



## Executive Board

Thursday, 11 September 2025 2.00 p.m.  
The Boardroom, Municipal Building

A handwritten signature in black ink, appearing to read 'P. Alcock', is centered on the page.

Interim Chief Executive

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

#### PART 1

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Members are reminded of their responsibility to declare any Disclosable Pecuniary Interest or Other Disclosable Interest which they have in any item of business on the agenda, no later than when that item is reached or as soon as the interest becomes apparent and, with Disclosable Pecuniary interests, to leave the meeting during any discussion or voting on the item.	
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*Please contact Gill Ferguson 0151 511 8059 or  
gill.ferguson@halton.gov.uk for further information.  
The next meeting of the Committee is on Thursday, 23 October 2025*

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In this case the Board has a discretion to exclude the press and public and, in view of the nature of the business to be transacted, it is <b>RECOMMENDED</b> that under Section 100A(4) of the Local Government Act 1972, having been satisfied that in all the circumstances of the case the public interest in maintaining the exemption outweighs the public interest in disclosing the information, the press and public be excluded from the meeting for the following item(s) of business on the grounds that it involves the likely disclosure of exempt information as defined in paragraph 3 of Part 1 of Schedule 12A to the Act.	
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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.*

**EXECUTIVE BOARD**

*At a meeting of the Executive Board on Thursday, 10 July 2025 in The Boardroom, Municipal Building*

Present: Councillors Wharton (Chair), Bevan, Ball, Dennett, Harris, T. McInerney, P. Nolan, Thompson, Wall and Wright

Apologies for Absence: None

Absence declared on Council business: None

Officers present: S. Young, M. Reaney, G. Ferguson, W. Rourke and R. Rout

Also in attendance: None

**ITEMS DEALT WITH  
UNDER POWERS AND DUTIES  
EXERCISABLE BY THE BOARD**

*Action*

**EXB13 MINUTES**

The Minutes of the meeting held on 12 June 2025, were taken as read and signed as a correct record.

**DEPUTY LEADER'S PORTFOLIO**

**EXB14 PLAN FOR NEIGHBOURHOODS FUND, RUNCORN**

The Board considered a report of the Executive Director - Environment and Regeneration, which provided an update on the Plan for Neighbourhoods (PfN) funding programme.

In the 2024 Spring budget the then Government announced Phase 2 of their Long-Term Plan for Towns programme which identified Runcorn as one of the 20 additional towns across the country which would benefit from an allocation of £19.5m to invest over a 10-year period in local priorities.

It was reported that in March 2025, the Long-Term Plan for Towns was renamed Plan for Neighbourhoods by the new Government and the timeline for commencing delivery was pushed back to April 2026. The intention remained that the £19.5m funding over a 10-year period



would deliver a range of interventions. A full list of Sub-Interventions was provided at Appendix 1, Terms of Reference as Appendix 2 and a List of Organisations represented on the Board as Appendix 3.

The report outlined the development timeline of a Regeneration Plan which must be submitted to the Ministry - Housing Communities and Local Government (MHCLG) by 28 November 2025.

RESOLVED: That the Board

- 1) acknowledge the new name of the Board – Runcorn Town Neighbourhood Board as directed by MHCLG/central Government;
- 2) note the updated Terms of Reference to reflect the change of name and requirements of the new Plan for Neighbourhoods directive;
- 3) note the updated list of interventions (funding themes); and
- 4) note the timeline for submission of key documents to MHCLG and for delivery.

## **CORPORATE SERVICES PORTFOLIO**

### **EXB15 COUNCILWIDE SPENDING AS AT 31 MAY 2025**

The Board received a report from the Director – Finance, which reported the Council's overall revenue net spending position as at 31 May 2025 together with a 2025/26 forecast outturn position.

A summary of spending against the Council's revenue budget as at 31 May 2025 was presented in Appendix 1 and Appendix 2 and these provided detailed figures for each individual Department. In overall terms net revenue spending as at 31 May 2025 was £1.1m over budget.

The report also detailed a review of the Council General Reserve as at 31 May 2025. Other than the General Fund reserve of £5.149m, there were no further reserves available to help fund future budgets.

RESOLVED: That

- 1) Executive Directors continue to implement the

Director of  
Finance

approved 2025/26 saving proposals as detailed in Appendix 3;

- 2) Executive Directors continue to identify areas where they can further reduce their directorate's spending or generate income, in order to reduce the council wide forecast outturn overspend position; and
- 3) this report be shared with each Policy and Performance Board, in order to ensure they have a full appreciation of the councilwide financial position, in addition to their specific areas of responsibility.

**CORPORATE SERVICES AND EMPLOYMENT  
LEARNING AND SKILLS AND COMMUNITY  
PORTFOLIOS**

**EXB16 HEALTH AND LEISURE IN HALTON**

The Board considered a report of the Executive Director – Environment and Regeneration, that requested the Board to consider the relationship between increasing the cost of the local authority leisure facilities to residents and the potential impact on health inequalities in the borough. The Board was also asked to consider if it wished to subsidise leisure activities for certain groups in the borough. Options for how this could be implemented were outlined in the report together with a request from Halton Walking Football Club.

As health is the number one priority for Halton it was proposed that a temporary subsidy be put in place as stated in the report to allow existing groups to continue to be active but with the following recommendations.

