant issue in Halton where many jobs are low paid. As such, diversifying the economy and attracting higher value investment and higher paid jobs is very important. The work of Urban Renewal is central to this.

7.0 RISK ANALYSIS

7.1 The most significant challenge to Halton in relation to child poverty in working households would be to target them proactively. Whilst there is some high level data sharing that is available to enable this to take place, Jobcentre Plus will not share data due to Data Protection Issues. This is the subject of high level discussions relating to the Multi Area Agreement. As such, the biggest risk is that Jobcentre Plus will continue to resist sharing and make the task more challenging.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 Traditionally the emphasis on tackling child poverty has been to focus on the unemployed. This approach has excluded large numbers of children from support where there is a working household. As such, this move the look at working households is seeking to correct this exclusion.

REPORT TO: Employment, Learning and Skills PPB

DATE: 14 January 2009

REPORTING OFFICER: Strategic Director – Health & Community

SUBJECT: Mid Year Monitoring Report for Voluntary Sector Core Funding 2008/09

WARD(S) Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 To receive the Mid Year Monitoring Report for Voluntary Sector Core Funding.

2.0 **RECOMMENDATION: That:**

i) **the report be noted.**

3.0 **SUPPORTING INFORMATION**

3.1 The Council awarded Core Grants in for 2008/2009 to:

Cheshire Asbestos Victims Support	£13,300
Cheshire Racial Equality Council	£6,000
Cheshire Victim Support	£7,400
Halton Citizens Advice Bureaux	£139,000
Halton Talking Newspapers	£600
Halton Voluntary Action	£57,000
Rape and Sexual Abuse Centre	£3,200
Relate	£9,200
Runcorn & Frodsham Mencap	£2,400
Samaritans	£4,000
Vision Support	£8,200
Widnes & Runcorn Cancer Support Group	£11,848
Total	262,148

Organisations awarded over £5,000 are subject to a Service Level Agreement and provide quarterly monitoring. Those organisations who received under £5,000 provide 6 monthly figures.

3.2 Appendix 1 provides the monitoring data for the first six months of 2008/09 for the 12 organisations listed in 3.1.

3.3 At mid-year, all organisations are in line to meet expected targets and fulfil their Service Level Agreements.

3.4 The monitoring report will be available in the Members Rooms.

4.0 **POLICY IMPLICATIONS**

4.1 None at this stage.

5.0 **FINANCIAL IMPLICATIONS**

5.1 There are no financial implications at this stage.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

The service delivery from organisations receiving core grant in many cases is cross cutting in the context of the Council's strategic priorities. There is significant levels of welfare rights and debt handling support provided which impacts on anti-poverty issues for the Borough.

6.1 **Children & Young People in Halton**

The work delivered by Relate in preventing family breakdown and offering counselling to teenagers has a direct impact on those children and young people in the Borough.

The Youth Volunteer programme delivered by HVA (the V Project) is targeted at young people participating in their community.

The Samaritans is open to all age ranges and does receive calls from young people in the Borough looking for support.

Widnes & Runcorn Cancer Support group offer support to all members of families effected by the disease, encompassing young members of families.

6.2 **Employment, Learning & Skills in Halton**

The voluntary sector organisations have a significant reliance on volunteer time to deliver services. The organisations provide training opportunities for volunteers to enable the delivery of service and improve their skills and employability. The CAB in particular have experienced local volunteers gaining local employment as a result of the training and experience.

6.3 **A Healthy Halton**

Widnes & Runcorn Cancer Support have a major impact on the health and well being of our residents diagnosed and in remission from cancer through the support, advocacy and therapies they are able to offer.

Cheshire Asbestos works with sufferers and their families to support them through the illness, offering welfare support and recreational breaks for the sufferers and their families.

Vision support provide a resource centre for visually impaired and offer home visits and welfare rights support. The talking newspaper enables their clients to receive news on current affairs weekly/

6.4 A Safer Halton

Cheshire Victim Support provide support to victims of crime through to pre trial preparation and court attendances which can be daunting for residents left vulnerable from crimes against them.

Cheshire, Halton & Warrington Racial Equality Council work with minority groups in the Borough to contribute to a cohesive and integrated community in Halton. They offer support to individuals experiencing discrimination and will support in challenging discriminatory practice and will help people through tribunal processes.

The Rape & Sexual Abuse Centre provides support to the victims of crime. The Centre provides an assessment necessary for criminal proceedings and follow on support to the individuals.

Mencap provides a community meeting point for disabled members in Halton offering a safe environment for their clients to engage in community activity and participate in skill development and recreational activity.

6.5 Halton's Urban Renewal

None identified.

7.0 RISK ANALYSIS

7.1 None directly. The PPB, however, will monitor that the grant is being spent appropriately and the Council and Halton's residents receive value for money.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 To receive a grant, organisations have to demonstrate that acceptable equality and diversity policies and practices exist.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

None under the meaning of the Act.



Voluntary Sector Funding

Monitoring information for

April to September 2008

Mid Year Monitoring 2008/2009

Cheshire Asbestos Victims Support Group
3/5 Fryer Street, Runcorn Cheshire WA7 1ND
01928 576641

£13,300

Activity	6 monthly total	Yearly target
Counselling hours	675	No target
Welfare Rights obtained	£104,815.00	No target
Civil Claims DTER etc	£1,475,434.00	No target
Volunteer hours per year	856	No target
No of volunteers over the year	13	No target
Telephone enquiries	596	12,000
Personal visits to centre	85	300

HBC Priorities met by organisation

A Healthy Halton

A Safer Halton

Cheshire Halton & Warrington Racial Equality Council
2, Hunters Walk, Canal Street, Chester, CH1 4EB
01244 400730

£6,000

Activity	6 monthly total	Yearly target
Attend HIAP Exec & Provider meetings	2	No target
Hate Crime Panel	0	No target
Local Criminal Board Consultation & Sub Group	1	No target
Race issues multi agency group	0	No target
Cheshire Chief Executive Advisory Group on Gypsies & Travellers	1	No target
Casework	6	No target
Hours spent on casework	59	No target

HBC Priorities met by organisation

A Healthy Halton

A Safer Halton

Halton's Children & Young People

Employment, Learning & Skills in Halton

Cheshire Vision Support

Halton Independent Living Centre, Collier Street, Runcorn, WA7 1HB
01928 582944 (evening answer phone) £8,200

Activity	6 monthly total	Yearly target
Clients visits to Resource Centre inc family visit	491	600
Telephone enquiries from service users & their families	496	500
Other agencies visits to centre	341	No target
Other agencies telephone calls	373	No target
Home visits to new and existing service users	579	1,100
Welfare Rights inc. DLA and back pay	£8,315	£14,000

HBC Priorities met by organisation

A Healthy Halton

A Safer Halton

Employment, Learning & Skills in Halton

Halton District Citizens Advice Bureau

Unit 3, Victoria Building, Lugsdale Road, Widnes, WA8 6DJ
0151 257 2443 £139,000

Activity	6 monthly total	Yearly target
Number of unique users	2269	4032
Number of cases worked on	2926	4032+
Welfare Rights	£333,447.00	No target
Debt written off	£271,135.00	£1 million
Debt handled	£4,141,945.00	
Gains (employment)	£47,976	
Volunteer hours	4110	No target
Number of volunteers	27	
Telephone enquiries	828	3800
Letter/email/fax	2,500	No target
Home Visits	174	No target
Tribunals attended	23	No target
Court attendances	48	No target

HBC Priorities met by organisation

A Healthy Halton

A Safer Halton

Halton's Children & Young People

Employment, Learning & Skills in Halton

Halton Talking Newspaper
The Old Police Station, Mersey Road, Runcorn, WA7 1DF
(Mail contact- Mrs P Johnson, 2 Royden Ave, Runcorn WA7 4AL)
01928 588500 **£600**

Activity	6 monthly total
Numbers of individuals receiving recordings each week	171
Volunteers involved with the organisation	23
Weeks per year service is provided	26
Volunteer hours per year	604