**RESOLVED: That**

- 1) as being active is a key factor to promoting health and wellbeing in the borough the full subsidy amount should be allocated by contribution from Public Health;
- 2) to ensure fairness and consistency all groups who meet the criteria as set out in the report will receive a standardised 50 per cent discount; and
- 3) the Portfolio Holder for Employment Learning, Skills and Community Portfolio Holder be regularly updated on the status of discussions with the groups in receipt of the subsidy and the nature of support being

Executive Director  
Environment &  
Regeneration

provided by Sports Development. This ensures transparency and accountability whilst tracking progress toward the goal of enabling groups to become self-sustaining.

## ENVIRONMENT AND URBAN RENEWAL PORTFOLIO

### EXB17 HIGHWAY STRUCTURES MAJOR MAINTENANCE

The Board considered a report of the Executive Director – Environment and Regeneration, that sought approval to proceed with the procurement of major maintenance works to key structures on the Runcorn Busway (Shopping City North Viaduct) under the City Region Sustainable Transport Settlement (CRSTS) programme using the SCAPE Framework.

RESOLVED: That the Board approves the Director Planning and Transportation, in consultation with the Portfolio Holder Environment and Urban Renewal, to be delegated to deal with any matters relating to the procurement and delivery of the scheme to refurbish the Shopping City Busway Viaduct (North) and associated structures.

Director -  
Planning and  
Transportation

### EXB18 PROCUREMENT OF SERVICES FOR CAPITAL FUNDED HIGHWAY IMPROVEMENT SCHEMES

The Board considered a report of the Executive Director – Environment and Regeneration, that sought approval to proceed with the procurement services for the delivery of capital funded highway improvements across the Borough. The current contract was due to expire on 5 August 2026.

RESOLVED: That the Board approve a procurement process to secure a delivery contractor for capital funded highway improvement works.

Executive Director  
Environment &  
Regeneration

## ADULT SOCIAL CARE PORTFOLIO

### EXB19 HOME-BASED RESPITE CARE SERVICE IN HALTON - KEY DECISION

The Board considered a report of the Executive Director – Adults, that sought approval for a Non-Emergency Waiver in compliance with Procurement Standing Order 1.14.4 (iv) of part 3 Procurement Standing Orders, to allow the granting of an extension to the current contract in place for the provision of the Home-Based Respite Care Service in

Halton, to be delivered by Care at Home Group Limited for a further 2-year period from 19 October 2025 to 18 October 2027.

Reason(s) for Decision

Approval of the extension to the current contract to Care at Home Group Limited for a 2-year period would support continuity of care for a vulnerable client cohort and allow for sufficient time to undertake a new procurement process for the service.

Alternative Options Considered and Rejected

Allow the Home-Based Respite Service to cease.

Implementation Date

The 2-year extension to the contract would take effect from 19 October 2025.

RESOLVED: That the Board approve a Waiver in compliance with Procurement Standing Order 1.14.4 (iv) of part 3 of Procurement Standing Orders, for the contract extension for the provision of the Home Based Respite Care Service in Halton delivered by Care at Home Group Limited for the period from 19 October 2025 to 18 October 2027.

Executive Director  
of Adult Services

EXB20 REPORT BY THE LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN

The Board considered a report of the Chief Executive, which notified Members that the Local Government Ombudsman had issued a report against the Council following an investigation of a homelessness case. A copy of the report was attached.

RESOLVED: That the report and the actions taken to address the issues raised by the Ombudsman be noted.

**HOUSING AND ENVIRONMENTAL SUSTAINABILITY PORTFOLIO**

EXB21 PROPERTY POOL PLUS POLICY AMENDMENTS AND FUTURE DELIVERY OPTIONS - KEY DECISION

The Board considered a report of the Executive Director - Adults, that sought approval for the implementation of several changes to the Property Pool Plus Housing Allocations Scheme. The report set out details of

the three significant changes, and a number of minor policy changes to the Scheme.

The Scheme was currently jointly administered across the five Local Authority areas of Halton, Knowsley, Liverpool, Sefton and Wirral. Halton Housing had maintained the housing register and allocations contract for many years.

It was noted that the contract was due to cease in March 2026 and it was now necessary to consider the future validity of the administration of the Scheme.

#### Reason(s) for Decision

To ensure that the Allocations Policy is in line with current legislation case law, good practice, and meets local priorities it is necessary to periodically update and review the current iteration. The existing scheme has been in operation since January 2024.

The changes being proposed fall into three categories: three significant changes to assist the participating local authorities to respond more effectively to the demand on for social housing, minor policy changes that will impact a relatively small number of applicants; minor changes to improve clarity.

#### Alternative Options Considered and Rejected

The option to continue to operate the current scheme policy without change has been considered but discounted due to the need for the Council to improve its ability to meet housing need in the area and to respond to the increased demand on homelessness services and associated temporary accommodation pressures.

#### Implementation Date

The Property Pool Plus Housing Allocations Scheme is a jointly administered scheme across the five Local Authority areas of Halton, Knowsley, Liverpool, Sefton and Wirral. Each Local Authority will seek approval from their respective Management Boards, with a view that the policy will be implemented July/August 2025.

#### RESOLVED:

- 1) the report be noted;

Executive Director  
of Adult Services

- 2) the Board approve the proposed changes to the Housing Allocations Scheme Policy (Property Pool Plus); and
- 3) the relevant Policy and Performance Boards be requested to review Property Pool Plus Housing Allocation Scheme during the current year.

EXB22 SCHEDULE 12A OF THE LOCAL GOVERNMENT ACT 1972 AND THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

The Board considered:

- 1) whether Members of the press and public should be excluded from the meeting of the Board during consideration of the following item of business in accordance with Section 100A (4) of the Local Government Act 1972 because it was likely that, in view of the nature of the business to be considered, exempt information would be disclosed, being information defined in Section 100 (1) and paragraph 3 of Schedule 12A of the Local Government Act 1972; and
- 2) whether the disclosure of information was in the public interest, whether any relevant exemptions were applicable and whether, when applying the public interest test and exemptions, the public interest in maintaining the exemption outweighed that in disclosing the information.

RESOLVED: That as, in all the circumstances of the case, the public interest in maintaining the exemption outweighed that in disclosing the information, members of the press and public be excluded from the meeting during consideration of the following items of business in accordance with Section 100A (4) of the Local Government Act 1972 because it was likely that, in view of the nature of the business, exempt information would be disclosed, being information defined in Section 100 (1) and paragraph 3 of Schedule 12A of the Local Government Act 1972.

**ENVIRONMENT AND URBAN RENEWAL PORTFOLIO**

EXB23 TRANSPORT OPERATOR'S LICENCE

The Board considered a report that provided information on the requirements pertaining to the Council's Transport Operators Licence and the preparation for the

renewal of the Licence in December 2026.

RESOLVED: That the Board approve the recommendations contained within Appendix 1 of the report.

Executive Director  
Environment &  
Regeneration

## HOUSING AND ENVIRONMENTAL SUSTAINABILITY PORTFOLIO

### EXB24 KINGSWAY QUARTER REDEVELOPMENT, WIDNES - KEY DECISION

The Board received an update report on the proposed redevelopment of the Kingsway Quarter, Widnes and options to progress the project.

#### Reason(s) for Decision

The development will be significant in terms of its positive effects on communities in and around Widnes Town Centre.

#### Alternative Options Considered and Rejected

Alternative Options are outlined in sections 3.11 -3.14 of the report.

#### Implementation Date

1 October 2025.

RESOLVED: That the Board

- 1) note the current position and agree to option 4 as outlined in section 3.14 of the report. Officers are instructed to undertake further work to ascertain the respective merits and constraints associated with progressing this option;
- 2) agree that the appointment of a development partner for the site is delegated to the Executive Director, Environment and Regeneration, in consultation with the Portfolio Holders for Major Projects (Deputy Leader) and Housing and Environmental Sustainability;
- 3) authorise the Director for Economy, Enterprise and Property to arrange for all required documentation for the transactions to be completed to the satisfaction of the Director of Legal and Democratic Services, in consultation with the Portfolio Holder for Corporate

Executive Director  
Environment &  
Regeneration

Services; and

- 4) receive further progress reports which will be provided to the Executive Board, as required.

## DEPUTY LEADER'S PORTFOLIO

### EXB25 ACCOMMODATION REVIEW UPDATE REPORT - KEY DECISION

The Board received an update on the review of the Council's accommodation and requested that Members advise on their preferred option and approach.

#### Reason(s) for Decision

To promote and deliver an effective use of the Council's accommodation.

#### Alternative Options Considered and Rejected

An options assessment is contained in the report.

#### Implementation Date

1 October 2025.

RESOLVED: That the Board

- 1) note the current position with the accommodation review;
- 2) agree the preferred option, (option 1b); and
- 3) progress discussions with relevant stakeholders as outlined in sections 3.24 of the report.

Executive Director  
Environment &  
Regeneration

## ADULT SOCIAL CARE PORTFOLIO

### EXB26 COMMUNITY MEALS : REVIEW AND FUTURE OPTIONS - KEY DECISION

The Board received a report of the Executive Director – Adults, that sought approval to cease the provision of the Halton Community Meals Service during the financial year 2025/26.

#### Reason(s) for Decision

The decision impacts on all wards and communities within



the borough.

Alternative Options Considered and Rejected

A range of alternative options for meals provision will be considered for current recipients of Community Meals on an individual basis during 2025/26.

Implementation Date

It is proposed that the Community Meals service will cease on or before 31 March 2026.

RESOLVED: That the Board approves cessation of the provision of the Halton Community Meals service during the financial year 2025/2026, as per 3.11, 3.12 and 3.13 of this report.

Executive Director  
of Adult Services

**COMMUNITY SAFETY PORTFOLIO**

**EXB27 PUBLIC SURVEILLANCE INFRASTRUCTURE**

The Board received a report of the Executive Director – Environment and Regeneration, that sought approval for capital investment to upgrade the Council's CCTV and public surveillance infrastructure.

RESOLVED: That

- 1) Council be asked to approve inclusion in the capital programme, a scheme of works and £500k investment to address CCTV infrastructure, software and hardware as outlined in the body of the report; and
- 2) authority be delegated to the Executive Director of Environment and Regeneration in consultation with the Portfolio Holder for Community Safety and the Portfolio Holder for Corporate Services to prepare tender documents to procure this work.

Executive Director  
Environment &  
Regeneration

**MINUTES ISSUED: 18 July 2025**

**CALL-IN: 25 July 2025 at 5.00 pm.**

**Any matter decided by the Executive Board may be called in no later than 5.00pm on 25 July 2025.**

*Meeting ended at 3.00 p.m.*

**REPORT TO:** Executive Board  
**DATE:** 11 September 2025  
**REPORTING OFFICER:** Chief Executive  
**PORTFOLIO:** Leader  
**SUBJECT:** Urgent Decisions  
**WARDS:** Borough Wide

## **1.0 PURPOSE OF THE REPORT**

- 1.1 To bring to the attention of Executive Board urgent decision/s taken since the last meeting.

## **2.0 RECOMMENDATION: That the report is noted.**

## **3.0 SUPPORTING INFORMATION**

- 3.1 The Council's Constitution gives authority to the Chief Executive to take urgent decision/s which are required before the next formal meeting of Executive Board.