HBC Priorities met by organisation
A Healthy Halton
A Safer Halton

Halton Voluntary Action
Sefton House, Public Hall Street, Runcorn WA7 1NG
01928 592405 **£57,000**

Activity	6 monthly total	Yearly target
Individuals - sessions attended - Training / Activities	12	No target
No of volunteer involved in HVA activities	2	No target
No of volunteer hours	162.5	No target
Telephone enquiries for info & advice	2543	No target
Newsletter distributed	1355	2800
Volunteers recruited (for placements)	253	100
Organisations receiving direct funding or group support	10	30

HBC Priorities met by organisation
A Healthy Halton
A Safer Halton
Halton's Children & Young People
Employment, Learning & Skills in Halton

Rape & Sexual Abuse Centre
26 Cairo Street Warrington WA1 1EH
01925 245 445/4 – 01706 347 330 £3,200

Activity	6 monthly total
Total calls to centre	430
Initial Assessments Runcorn & Widnes	42
Volunteers in service delivery	6
Counselling & Support hours	250

HBC Priorities met by organisation
A Healthy Halton
Employment, Learning & Skills in Halton

Runcorn Frodsham & District Mencap
The Acorn Club, Laburnam Grove, Runcorn, WA7 5EX
01928 722910 £2,400

Activity	6 monthly total
No of volunteers over 6 month	40
Volunteer hours per 6 month	1898

HBC Priorities met by organisation
A Healthy Halton
A Safer Halton
Employment, Learning & Skills in Halton

Samaritans
46 Arpley Street, Warrington, WA4 1LX
01925 235000 £4,000

Activity	6 monthly total
Counselling calls	6489
Counselling by email	224
Volunteer hours per year	4000
No of volunteers over the year	56
Personal visits to centre	5

HBC Priorities met by organisation
A Healthy Halton
A Safer Halton
Halton's Children & Young People
Employment, Learning & Skills in Halton

Widnes & Runcorn Cancer Support Group
21-23 Alforde Street, Widnes, Cheshire, WA8 7TR
0151 423 5730 **£11,848**

Activity	6 monthly total	Yearly target
Counselling hours	87	No target
Listening hours	705	No target
Information centre - patients	58	No target
Volunteer hours per year	1835	No target
No of volunteers over the year	55	No target
Information phone calls	57	No target
Listening phone calls	200	No target
HUGS club	498	719
Outreach group	72	
Busom buddies	193	
Therapies and workshops	272	

HBC Priorities met by organisation
A Healthy Halton
A Safer Halton
Halton's Children & Young People
Employment, Learning & Skills in Halton

REPORT TO:	Employment Learning & Skills Policy and Performance Board
DATE:	14 January 2009
REPORTING OFFICER:	Strategic Director – Health & Community
SUBJECT:	Community Development Annual Report 2007/08
WARD(S)	Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 To inform the board on the delivery of Community Development in 2007/08.

2.0 **RECOMMENDATION: That:**

- i) **The Board comment on service performance;**
- ii) **The Board consider future developments of service delivery**

3.0 **SUPPORTING INFORMATION**

3.1 The role of Community Development in building relationships with our communities and capacity to engage has evolved considerably in line with government policy. Most notably the Communities in Control White Paper.

3.2 The Community Development Team sits in Cultural & Leisure Services and is made up of four full-time posts and two part-time posts and a Senior Community Development Officer.

3.3 The team is located in neighbourhoods providing a key link to those communities in which they are based and a platform for Halton Borough Council services and partners on which to engage.

3.4 The team is also responsible for distributing Halton Borough Council starter grants, community development grants and voluntary youth development grants.

3.5 The team has a pivotal role in providing strategic support to external funding bringing additional funding streams to Halton. The Team supports groups accessing external funding leveraging considerable amounts into the borough directly supporting community activity.

4.0 **SERVICE DEVELOPMENT**

4.1 The Community Development team in 2007/08 provided direct support to 90

community organisations. This support enabled capacity building for groups to play a key role in delivery of 72 community led initiatives. 2,084 active volunteers have participated in supporting community groups, delivering initiatives and providing community events, an increase of 945 from the previous year.

- 4.2 Community Development Officers are active in developing and facilitating partnership approaches, during 2007/08 the team worked with 51 partner organisations on 265 projects/initiatives.
- 4.3 Supporting community groups to lever external funding into the Borough has become an increasing element of the Community Development Officers role. In 2007/08 we assisted local groups to access £524,635 from external streams and £8,370 from internal grant pots, a total of £533,005.
- 4.4 An evaluation of the service is undertaken annually to contribute to continuous improvement for the service. Due to problems with office service support the evaluation for 2007/08 was incomplete and we are unable to report on customer evaluation for this period.
- 4.5 We have undertaken a half yearly service user evaluation for the period 1st April 2008 to 30th September 2008. Seventy-eight groups who had used the service were invited to comment with fifty-four returning completed evaluation forms a response rate 69%. Key points from the evaluation are:-
 - All but one organisation are very satisfied with the service they have received.
 - Groups valued existing support and advice received from Community Development Officers high-lighting funding support and identified training and shared resources for further support.
 - Improved marketing was identified as a way to improve access to the service; a number of suggestions were made to facilitate this; attending 3rd Sector events; use of the Internet and newsletters etc.
 - Only one group was dissatisfied with advice given, this was followed up and the explanation was the group concerned hoped for easier access to funds for a play area and were disappointed to be advised they needed to apply for external funding and to secure maintenance revenue.
- 4.6 Community Development Officers provide periodic briefings to the Ward Members and have circulated Annual Reports for the 2007/08 period. Some high-lights of Community Development activity contributing to strategic priorities are detailed in 9.0.
- 4.7 Halton Community Development Practitioners Forum provides a leadership role and facilitates a cohesive approach to community development across all sectors in the borough. It provides a mechanism for networking, sharing of best practice and common issues. The forum meets quarterly, there are 26 local agencies represented. The meetings are well attended and valued by participants. In 2007/08 the forum provided a sub regional link to and played a leading role in raising awareness of and responding to the Central Government

initiative 'The Community Development Challenge'

4.8 Halton Community Engagement Network - In 2007/08 four workshops were organised to share learning experiences in public consultation and engagement in the Borough. Community Development Team and Research & Intelligence Section delivered the training sessions, providing practical support to staff from Halton Borough Council services and departments and partner organisations. The sessions were very well attended and will continue in 2008/09

4.9 During 2007/08 the Community Development Team carried two vacancies (one full-time, one part-time) and had one full-time member of the team on maternity leave. The team was only at full capacity for the final quarter, hence there are some dips in service delivery figures compared to the previous year however these are marginal variances.

5.0 **SERVICE DEVELOPMENT**

5.1 Community Development has a service level agreement with Neighbourhood Management to deliver focused community development support in the three pilot areas. The agreement has been for a two year period terminating on 31st March 2009.

5.2 There will be a reduction in focused support to neighbourhood management from 1st April 2009 however generic community development support will continue to be delivered in the three Neighbourhood Management Area's.

5.3 Intergenerational activity has become a key area of focus for community development, securing a service level agreement with Older Peoples services to support dedicated activity aimed at challenging the perceptions between young and old and provide community activity for joint participation.

5.4 Community Development has initiated a comic strip project involving young and old that will be published in the Weekly News and will facilitate the Older Peoples Empowerment Network Conference to support capacity building for the older people in the Borough.

5.5 The CPA Inspectors identified intergenerational activity as a key area of focus.

5.6 The Empowerment White Paper – 'Communities in Control' was published in July 2008. The paper provides a range of mechanisms to deliver empowerment with the constant theme of providing an environment whereby communities have more influence over decisions that impact on their communities and the services it receives.

5.7 Local Council's remain at the heart of local democracy with an emphasis on removing barriers that deter people from public office to encourage and strengthen the role of councillors.

- 5.8 All elements of the papers key recommendations have far reaching implications across the council and pivotal to these elements is how we engage and involve our communities in shaping services and further empowering the community sector.