These must be made in consultation with the Leader of the Council where practicable, and with the Operational Director – Finance and/or Operational Director – Legal and Democratic Services, where necessary. They must also be reported for information to the next practically available meeting of the Board.

- 3.2 More information on each can be found on the Council's website:

<http://councillors.halton.gov.uk/mgDelegatedDecisions.aspx?bcr=1>

- 3.3 The urgent decision/s taken since the last meeting of Executive Board:

<b>Date Decision taken</b>	<b>Decision details</b>
8 August 2025	Waiver sign off for provision of a Edge of Care Clinical Psychologist and Mental Health Practitioner

## **4.0 POLICY IMPLICATIONS**

- 4.1 There are none other than the constitutional requirement to report urgent decisions for information.

## **5.0 OTHER IMPLICATIONS**

- 5.1 None.

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

None.

**7.0 RISK ANALYSIS**

7.1 The report is for information, and there are no risk issues arising from it.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 None.

**9. CLIMATE CHANGE IMPLICATIONS**

9.1 There are no climate change implications.

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

10.1 No background papers were used in the preparation of this report. Further information on the decision/s taken is available from the link in Paragraph 3.2.

**REPORT TO:** Executive Board  
**DATE:** 11 September 2025  
**REPORTING OFFICER:** Interim Chief Executive  
**PORTFOLIO:** Corporate Services  
**SUBJECT:** New Risk Management Policy  
**WARD(S):** Borough-wide

## **1.0 PURPOSE OF REPORT**

- 1.1 Following on from an External Audit visit and subsequent recommendations the Council was advised to urgently revise its Risk Management Policy.

A new proposed Policy, (see appendix 1) has been drafted in conjunction with subject matter experts at Zurich Municipal, the Council's Insurers.

The aim of the Policy is to provide direction and alignment to current Risk Management processes across all the Council's Directorates.

## **2.0 RECOMMENDED: That**

**1)the report be noted, and**

**2) the Board approves the updated Risk Management Policy, with changes outlined in Section 3.3 of this report.**

## **3.0 SUPPORTING INFORMATION**

- 3.1 Risk Management is a key aspect of Halton Borough Council's approach to handling uncertainties. This process is embedded in the Council's decision-making framework, ensuring alignment with its strategic objectives.
- 3.2 The Council is committed to fostering a positive risk culture that values openness, transparency, constructive challenge, and collaboration across all levels of the organisation.
- 3.3 Recommended changes within the new policy:  
(Section 4 of proposed Policy)
- Quarterly Risk Reports to Audit and Governance Board.
  - Quarterly Progress Reports to go to both Audit and Governance Board and the Executive Board.
  - Monthly Portfolio Holder meetings with formalised discussion of the Risk Register.

- A quarterly briefing provided to the Executive Board outlining priority strategic risks and risk management actions, aligned with performance and finance reporting.
  - To include Corporate/Directorate risks in quarterly performance reports to PPBs.
- 3.4 This draft Risk Management Policy was approved at Management Team, (June 3<sup>rd</sup>), and after consideration by Executive Board, it is also being considered by the Audit and Governance Board (both September 2025).
- 3.5 As part of this new approach, a new risk register and monitoring regime will also be implemented – this will be supported by training and a new toolkit for both Officers and Members, this will be developed and undertaken in collaboration with Zurich Municipal.

#### **4.0 POLICY IMPLICATIONS**

- 4.1 A new updated and operational Policy.

#### **5.0 FINANCIAL IMPLICATIONS**

- 5.1 An effective Policy will protect the Council's resources and reduce exposure to potential losses and liabilities.

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

- 6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence
- 6.2 Building a Strong, Sustainable Local Economy
- 6.3 Supporting Children, Young People and Families
- 6.4 Tackling Inequality and Helping Those Who Are Most In Need
- 6.5 Working Towards a Greener Future
- 6.6 Valuing and Appreciating Halton and Our Community

There are no direct implications for any of the Council's priorities listed above.

#### **7.0 RISK ANALYSIS**

- 7.1 The risk of not updating this Policy would be irresponsible and leave the Council open to potential accidents and claims. This Policy will put in place a number of key objectives which will collectively ensure effective Risk Management across the organisation.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 An Equality Impact Assessment will be undertaken as part of any new Council Policy being implemented.

**9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 None.

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

10.1 None under the meaning of the Act.

**Appendix 1: Halton Borough Council Draft Risk Management Policy**

# **HALTON BOROUGH COUNCIL**

## **RISK MANAGEMENT POLICY**



**2025 - 2028**

**Document Control:**

<b>Reference</b>	Halton Risk Management Policy 2025 - 2028
<b>Date</b>	February 2025
<b>Authors</b>	Rosie Marr Ella Dunne
<b>Approved By</b>	MM

**Version History:**

<b>Date</b>	<b>Version Number</b>	<b>Revision Notes</b>
February 2025	1	New Risk Management Policy
March 2025	2	New Risk Management Policy
June 2025	3	New Risk Management Policy



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2. Core Principles of Risk Management
3. Strategic Approach
4. Risk Management Process
5. Understanding Risk Appetite and Tolerance
6. Risk Management Levels
7. Managing Escalation and De-escalation of Risks
8. Risk Evaluation: Matrix and Scoring Criteria
9. Risk Register System
10. Roles and Responsibilities
11. Guidance, Education and Training
12. Driving Continuous Improvement
13. Review

## 1. Overview and Purpose

A **risk** is a potential future event or condition that may impact objectives, characterised by uncertainty – something which may happen, but hasn't yet. In contrast, an **issue** is a problem that has already occurred or is certain to happen, requiring immediate resolution. Risks are managed proactively to mitigate potential impacts, while issues demand reactive solutions to minimize immediate adverse effects. This distinction enables to effective allocation of resources, ensuring that both future uncertainties and present challenges are addressed appropriately.

Risk Management is a key aspect of Halton Borough Council's approach to handling these uncertainties. This process is embedded in the Council's decision-making framework, ensuring alignment with its strategic objectives. The Council is committed to fostering a positive risk culture that values openness, transparency, constructive challenge, and collaboration across all levels of the organisation.

**A well-defined and proactive risk management framework allows Halton Borough Council to:**

- Strengthen governance and boost stakeholder confidence
- Inform strategy development and decision-making processes
- Assess and deliver projects, programmes, and policy objectives effectively
- Allocate and prioritise resources efficiently
- Maintain high standards of operational efficiency
- Safeguard performance, assets, and other critical resources
- Achieve strategic objectives and drive improved outcomes
- Consider opportunities as well as threats on a balanced basis

This policy takes guidance from *"The Orange Book, Management of Risk - Principles and Concepts"* (HM Government, 2020), providing a structured framework to manage risks comprehensively and coherently throughout the organisation. The Council's approach emphasises the need to identify, assess, and address risks and opportunities in a consistent manner. This enables Halton Borough Council to embrace challenges while fostering innovation and excellence in service delivery.

**The key objectives for ensuring effective Risk Management are to:**

- Foster a risk-aware culture throughout the organisation.
- Integrate risk management into strategic and operational frameworks.
- Provide tools and support to help the Council anticipate and mitigate risks.
- Minimise the financial and operational impact of identified risks.
- Adapt to emerging risks and evolving external influences.

- Establish consistent and measurable methods for managing risks.

Halton Borough Council believes that effective risk management is a shared responsibility: it requires a collective understanding of risk at every level, supported by a culture that encourages accountability and informed decision-making.

As part of its corporate responsibility, Halton Borough Council aims to protect its resources and reduce exposure to potential losses and liabilities. The Council is committed to equipping its employees with the necessary skills, knowledge, and tools to manage risks effectively.

This commitment to risk management is a long-term priority for the Council, forming a key pillar of its governance practices. The approach is strongly supported by the Management Team, elected members, and the Audit and Governance Board, ensuring robust oversight and continuous improvement.

## 2. Core Principles of Risk Management

The HM Government *Orange Book (2020)* principles of risk management, adopted by Halton Borough Council, outlines the following key commitments:

- **Governance and Leadership:** Risk management is an essential component of governance and leadership, forming the foundation of how the Council is directed, managed, and controlled at all levels.
- **Integration into Activities:** Risk management is fully embedded in all Council activities, supporting informed decision-making and the achievement of objectives.
- **Collaboration and Expertise:** Risk management processes are collaborative, drawing on the best available information and expertise to ensure effectiveness.
- **Structured Processes:** The Council's risk management processes are systematic and include:
  1. **Risk Identification and Assessment:** Identifying and prioritising risks to determine appropriate management actions. Within this stage, it is also important to remain aware of risk proximity i.e. how soon a risk could impact the organisation.
  2. **Risk Treatment:** Selecting, designing, and implementing treatment options that support intended outcomes while managing risks to an acceptable level.
  3. **Monitoring:** Designing and operating integrated, insightful, and informative risk monitoring systems.
  4. **Reporting:** Delivering timely, accurate, and meaningful risk reporting to enhance decision-making and support oversight responsibilities.

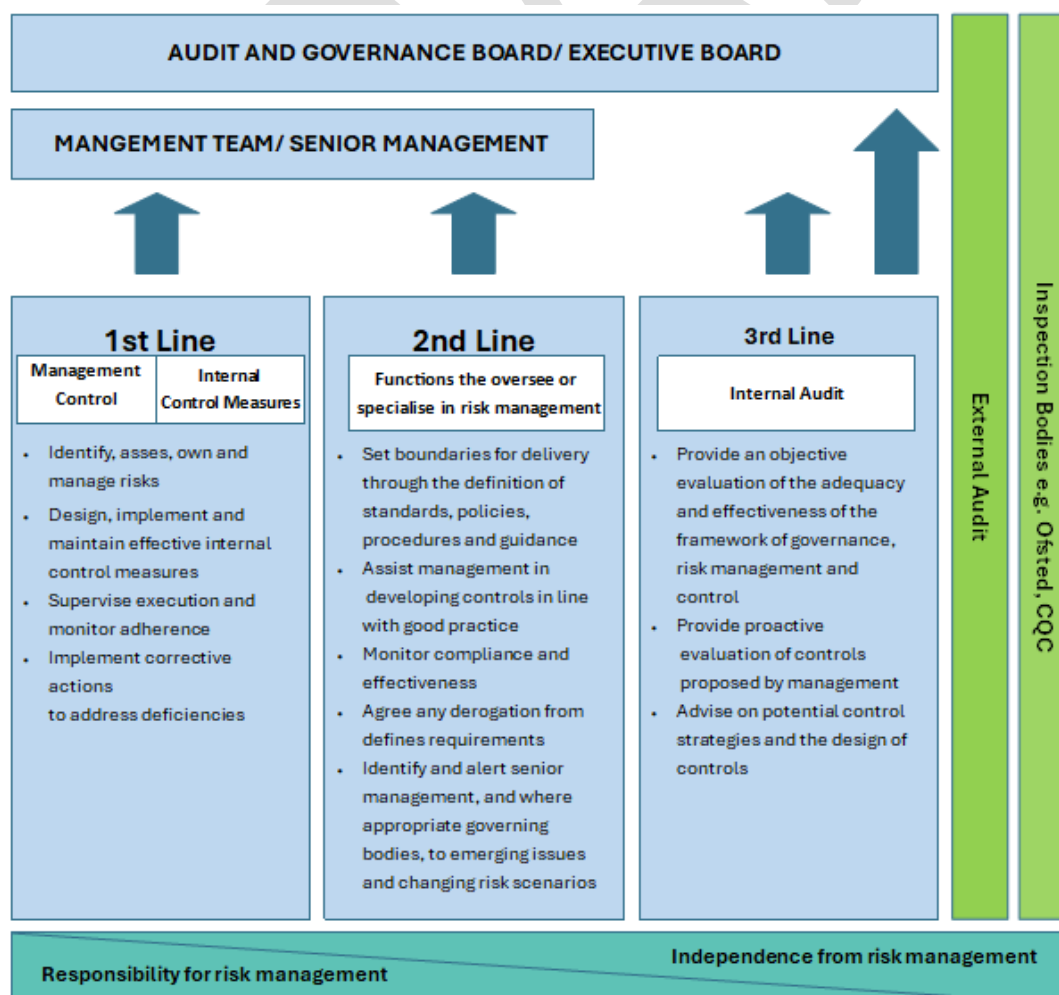
5. **Continuous Improvement:** Risk management is continuously improved through learning and experience, ensuring that practices evolve to address emerging challenges and opportunities.