The main issues are:-

- Duty to involve
- Duty to promote democracy
- Participatory budgeting
- Duty to respond to petitions
- Councillor call for action
- Overview and scrutiny
- Empowering the frontline task force
- Ownership and asset transfer
- Role of Councillors
- Policing and community empowerment
- Community panels
- Local Neighbourhood Charters
- Single equality duty
- Comprehensive Area Assessment

6.0 GRANTS

- 6.1 During 2007/08 grants were approved by members as follows:-

Community Development and Starter Grants

These grants are available for pump priming and the delivery of community led initiatives. In 2007 – 2008 the budget was £4,907 and 19 Grants have been awarded - **Total £4,907**

Ward	Group Name	Total Awarded
STARTER GRANTS		
Beechwood	9 th Runcorn Rainbows	£ 127
Castlefields	Cheeky Monkeys	£ 150
Castlefields	Friday Afternoon Club	£ 164
Halton View	Woodend Tenants Association	£ 150
Palace Fields	Crafty Crafters	£ 150
Riverside	Kingswood Forum	£ 150
Riverside	Halton User Group	£ 150
COMMUNITY DEVELOPMENT GRANTS		
Appleton	St Bede's Jubilee Group	£ 400
Borough Wide	Halton Foster Care Association	£ 400
Borough Wide	Widnes & District Horticultural Society	£ 400
Borough Wide	N.W. Cheshire & M'side Ostomy Support	£ 400
Castlefields	Castlefields Community Forum	£ 388
Ditton	St Michaels Residents Association	£ 311

Halton Brook	Four Estates Ltd.	£ 100
Mersey	Derby & Joan Club	£ 391
Palace Fields	Breath Easy	£ 350
Riverside	West Bank Community Forum	£ 236
Windmill Hill	Windmill Hill Residents Association	£ 90
Windmill Hill	Windmill Hill Residents Association	£ 400
	Total	£4,907

7.2 Voluntary Youth Organisations Grants and Bursaries for Young People

Voluntary youth grants are available to voluntary/community organisations who organise activities and initiatives for young people. The Bursaries are available to people between the ages of 13 – 18 pursuing personal development .

In 2007 – 2008 the budget was £12,226, 21 grants & bursaries have been awarded - **Total £ 12,226**

Wards Covered	Group Name	Total Awarded
GROUP AWARDS		
Borough Wide	Halton Access to Sport Organise camp for disabled YP	£ 900
Borough Wide	Halton Access to Media Develop Monthly Newsletter	£ 996
Borough Wide	Widnes & NW Cheshire Scouts Camp Scouting Centenary	£ 1,000
Borough Wide	Halton Speak Out Mystery Shopper Project	£ 1,000
Widnes Wards	Halton Hornets ARLFC Equipment for club house	£ 1,500
Widnes Wards	West Bank Bears JARLFC Equipment towards tour	£ 500
Widnes Wards	Athena JFC Junior kit & equipment	£ 700
Widnes Wards	8 th Widnes Scouts Group Purchase replacement tents	£ 450
Appleton & Farnworth	17 th St Lukes Brownies Replace activity equipment	£ 320
Ditton & Hough Green	5 th Widnes All Saints Guides Equipment for camp	£ 1,000
Halton Brook	Halton Brook Youth Group Trip to Brindley	£ 595
Kingsway	Kingsway Ten. & Res. Ass. Training for Bike Club vols.	£ 1,259
BURSARIES		
Beechwood	Camp for disabled young people	£ 50
Farnworth	Camp for disabled young people	£ 50
Farnworth	Dance School Expenses	£ 250
Farnworth	Dance School Expenses	£ 250
Hale	Shakespeare Youth Festival	£ 250

Halton View	Summer School RSC	£ 250
Heath	Compete in World Transplant Games	£ 250
Norton South	Piano Lessons & Exams	£ 406
Norton South	Piano Lessons & Expenses	£ 250
	Total	£12,226

7.3 In 2007/08 the Voluntary Youth Organisation grants supported 342 adults volunteers to provide activity, which benefited 1,413 young people.

8.0 POLICY IMPLICATIONS

8.1 None at this stage.

9.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

9.1 Children & Young People in Halton

- Halebank Youth Club & Hale Youth Club – capacity development to both voluntary management committees enabling them to develop funding action plans and to submit applications to the Big Lottery Fund and WREN.
- Windmill Hill and Sandymoor Voluntary Youth Groups – both groups are receiving capacity development to enable them to recruit volunteers to operate youth clubs in both of these wards. Windmill Hill has been supported in providing youth focussed events in their neighbourhoods including a visit to 'Go Ape' an activity centre providing a ropes course in Delamere Forest.

9.2 Employment, Learning & Skills in Halton

- Widnes Rugby League Heritage Society – capacity development which enabled them to establish a local collection and exhibition at the Stobart Stadium Halton and to become incorporated as a Community Interest Company.
- Murdishaw Community Centre Board of Directors – assisting with the development of taster sessions in digital photography, craft skills and dance.

9.3 A Healthy Halton

- Widnes & Runcorn Cancer Care Support – capacity development and funding support gaining £ 45,000 from the Morgan Foundation.
- Halton Autistic Family Group – support to develop autistic family centre on Hallwood Park and secure funding, gaining £195,000 from the Lottery, Reaching Communities Programme.

9.4 A Safer Halton

- Kingswood Community Forum – capacity building support for a new

residents group formed to tackle anti-social behaviour, working with the Community Safety Team.

9.5 Halton's Urban Renewal

- Friends of Hale Park – capacity development to facilitate a successful Heritage Lottery Fund of £643,000.
- Consultation for improving small playgrounds in Mersey Ward – in 2007/08 we carried out consultation with local communities in the Mersey Ward to enable the Landscape Division to access WREN funding to improve a number of small playgrounds in the ward.

10.0 RISK ANALYSIS

10.1 None at this stage.

11.0 EQUALITY AND DIVERSITY ISSUES

11.1 None at this stage.

12.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

None.

REPORT TO: Employment, Learning & Skills Policy and Performance Board

DATE: 14 January 2009

REPORTING OFFICER: Strategic Director – Health & Community

SUBJECT: Joint Strategic Needs Assessment (JSNA) - Health

1.0 PURPOSE OF THE REPORT

- 1.1 To present Employment, Learning & Skills Policy and Performance Board with the summary of the findings of the first JSNA Health (Attached at Appendix 1)

2.0 RECOMMENDATION:

- (i) **That Employment, Learning & Skills Policy and Performance Board comment on and note the content of the report.**

3.0 SUPPORTING INFORMATION

- 3.1 The Directors of Adult Social Services, Public Health and Children and Young People's (CYP) Services in every Local Authority and Primary Care Trust (PCT) had a statutory duty from April 2008 to work together to develop a JSNA for their area.
- 3.2 For the production of the first JSNA we have focused on refining, improving and bringing together the information we have already available that highlights overall population needs. This information is from national and local sources and includes a wealth of information we have collected directly from services across Halton. This information has been used to take a longer-term view of population trends and the likely impact on demand over the next years and decades.
- 3.3 In order to deliver this first stage of our JSNA, a number of different information sources have been used. The quality of sources varies and some population, condition and trends information are more robust and well researched than others. Needs assessment and in particular trend forecasting is not an exact science – predications tend to be more accurate at a general, larger population level and because of this the aim has been to keep messages very strategic at this stage.
- 3.4 The JSNA is intended to identify 'the big picture' in terms of the health and wellbeing needs and inequalities within the local population. **It is not intended to describe how we will address the needs, demonstrate outcomes or showcase our services.** The aim is that the information contained in the JSNA will encourage partner agencies to use the findings to inform a number of local authority and PCT strategies, Client Group Commissioning Plans, Local Area Agreements etc. It has already been used within Halton, to feed into Ambition for Health and the Joint Commissioning Plan
- 3.5 The development of the JSNA is not a single, one off exercise but is an ongoing piece of work, which will add to our commissioning 'intelligence'. As we continue to develop our JSNA we will: -

- Build upon service user and care views

- Include information about service usage
- Ensure we have information at a locality level as well as overall trends.