By adhering to these principles, Halton Borough Council ensures a robust, informed, and proactive approach to managing risk across all levels of the organisation.

### 3. Strategic Approach

Led by Management Team, but with responsibility embedded across all levels of the Council's structure, Halton integrates risk management into all areas of strategic planning and prioritisation. This approach supports the Council in its pursuit of its strategic objectives, enhances service delivery, and ensures value for money. This approach also allows Halton to remain agile in responding to emerging challenges and new opportunities.

Halton Borough Council adopts successful risk management practices guided by the HM Government Orange Book – *Management of Risk – Principles and Concepts (2020)*. These practices operate within a framework of robust governance and leadership, integrating risk management across organisational activities to support informed decision-making aligned with the Council's strategic priorities.



The Council fosters a collaborative and evidence-based approach to risk management, drawing on the best available information and expertise. This is underpinned by a comprehensive risk management process and a commitment to continuous improvement. Halton Borough Council utilises a *Three Lines of Defence* model, where all employees share responsibility for managing risks (see diagram above).

Halton's second line of defence within Risk Management includes compliance functions, such as the Information Governance Team, the Performance Management Framework, Health and Safety, Emergency Planning, and the Quality Assurance function within Adult Social Care.

## 4. Risk Management Process

Halton Borough Council's risk management process follows a structured approach, ensuring that:

- Risks are **identified and assessed** to determine their priority and the most effective methods for management.
- Appropriate **treatment** options are selected, designed, and implemented to achieve desired outcomes while managing risks to an acceptable level.
- Comprehensive, integrated, and insightful risk **monitoring** systems are established to provide ongoing oversight.
- Timely, accurate, and meaningful risk **reporting** is conducted to improve decision-making and support the Senior Management Team and the Council in fulfilling their responsibilities.
- The risk management process goes through **continuous improvement**, where systems, processes are refined over time. Although risk management has a sequential approach, it is often iterative in practice.



## **Risk Identification and Assessment**

New and emerging risks are identified by considering internal and external changes, tangible and intangible risk sources, uncertainties, assumptions, the reliability of information, and risk proximity (staff should remain aware of how close potential risks are to affecting operations and decision-making). The identification of new risks should be agile and may occur informally at the Service or Management Team level or through regular risk meetings. Key risks identified at the Service level are consolidated into the Directorate Risk Register, with any new strategic risks being reported immediately to the Management Team by the Risk Management Lead.

These risks are then reviewed by members of the Senior Management Team and the Risk Management Lead to determine whether they should be addressed at an operational or strategic level:

- **Operational risks** typically arise from flawed or failing processes, policies, or systems and are more closely tied to day-to-day activities. These risks are generally managed at the directorate level.
- **Strategic risks** relate to the potential failure to achieve corporate objectives and often have broader, cross-cutting implications. Responsibility for these risks is typically held by the Management Team.

The Corporate Risk Register is subsequently updated with key corporate risks from the Directorate Risk Register, along with any other relevant risks reported by the Management Team. Corporate risks are highlighted in the quarterly reports to the Audit and Governance Board, which has the authority to review and challenge risks, and raise concerns with the Council's Executive Board.

It is important to note that throughout this policy, quarterly meetings and reporting may not always coincide with financial quarters, but will occur 4 times per year.

To proactively mitigate potential risks, the Council has established robust controls, including annual training programmes, ensuring it remains ahead in limiting risk impact.

## **Risk Treatment**

Each identified risk is addressed through a 'mitigation plan' by the risk owner, which outlines the treatment strategy. This plan takes into account the risk appetite, expected benefits, actions, ownership, resources, assurance sources, performance indicators, constraints, and a target resolution date.

## **Risk Monitoring**

Continuous monitoring before, during, and after the implementation of risk treatments helps the Council understand how its risk profile evolves. This provides assurance that

risks are managed to a manageable level. Transparent recording and reporting of these activities enhance decision-making, improve practices, and ensure proper engagement with all stakeholders involved in risk management.

## Risk Reporting

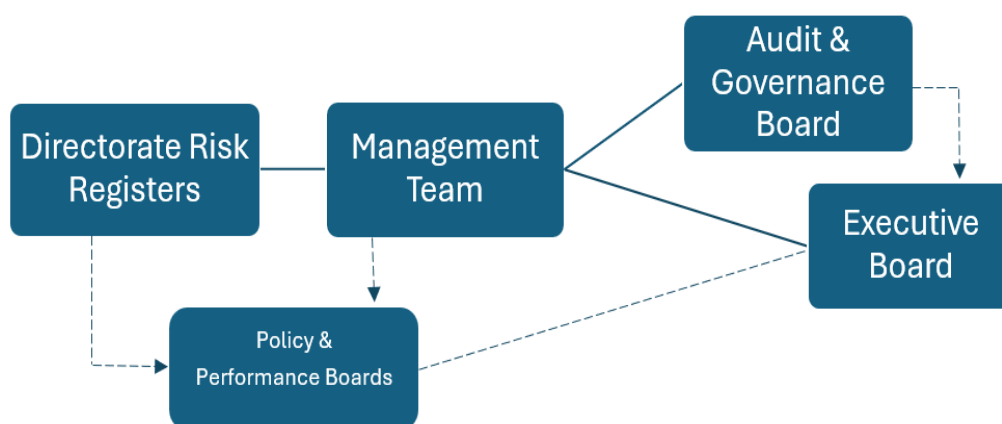
The risk reporting process is co-ordinated by the Risk Management Lead, who provides input in each stage of reporting. The Risk Management Lead partners with Directorates to develop and maintain the Directorate Risk Register. In collaboration with the Management Team, the Risk Management Lead use the Directorate Risk Register to facilitate the escalation and de-escalation of risks on the Corporate Risk Register, while also identifying any other relevant risks during quarterly Management Team risk meetings. The Management Team prepares a quarterly progress report on risk management for the Audit and Governance and the Executive Board. The Audit and Governance Board has the authority to review, challenge, and make recommendations to the Executive Board regarding identified risks.

A quarterly briefing is provided to the Executive Board outlining priority corporate risks and risk management actions, aligned with performance and finance reporting. This quarterly cycle ensures comprehensive and ongoing risk monitoring.

This briefing will also be provided to all Policy and Performance Boards.

Annually, a risk assurance briefing and review of the current risk management strategy are presented to the Audit and Governance Board.

## Risk Management Proce



## Project Risk Policy

Programmes and projects manage risks using a model that tracks risks, assumptions, issues, and dependencies, which are reviewed by the Transformation Board overseeing the programme of work, in terms of all Transformation projects. This approach will also apply to all other projects being undertaken within the Council.

## 5. Understanding Risk Appetite and Tolerance

Halton Borough Council recognises that risk is an inherent part of delivering and commissioning services. The Council's approach is to consider all options for responding to risks appropriately, enabling informed decisions that support successful delivery and value for money.

The Council does not seek to, and cannot, avoid all risks; however, the acceptance of risk is based on ensuring that potential benefits and risks are thoroughly evaluated, and appropriate mitigation measures are in place before decisions are made. The Council recognises that its risk appetite will vary depending on the activity and the ability to implement controls. Consequently, different risk appetites and tolerances are applied.

The Council's Management Team conduct an annual review of risk appetite across the key risk categories to ensure the framework remains fit for purpose and aligned with the organisation's strategic direction. As the owners of the Council's risk appetite, the Management Team use this review to guide the treatment of specific risks. The Council's values (including transparency, ownership, ambition, and consideration for people and customers) inform its approach to risk. While the aim is to reduce high risks to a manageable level wherever possible, the Council also recognises the importance of avoiding over-control.

Halton Borough Council utilises three levels of risk appetite:

- **Low Risk/Averse:** Avoids almost all risk, only engaging in activities with virtually no risk.
- **Medium Risk/Cautious:** Chooses safe options with low risk but may accept some risk for significant benefits.
- **High Risk/Eager:** Actively pursues innovation and opportunities, even when high residual risks are involved.

Risk appetite and tolerance are considered in relation to strategic outcomes and service delivery. The Council deems risks unacceptable if they:

- Breach laws or regulations



- Endanger the safety of residents, employees, or service users
- Critically harm the Council's reputation
- Threaten the Council's financial resilience or future operations

The Council acknowledges diverse risks that could impact its ability to meet statutory requirements and strategic goals. These risks categories include:

1. **Infrastructure:** Functioning of transport, communications and utilities infrastructure. The impact of storms, floods, pollution.
2. **Legislative:** Effects of change of government policy, UK or EC legislation, national or local political pressures or control, meeting the administration's manifesto commitments. (pushing boundary to maximise)
3. **Social Factors:** Effects of changes in demographic, residential and social trends on ability to deliver objectives.
4. **Technology:** Capacity to deal with obsolescence and innovation, product reliability, development and adaptability or ability to use technology to address changing demands.
5. **Commercial:** Affecting the competitiveness (cost and quality) of the service &/or ability to deliver Best Value and general market effectiveness. – Commercial development including assets.
6. **Stakeholder-related factors:** Satisfaction and representation of: the community, users, central and regional government and other stakeholders.
7. **Environmental:** Environmental consequences of progressing strategic objectives (e.g. in terms of energy efficiency, pollution, recycling emissions etc.) Also relating to pollution, noise or the energy efficiency of ongoing operations.
8. **Financial:** Associated with accounting and reporting, internal financial delegation and control, e.g. schools finance, managing revenue and capital resources, neighbourhood renewal funding taxation, pensions.
9. **Human Resources:** Recruiting and retaining appropriate staff and applying and developing skills in accordance with corporate objectives, employment policies, health & safety, and absence rates.
10. **Contacts and Partnerships:** Failure of contractors to deliver services or products to the agreed cost & specification. Procurement, contract and

relationship management. Overall partnership arrangements, e.g. for pooled budgets or community safety. PFI, LSVT and regeneration.