Approval process within the PCT

- 3.6 The approval process for the JSNA within the PCT is currently being reviewed. It is anticipated that it will go to the PCT's Management Team and then the Trust Board, once the St Helens JSNA is ready. NB. The St Helens summary of findings document is finished, however the full data documents are still to be completed. St Helens Council are not intending to submit the needs assessment to their Board.

Consultation Process

- 3.7 A key element of the consultation process is the production of an accessible public document on the local priorities detailing how the JSNA will feed into commissioning plans for the future and the evidence based investment decisions taken. This has been achieved through the development of the summary of findings document (Appendix 1)

It is proposed that the consultation process be in 4 stages, as follows:

- 1) Professionals
- 2) Members via **all** Policy & Performance Boards (January 2009)
- 3) Key stakeholders
- 4) General public

At each stage, the document will be revised and updated accordingly.

4.0 POLICY IMPLICATIONS

- 4.1 The JSNA pulls together information about the current and future health and well being needs of the local population. It provides an opportunity to look into the future so that we can plan now for likely changes in needs, so it is therefore one of the major influences in directing commissioning priorities and planning service development.

- 4.2 One of the key functions of the JSNA is to inform future "commissioning priorities that will improve health and wellbeing outcomes and reduce inequalities." As such it will therefore inform the future development of the Community Strategy and hence the Local Area Agreement. The above reference to inequalities highlights the relationship between the content of the JSNA and resultant neighbourhood management activities. Finally, given the holistic approach adopted, the findings will benefit the implementation of the Equality and Diversity Plan.

5.0 FINANCIAL/RESOURCE IMPLICATIONS

- 5.1 The production of the draft JSNA has been borne within existing resources, however there will be some financial costs to cover public consultation and these are currently being determined.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

- 6.1 **Children and Young People in Halton**

6.1.1 The JSNA will inform all future commissioning decisions targeted at improving the health and well-being of Children and Young People and in particular the interventions commissioned for children with the poorest health outcomes.

6.2 Employment, Learning and Skills in Halton

6.2.1 Improving the education, skills and employment prospects of Halton's residents and workforce is a key driver for reducing health inequalities and hence the relevant data comprises a significant part of the JSNA.

6.3 A Healthy Halton

6.3.1 The JSNA will inform all future commissioning decisions targeted at improving health and well-being across Halton and in particular the interventions commissioned for areas with the poorest health outcomes.

6.4 A Safer Halton

6.4.1 There is evidence to support the relationship between people's perceptions of their local area and how safe they feel, with their health and well-being. As a result, improvements to health and well-being are dependent on the successful implementation of this corporate priority.

6.5 Halton's Urban Renewal

6.5.1 Regeneration initiatives have a significant beneficial impact on health inequalities. As a consequence, a key aspect of the ongoing development of the JSNA will be to ensure the process informs and is informed by interventions to reverse physical, economic and social decline in a given locality/neighbourhood.

7.0 RISK ANALYSIS

7.1 The duty placed on LA's, in conjunction with partners in Health, is ongoing. There is an expectation that the summary of findings document will be refreshed on an annual basis and that the full document will be reviewed in line with the 3yr LAA cycle. At this stage no additional resources have been identified to carry out this work and agreement needs to be reached between the Council and Health regarding respective responsibilities to resource work on the JSNA.

7.2 The Health and Community Directorate led the development of this first JSNA. Further discussions will be required at a senior level to ensure that responsibility to produce the JSNA is accepted by both the Health & Community and Children and Young People's Directorates, the PCT and is supported by the Corporate centre.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 An Equalities Impact assessment will be carried out on the JSNA.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
Draft JSNA (Full document)	Runcorn Town Hall	Angela McNamara

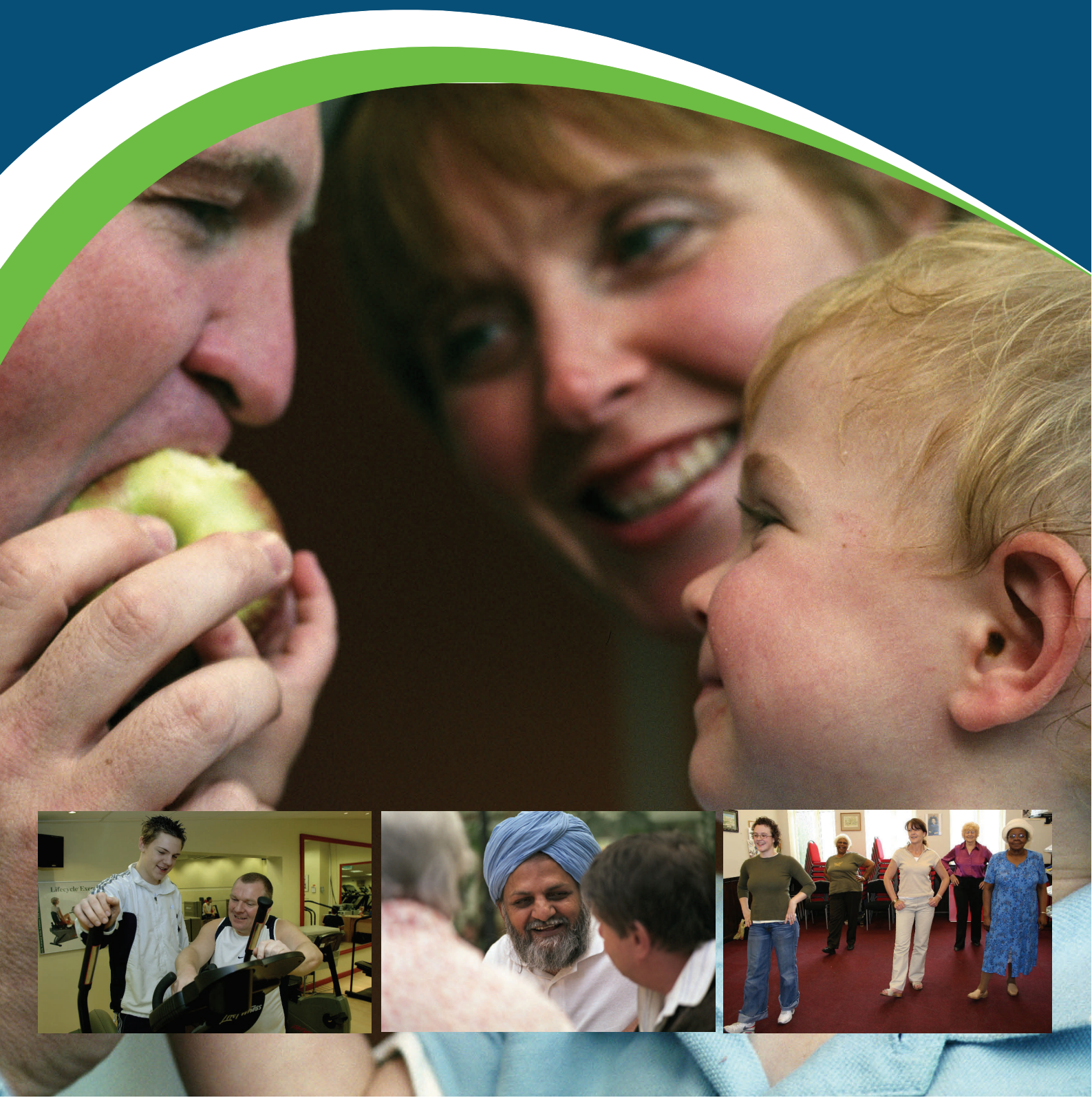


Health and Wellbeing in Halton 2008

Halton's Joint Strategic Needs Assessment (JSNA)



Summary of Findings



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Introduction and Background: Why and how we undertook the JSNA

Summary of Findings

This document summarises the outcomes from the first phase of our JSNA work here in Halton and highlights the key messages and some of the implications for future commissioning and planning.



Why we undertook a JSNA

The Directors of Adult Social Services, Public Health and Children and Young People's Services in every local authority and Primary Care Trust (PCT) have a statutory duty from April 2008 to work together to develop a Joint Strategic Needs Assessment (JSNA) for their district.

The JSNA must pull together a wide range of information about the current and future health and well-being needs of the local population. It provides an opportunity to look to the future - over the next 5, 10, 15 and 20 years - so that we can plan now for likely changes in needs. So it is one of the major influences in directing our commissioning priorities and planning service development.

How we undertook a JSNA

For this first stage of the JSNA we have focused on refining, improving and bringing together the information we have available that highlights overall population needs. This information is from national and local sources and includes a wealth of information we have collected directly from services across Halton. We have used this initial work to take a longer term view of population trends and the likely impact on demand for support over the next years and decades.

In order to deliver this first stage of our JSNA we have used a number of different information sources. The quality of sources varies and some population, condition and trends information are more robust and well researched than others. Needs assessment, and in particular trend forecasting, is not an exact science - predictions tend to be more accurate at a general, larger population level and because of this we have aimed to keep key messages very strategic

at this stage.

This is a summary of the full report – see back page for details of how to obtain copies of the full report.

Personalisation, including a shift towards early intervention and prevention, will become the cornerstone of public services, including the commissioning and development of services within health and social care. This means that every person who receives support, whether provided by statutory or funded by themselves, will have choice and control over the shape of that support in all care settings.

Copies of the Commissioning Strategies/Intentions in place to address the identified needs within this document can be found on Halton Borough Council's website www.halton.gov.uk and the PCT's website www.haltonandsthelenspct.nhs.uk

Overall messages about the needs of our changing populations

Halton's resident population is 119,500 (ONS mid year estimate 2006) Overall, the population has decreased by 2% since 1996, but has been rising since 2001.



At present, Halton has a younger population than the national and regional averages. However, Halton mirrors the national picture of an ageing population, with projections indicating that the population of the borough will age at a faster rate than the national average. In 1996 12.9% of the total population were aged 65 and over, by 2006 this had increased to nearly 14% and by 2015 this is projected to have increased to 17%, which could have a significant impact on the need for health and social care.

The population is predominantly white (98.8%) with relatively little variation between wards. However, in recent years, it has seen a small influx of Eastern European (Polish & Slovakian) migrants.

In recent years Halton has

seen increases in life expectancy for both men and women and declining all cause mortality, predominantly due to drops in deaths from coronary heart disease and cancer. Whilst this is good news, the England figures have decreased at a greater rate so the gap between Halton and England has widened for all cause mortality and for both genders. Halton now has the 3rd worst life expectancy in England for women and the 6th worst life expectancy for men. Within Halton there are also geographical variations in life expectancy. Men in the most deprived areas of Halton live 7.7 years less than men in the least deprived areas. For women in Halton the average life expectancy at birth is 5.8 years less in the most deprived areas than in the least deprived areas.

Deprivation is a major determinant of health. Lower income levels often lead to poor levels of nutrition, poor housing conditions, and inequitable access to healthcare and other services. Deprivation, measured using the English Index of Multiple Deprivation (IMD) 2007, ranks Halton as the 30th most deprived authority in England (compared to 21st in 2004). The 2007 IMD shows that deprivation in Halton is widespread with 57,958 people



(48% of the population) in Halton living in 'Super Output Areas' (SOA's) that are ranked within the most deprived 20% of areas in England.

In terms of Health and Disability, the IMD identifies 53 SOA's that fall within the top 20% most health deprived nationally and that approximately 40,000 people (33% of the population) live in the top 4% most health deprived areas in England. At ward level, Windmill Hill is the most deprived area in terms of health. However, health deprivation is highest in an SOA within Castlefields, ranked 32nd most deprived nationally.

Key Issues and Findings

Specific Populations

Older people

Projections indicate a significant and substantial increase in the numbers of older people between 2006 and 2015, at a rate that is higher than the national and regional trends. Currently 14% of the population is

over 65. This is set to rise to 17% by 2015. One of the largest growths (up by 19%) will be seen in



potentially the most frail and dependent group of over-85s, bringing key implications for planning future service provision for this group. In 2000/01 the NHS spent 41% of its budget (£12.4 billion) on people over 65. On average older people are more likely than younger people to report lifestyle-limiting illness, to live alone, live in poverty and to rely on public services and informal cares. Advancing age also carries some increased risk of dementia and depressive illness and in Halton levels of people with dementia are rising.

Just under half of Halton's 65+ population live with limiting long-term illness and the rate of fractured neck of femur (hip fracture) is the 5th worst in the country. In 2006/07 there were 123 hip fractures in the over 65s in Halton.

The wards with the highest proportions of the population that are older people are seen

in Castlefields, Halton and Ditton.

People with disabilities or a limiting long term illness (LLTI)

Nationally, 18% of people (over 16 years) have at least one dimension of a limiting long-term illness i.e. about 20,300 people in Halton. In Halton the number of adults living with a long term limiting illness is higher than the national average at 22% (2001 census).

Whilst there is no evidence to suggest dramatic increases in the number of adults aged 16-64 with physical/sensory impairments, as the proportion of the population over 45 increases, later onset conditions such as Parkinson's Disease, sensory impairment, arthritis, etc, will rise. In addition, significant increases in the levels of obesity in Halton are predicted to lead to an increase in the prevalence of diabetes and incidence of heart disease.

People with learning disabilities

It is predicted that the population of people with learning disabilities will grow by 6% by 2011. Of further significance is that people with learning disabilities are living longer. Adults with learning disabilities have poorer general health than the wider population and can struggle to access mainstream health services.

The wards showing the highest prevalence of learning difficulty

are Castlefields, Hough Green, Grange and Halton Lea respectively. The overall pattern shows a strong relationship between levels of learning difficulty with areas of deprivation, in that these 4 wards also have a high percentage of the population living in the top 10% most deprived areas nationally.

Numbers of people (known to social services) in Halton with a learning disability have remained fairly constant in recent years (between 430-450). However, since 2002 there has been a significant shift in the way in which services are delivered to people with a learning disability. Halton now performs well in respect to helping people with learning disabilities to live in the community with approximately 82% of people now receiving services in their own home. However, access to general needs social housing remains limited and levels of owner occupation remain extremely low.

Few adults with learning disabilities in Halton are in paid employment (less than 1% compared to 10% nationally), even though employment is key to sustaining well-being and enabling people to maximize independence.



Key Issues and Findings

Specific Populations continued

Children



Population estimates indicate that Halton has a younger population than the regional and national average. However, overall the 0-19 population is decreasing.

Windmill Hill is ranked the most deprived ward in the borough across all domains and is ranked the most deprived ward in terms of health.

Over 50% of Halton's children live in the 20% most deprived areas nationally and a further 15.5% live in the 40% most deprived areas nationally, with only 8% of children living in the 20% least deprived areas nationally.

A number of major health issues relevant to children and young people in Halton have been identified through the JSNA and the Children and Young Peoples Plan. Key issues include, higher rates of infant mortality and low birth weight, high rates of teenage pregnancy, high rates of obesity for both reception and year 6 children. In Halton, 24%

of reception age children are overweight and 11.6% are obese, and 36.3% of Year 6 children are overweight and 22.3% are obese. All of these levels are above the England average.



Pregnant Women & Newborns

The health of the child starts with the health of their mothers before and during pregnancy. Locally, 1 in 4 were still smoking at the birth of their child, and just 4 in 10 are breastfeeding on delivery (half the national average and 4th worst in the country). Therefore programmes around stopping smoking (particularly before and during pregnancy), increasing levels of physical activity, developing healthier eating habits and dramatically increasing the number of women who breastfeed are a priority.

Incidence of teenage pregnancy remains an issue in Halton, despite falling for several years; rates are now above the 1998 baseline level. There is also a correlation between deprivation and incidence of teenage pregnancy with the most deprived areas in Halton experiencing the highest levels of teenage conception rates.

Carers

Carers provide a significant proportion of community care as services target provision on those with highest need. There are as many as 13,531 carers in Halton and 3,696 provide over 50 hours unpaid care a week. Research by the equal opportunities Commission suggests that caring can have a detrimental impact on health and employment. Approximately 14% of carers in Halton state that they are in poor health. As the ageing population in Halton increases there is also predicted to be a steady increase in the number of carers, including those carers aged over 85 and an increase in older carers with poor health. All factors indicate an increased demand for services to support carers in Halton.



Conditions

Mental health and emotional well-being



About 1 in 6 adults in Halton suffer from depression (or chronic anxiety, which effects 1 in 3 families). This rises to 1 in 4 older people having symptoms of depression that are severe enough to warrant intervention. Of other mental health problems, anxiety and phobias are the most common.

People with mental health problems are less likely to be in paid employment and carers are twice as likely to have mental health problems. 40% of people on incapacity benefit are claiming for mental health problems (nationally more than the total number of people claiming benefits for unemployment). In Halton's Housing Needs Survey 2005, 96% of people with a mental health problem (who reported their household income) had an income below the national average and 65% of people with a mental health problem indicated that the problem was serious enough for them to need care and support. In addition, the range and number of supported housing available for people with mental health problems in Halton remains low compared to national and regional averages.

Emotional well-being is a concern for all members of the community and we should be

focusing on preserving it. Improving people's relationships, self-image, self-esteem and levels of worry, which all impact on emotional well-being will give people the ability to cope with life. Supporting adults to remain in or return to employment will pay dividends in terms of mental health and we need to improve our performance in this area.

We also need to support people with mental health problems to improve their well-being by increasing access to services such as housing support, creative arts and leisure, physical activities and talking therapies.

It is estimated that 2000 children and young people in Halton have moderately severe problems requiring attention from professionals trained in mental health, and approximately 500 children and young people with severe and complex health problems requiring a multi-disciplinary approach. The establishment of a continuum of emotional health and mental well being services that can intervene early where appropriate, is critical to meeting the needs of these vulnerable children, who will soon face the challenge of adulthood. The transition to adult services is a critical point for this group of young people. Promoting the emotional well being and mental health of children and young people is everyone's business in Halton and will have a major impact on a number of other health and socio-economic factors.

Dementia

Dementia is most common in older people, with prevalence rising sharply amongst people over 65 years. It is also one of the main causes of disability in later life. Locally 5% of the population has dementia. This translates to 1,061 people over 65 with dementia living in the community with dementia and is predicted to rise to an estimated 1,613 by 2025.

Early diagnosis of, and intervention for, dementia are the keys to delaying admission to long-term care and to help people remain independent for longer. Promoting healthy ageing, for example by keeping people active and tackling social isolation, is important in delaying the onset of dementia. Accommodation choices including extra care housing, residential and nursing care for older people with dementia must also be balanced to meet future aspirations in respect to choice of service and be sufficient in numbers to meet future needs.



Conditions Continued

Obesity in Adults

Obesity is one of the most



significant threats to the long-term health of our population as it leads to an increased risk of a wide range of health problems including type 2 diabetes, heart disease and some cancers. Nationally the levels of overweight and obesity are increasing and this pattern is reflected in Halton. Between 20% to 25% of adults in Halton are obese and these figures have increased in recent years. Considered alongside the increased levels of obesity in children this is a key priority, which can only be addressed by a wide range of strategies to be delivered through partnership working across all sectors.

Cancer

Cancer is the second biggest cause of premature death in Halton but its rate makes Halton the worst area in the country for cancer deaths. Incidence (the number of new cancers per year) of 'all cancers' in men has decreased over the past decade but remains above the national rate. The incidence rate for women has risen over the same period both nationally and locally although in Halton the rates are now falling. Levels of mortality vary across Halton, with the highest rates being in

Norton South, for both all ages and under 75s. Other areas with high rates are Farnworth, Castlefields and Grange.

There has been a steady increase in the number of women developing breast cancer in Halton and death rates for the disease have increased recently. Nationally the rate has improved but this remains the second largest cause of cancer death in Halton.

The Incidence of colorectal (bowel) cancer in Halton has slowed since 2002-2004. However, the rate remains significantly above the North West and the national average. Mortality rates, which had been falling since their peak in 1998-2000, have begun to rise in 2004-06, widening the gap between Halton and England.

A fall in the Incidence of lung cancer in Halton was mirroring the falling rates nationally. However, from 2000-02 the rate began rising. Similarly, the rate of mortality from lung cancer has improved both nationally and locally, but an increase between 2001 and 2003 in Halton, even though it has fallen since, widened the gap between the Halton and England rates. Lung cancer remains the leading cause of cancer death in Halton for both men and women.

Prostate cancer has the highest observed incidence rates of any cancer for men in Halton and is in the top 3 causes of cancer mortality.

An increase in preventative services which support lifestyle change will reduce incidence

levels whilst increased emphasis on early detection and treatment will improve health outcomes and mortality rates.

Heart disease and stroke

Heart disease is the single biggest cause of premature death in Halton. Locally more people have heart disease than nationally and, for those under 75, men are more likely to have it than women. However, there has been a reduction in the number of deaths from heart disease over recent years.



Stroke is a significant cause of UK morbidity and mortality, the most important cause of adult disability, and the third leading cause of death. Halton has lower rates of death from stroke than the North West but slightly higher rates than England as a whole. When looking at admissions to hospital for stroke Kingsway and Halton View have significantly higher rates compared to Halton as a whole.

It is estimated that just under 1 in 4 (23.9%) people locally have high blood pressure (hypertension) which can lead to stroke and heart disease and numbers are set to increase. However, the number of patients identified as having hypertension at GP practices is much lower than the estimated levels, suggesting many people are going unidentified and therefore untreated.

Conditions Continued

Promoting and enabling people to adopt healthy personal behaviors, such as not smoking, being physically active and eating healthily can help to reduce high blood pressure, reduce the risk of stroke and prevent the development or worsening of heart disease.

Diabetes

Diabetes is a very disabling and potentially fatal condition if not well managed.



Diabetes increases the risk of other conditions such as heart disease and stroke, and magnifies the ill effects of other risk factors such as smoking, high cholesterol levels and obesity. The severity of impact of the disease is linked to how soon it is identified and how well managed it is. Type 2 Diabetes is the most common form, with obesity the primary modifiable risk factor for it. The risk of developing Type 2 Diabetes increases with age.

As the older population in Halton is increasing, as are levels of obesity, more and more people in Halton will be affected by diabetes. If the current rates of obesity continue, by 2010 4.4% of the adult population will have type 2 diabetes which will rise to an estimated 6.16%, or 6,700, GP registered patients by 2020.

Chronic Obstructive Pulmonary Disease (COPD)

This is an umbrella term for chronic bronchitis, emphysema or both. The PCT has the 10th highest level in England, whilst levels in Halton are lower than experienced in St Helens, the rate remains higher than the North West and the national rate.

As the main risk factor for these diseases is smoking, promoting healthy personal lifestyle choices will be key to reducing incidence levels.

Personal behaviours

Substance Misuse

Illegal drugs cause damage and ruin to individuals, families and communities. And the most vulnerable and deprived among us are often the hardest hit. For individuals, drug misuse means wasted potential, broken relationships and, for some, a life of crime to feed their drug habit. For the wider community, our efforts to lift children out of poverty, promote equality of opportunity and reduce crime are held back when families and communities are in the grip of drug use.

Over the past few years, increasing numbers of adults have entered and successfully left drug treatment. waiting times have consistently been within national targets and service users have expressed high satisfaction with the treatment they have received. however, attracting those in their 20s into drug treatment, and improving the uptake of services around blood borne viruses continues to present a

challenge. these issues, together with seeking to support service users into employment, addressing the causes of some individuals offending, and improving the help available to those families affected by drug misuse, will continue to be the focus of future work.

Alcohol

Drinking alcohol to excess is a major cause of disease and injury, increasing the risks of heart disease, liver disease and cancer. Heavy drinking has a severe risk of cardiovascular disease as well as addiction. Binge drinking is linked to significantly increased blood pressure. Consuming alcohol in pregnancy increases the risk of foetal abnormality.

People have low levels of awareness of the amount of alcohol they drink and the harmful effects it can have. Halton has the 8th highest



hospital admissions for alcohol-related conditions in England for 2006/07, showing that alcohol consumption is an issue of major concern locally. Alcohol admissions appear linked to deprivation, gender and age, with men in their 40s, and those from deprived wards, more likely to be admitted. Furthermore, estimates suggest that approximately 24% of adult residents binge drink.

Personal behaviours continued

Whilst twice as many men than women drink above safe limits the number of women doing so has increased significantly from 6.9% in 2001 to 12.4% in 2006. The rate has decreased slightly for men during the same period (24.8% in 2001 to 22.5% in 2006).

Smoking



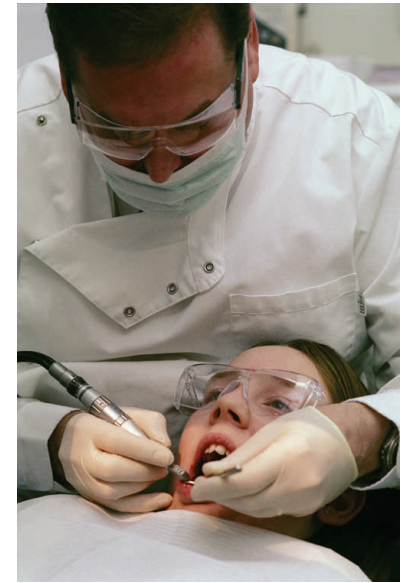
Smoking causes more avoidable and early deaths than any other personal lifestyle factor, killing more than 106,000 people in the UK annually; 17% of all deaths. Most die from lung cancer, chronic obstructive lung disease (bronchitis and emphysema) and coronary heart disease. It is a cause of a wide range of diseases, not just those resulting in death. Second-hand smoke is a major risk to the health of non-smokers.

Locally smoking rates remain

high with over 1 in 4 adults still smoking. Overall, prevalence is highest in males aged 40-64 but in the younger age groups, a higher percentage of women smoke than men. The results of a Halton survey of 15-16 year olds highlighted that the smoking rates of 15-16 year olds match that of adults, although there is a significant difference in smoking take up rates -18% male and 29% female.

Food and nutrition

Nutrition with physical activity is second only to smoking tobacco in its influence on a wide range of health issues, not just obesity. Locally we estimate that only 20% of adults eat 5 portions of fruit and vegetables a day although this has improved since the 2001 lifestyle survey when only 12% did so. Males in the 18-34 age group have the poorest diet, with lower intake of fruit and vegetables, and more poor diet habits. Decaying teeth is another sign of poor nutrition and the rate in Halton for 5-year-olds is higher than the



national average.

Within Halton the areas with the highest prevalence of decayed teeth are Kingsway, Riverside and Halton Lea.

Sexually Transmitted Infections

Over the period 1996-2006, there has been a general rise in the numbers of Sexually Transmitted Infections (STIs) recorded in Halton, rising from 150 in 1996 to 518 in 2006. Whilst some increase may be due to greater awareness and willingness to seek treatment this alone cannot account for this level of rise.

Chlamydia Screening in Halton identified that 10.6% of cases were positive, which is higher than the national rate.

In addition, the number of young people diagnosed with sexually transmitted infections is increasing.

Wider Factors

Employment

Worklessness remains a key challenge in Halton, particularly in certain deprived areas and in respect to residents with physical and learning disabilities and mental health problems.



Work provides status, purpose, social support, structure to life and income, so it is important not just for the working person but also their family. Being out of work has a huge negative impact on the health and well-being of the person and their family and is often a consequence of ill-health or disability. 25 of Halton's super output areas have over a third of their working age population (approximately 7,000 people) claiming out-of-work benefits. Nearly 68% of Halton's residents are in employment that makes it the 9th worst in the North West and 34th worst nationally.

Levels of unemployment impacts on the levels of household income and in Halton average household incomes vary from a high of £54,060 in Birchfield (the least deprived ward in respect of health) to a low of £23,260 in Windmill Hill (the most deprived ward in respect to health).

Halton's latest 'State of the Borough' report was produced at the beginning of 2008. In

terms of employment, it found the low skills base to be a causal effect of unemployment that needs to be addressed in order to reduce levels of unemployment in Halton.

Housing condition and options

Decent housing is a pre-requisite for health and has a significant influence on people with many health conditions such as asthma and depression. Birchfield, where 99% of households are owner-occupiers and 0% of properties are socially rented scores well in terms of health deprivation, whilst in Windmill Hill where owner occupation is 22% and 62% of properties are socially rented has the highest level of health deprivation, at ward level, in the borough.

When housing tenure is compared to health deprivation, it becomes clear that there is a strong correlation. The eight most deprived wards in terms of health have the lowest proportion of owner occupation in Halton, whereas the eight wards with the lowest health deprivation have the highest levels of owner occupancy.

Educational attainment

Educational attainment is an important indicator of the future life chances for children and



young people. There is also a direct correlation between

levels of educational attainment and deprivation and health inequalities. Halton has made significant progress in improving GCSE results of young people in the borough, and for the last two years the percentage of young people achieving 5 A*-C has increased from 52.6% to 71.3%, taking us well above the national average. Over the same period the percentage of young people achieving 5 A*-C including English & Maths, a key indicator of future employability, has risen by 15.9% to 49.2%.

The main priority for Children's Services now is to focus on



narrowing the gap and reducing educational inequalities for vulnerable groups based on locality and other factors. Over half of Halton's children live in the 20% most deprived areas nationally and this has an effect on their attainment. Performance at ward level ranges from 93.3% in Beechwood to 40% in Windmill Hill and this impacts on levels of NEET (not in Employment, Education or Training) and future worklessness. Young women with poor educational attainment are more likely to be teenage parents. Therefore narrowing the gap in education attainment will be a major factor in improving the health and well-being of our communities.

Wider Factors continued

Isolation and social networks

Isolation has a significant effect on general well-being and increases the risk of a range of health issues such as depression. Strong social networks are particularly important for vulnerable people. In Halton, almost 6,000 adults over 65 live alone. As

the older population grows, the numbers living alone will increase and by 2025 it is projected that over 8,500 pensioners will be living alone. Social isolation needs to be tackled by all partners to ensure that there are adequate activities and support networks available within local communities. The voluntary and community sector can play an increasing role in developing

community-based services that alleviate the effects of social isolation.



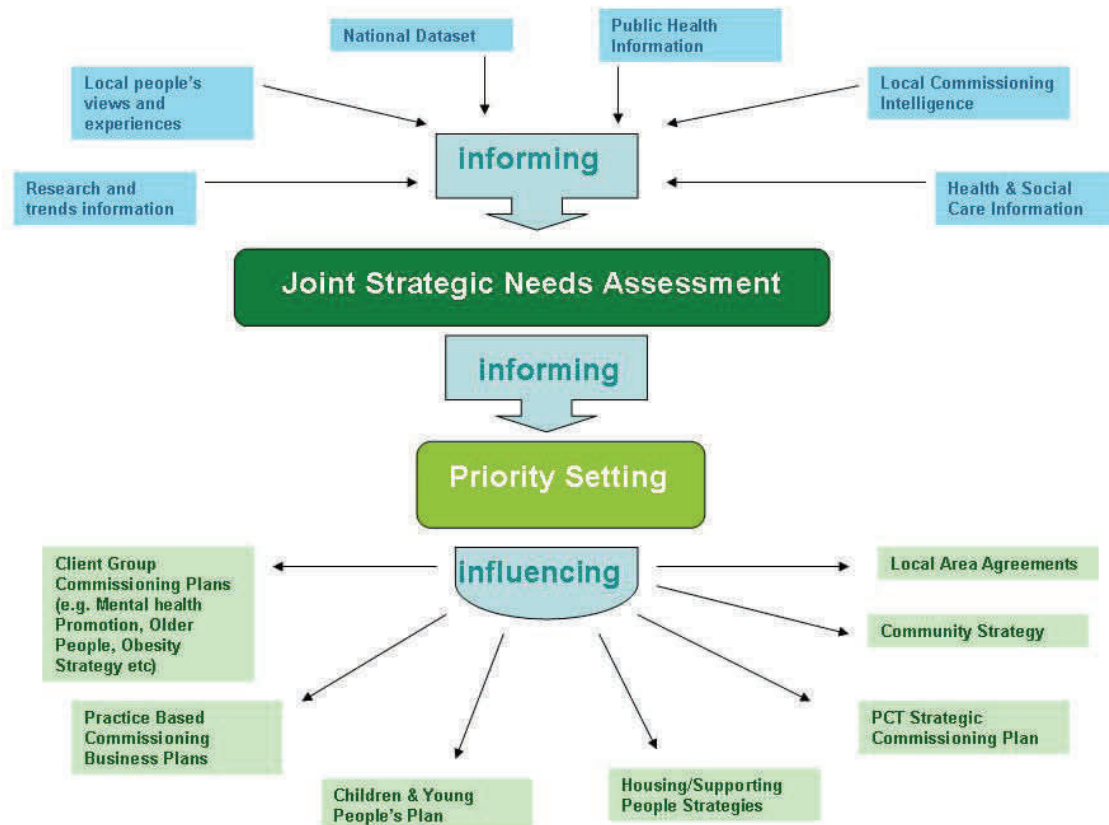
Using the Joint Strategic Needs Assessment

As we have illustrated below the Joint Strategic Needs Assessment is a major influence in establishing local commissioning priorities. We have already used this JSNA to direct our commissioning.

Information has already been fed into the Health Partnership. This process will continue. It is important that it informs the next round of the Local Area Agreement (LAA) and is used to inform service planning.

For example, the PCT strategic commissioning priorities outlined in its *Ambition for Health* have been underpinned by the needs identified in the JSNA.

The following diagram summarises the inputs and potential outputs from the JSNA work.



Inequalities

This first JSNA has been about describing the health and well-being needs of Halton. However, in collating and analysing the data which underpins this assessment, it is clear that for some issues certain groups or specific neighbourhoods are more likely to be affected. Some of these differences have been highlighted in this summary and described more fully in the main data document. This is available on the PCT and borough council websites.

It is crucial that planning based on this JSNA ensures the most important issues for specific populations are tackled and those most in need are targeted by any interventions.

The next steps in developing the Joint Strategic Needs Assessment

The JSNA is not a single, one-off exercise, but is an ongoing piece of work which will add to our commissioning “intelligence”.

As we develop our JSNA, we will:

- build upon service user and carer views
- include service usage information
- ensure we have information at a locality level as well as overall trends

We will continue to:

- further develop coherent, consistent and appropriate data sets
- develop the capacity across all partners to

generate, analyse and present this information

- ensure that relevant planning systems make use of the information that the JSNA is producing
- further develop the capacity and ability to evaluate initiatives so they can demonstrate their effectiveness

This information will be fed into subsequent JSNAs.



For Further Information or to obtain copies of the full document

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REPORT TO: Employment Learning and Skills Policy And Performance Board

DATE: 14th January 2009

REPORTING OFFICER: Strategic Director Corporate and Policy

SUBJECT: Local Area Agreement Performance Report

WARDS: Borough-wide

1. PURPOSE OF REPORT

To report on progress towards meeting Local Area Agreement targets at the end of the first six months of the Agreement.

2. RECOMMENDATION THAT:

- i. The report is noted.
- ii. The Board considers whether it requires any further information on the actions being taken to deliver the LAA targets.

3. SUPPORTING INFORMATION

The Secretary of State signed off the revised Local Area Agreement (LAA) in June 2008. The purpose of the LAA is to agree a set of targets for Halton with government and local partners. Named partners have a duty to co-operate in striving to achieve these targets. There are 34 indicators in the LAA, plus a further 16 statutory education and early years targets. The agreement covers the period April 2008 to March 2011.

A report on progress over the first 6 months of the Agreement is attached at Appendix 1, covering those indicators which fall within the responsibilities of this particular Policy and Performance Board.

Given that the Agreement was only signed in June, this first progress report reflects a very early stage in the Agreement's life. In reading the report members should bear in mind that:

1. As all the national indicators are built into service plan monitoring, the information in the appendix has already been before the Board. The intention of this report is pick out the LAA indicators from the different service plans so that it is possible to see a clearer picture of progress overall.

2. It was not possible to set targets for all of the chosen indicators in June for lack of baseline information. For example, the first Places Survey is only just taking place so there was no background against which to set targets for indicators that are reliant on that survey.
3. Some indicators are only reported annually, so in those cases no progress report is yet available.

4. LAA REVIEW AND REFRESH

A process has just begun to “Review and refresh” the LAA with government office. The main purpose is:

1. To fill in the gaps – by February 2009 information should be available to fill in the missing baselines and targets.
2. To update baselines and targets for a small number of indicators following changes to definitions.
3. To consider if there are significant changes in context which make it necessary to amend targets even at this early stage (for example, the impact of the recession).

5. CONCLUSION

This is an early stage in the progress of the Local Area Agreement, but it is an opportunity to take stock of current progress and to check that appropriate delivery plans are in place.

6. POLICY IMPLICATIONS

The Local Area Agreement acts as a delivery plan for the sustainable community strategy and as such is central to our policy framework.

7. OTHER IMPLICATIONS

Achievement of our Local Area Agreement targets has direct implications for our comprehensive area assessment. Further consideration of any areas of under-performance may give rise to other implications for the Council and its partners.

8. IMPLICATIONS FOR THE COUNCIL’S PRIORITIES

This report deals directly with progress and delivering one of our five priorities.

9. RISK ANALYSIS

The key risk is failure to improve the quality of life for residents of Halton in accordance with the objectives of our community strategy. This risk can be mitigated by regular reporting of performance, and reviewing the action being

taken where under-performance occurs.

10. EQUALITY AND DIVERSITY ISSUES


One of the guiding principles of the LAA is to reduce inequalities in Halton.

11. LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document:

Local Area Agreement 2008. Place of inspection 2nd floor Municipal Building.
Contact officer – Rob McKenzie (0151 471 7416)

LAA PERFORMANCE REPORT EMPLOYMENT LEARNING AND SKILLS PPB (APRIL 08 - SEPTEMBER 2008)

Target Ref	Indicator Description	Baseline (2007/08 unless specified otherwise)				Current Performance (30.09.08)
NI 153 WNF Reward Indicator	Working age people claiming out of work benefits in the worst performing neighbourhoods	31.6%	30.8%	30.6%		<p>There has been a slight increase at the half-year point, reflecting a general rise in unemployment as a result of the prevailing economic conditions.</p> <p>Performance is still very close to target, and all efforts will be made to keep it stable throughout the second half of the year.</p>
NI 163 WNF Reward Indicator	Working age population qualified to at least Level 2 or higher	60.2 (2006)	-	65.4	-	<p>Data for this indicator is based on the annual survey that will be undertaken by the Office of National Statistics.</p> <p>Information in relation to this indicator is derived by the Department of Innovation, University & Skills from the ONS Annual Population Survey.</p>
NI 171	New business registration rate C4	New national Indicator – Targets to be set in March 2009 when baseline data is available.				N/A
NI 173 WNF Reward Indicator	People falling out of work and on to incapacity benefits. C4	New National Indicator - Targets to be set in March 2009 when baseline data available.				N/A