11. **Tangible Assets:** Security of land and buildings, safety of plant and equipment, control of IT hardware.
12. **Cyber:** Minimising attack risks whilst also avoiding becoming a hyper controlled environment which can make access to technology more difficult for organisation and staff.
13. **Governance and Procedures:** Risks inherent in professional work, such as assessing patients' welfare or designing buildings or teaching vulnerable children, response to the Human Rights Act.

It is also vital to consider **Governance Factors**, including:

- **Integrity:** Fraud and corruption, accountability and openness, legality of actions and transactions and limits of authority
- **Leadership:** Reputation, authority, democratic renewal, trust and identity
- **Policy and Strategy:** Ensuring clarity of purpose and communication. Policy planning, community planning and monitoring and managing overall performance.
- **Data and Information for Decision Making:** Data protection, data reliability and data processing. Information and communication quality. Effective use and interpretation of information. Control of data and information. E-government and service delivery.
- **Risk Management:** Incident reporting and investigation, risk measurement, evaluation and monitoring. Taking advantage of opportunity.

By systematically addressing these risks, Halton Borough Council ensures resilient and effective service delivery while safeguarding its strategic priorities.

## 6. Risk Management Levels

Halton Borough Council's approach to risk management is built upon ensuring that risks are effectively and consistently managed across all levels of the organisation.

**Strategic Level:** Strategic and business-critical risks are managed at the Management Team level. The Management Team, supported by the Risk Management Lead, reviews risk reports and the Corporate Risk Register quarterly to ensure alignment with organisational priorities. This level sets the tone for a culture of effective risk

management across the entire Council. The Audit and Governance Board plays a vital role in reviewing risks and overseeing the risk management strategy.

**Service Level:** Day-to-day management activities provide assurance that tactical and operational risks arising from service areas are identified, assessed, mitigated, monitored, and documented. Strong collaboration between the Directors, Service Managers, and the Risk Management Lead ensures a consistent and effective risk management approach within and across services.

**Programme/Project Level:** Risks are identified early in the programme/project lifecycle, starting from the initial business case stage. Ongoing risk management throughout ensures successful delivery of programme and project objectives. The Risk Management Lead will support in aligning risk management practices with both service-level and strategic-level requirements, ensuring appropriate escalation when necessary.

Through this structured, multi-level approach, Halton Borough Council ensures that risk management is a fully integrated and proactive part of achieving its strategic objectives.

## 7. Managing Escalation and De-escalation of Risks

**Strategic risks**, as opposed to a ‘big risk’, are those where there is a likelihood that an event could disrupt the whole Council’s business model or strategic objectives. If a single risk or a group of risks meet the escalation criteria outlined below, the risk(s) should be escalated to the Management Team and the Risk Management Lead. The risk owner is initially responsible for determining an appropriate course of action or escalating the issue further up the process if:

- The risk becomes too complex or unwieldy to manage at the current level.
- The risk rating cannot be controlled or managed effectively at its current level.
- The risk remains extremely high even after mitigation measures are applied.
- The risk could impact multiple services or projects if it materialises.
- The risk appears beyond the risk owner’s control.
- The risk moves outside the boundaries of the Council’s risk appetite.

**De-escalation** of a risk or set of risks should also be considered when they become operational, related to processes or transactions, and meet the following criteria:

- The risk can be effectively controlled or managed at the Service, Directorate or Programme level.
- The risk score meets its target level or decreases significantly.
- The risk event is limited to a single service area or team, with minimal wider impact.

- The risk is monitored after de-escalation to ensure it is being properly managed.

### Escalation/De-escalation Process

If a risk owner identifies a need to escalate or de-escalate a risk or group of risks based on the above criteria, they should:

- **Seek Advice:** Consult the Risk Management Lead to discuss the proposed change in risk level.
- **Engage Stakeholders:** For risks that are multi-service or organisation-wide, consult with other relevant parties before making a recommendation to change the risk level.
- **Recommend Action:** Present the recommendation for escalation or de-escalation, ensuring it is informed by consultation and aligned with the Council's risk management framework.

By following this process, Halton Borough Council ensures that risks are managed at the most appropriate level, supporting effective governance and decision-making across the organisation.

#### Escalation: From Service Area/ Directorate Level to Corporate Risk Register



#### De-escalation: From Service Area/ Directorate Level to Corporate Risk Register

## 8. Risk Evaluation: Matrix and Scoring Criteria

Halton Borough Council employs a risk matrix to assess risks and understand the level of exposure. This evaluation informs the appropriate level of risk treatment needed to manage, reduce, or prevent risks from occurring.

By ensuring all business risks are assessed and managed using the Council's established risk management methodology, consistency is maintained across the risk management framework. This approach allows risks to be compared and reported on in a consistent manner. Additionally, it enables the Council to map its collective risk exposure across specific activities, objectives, outcomes, functions, or the entire operation of the Council.

## Halton's Risk Management Scoring System

Risk Score	Overall Rating (Impact x Likelihood)
20-25	Very High
10-20	High
4-10	Medium
3-8	Low
1-4	Very Low

Impact/ Severity	Very High	5	5	10	15	20	25
	High	4	4	8	12	16	20
	Medium	3	3	6	9	12	15
	Low	2	2	4	6	8	10
	Very Low	1	1	2		4	5
			1	2	3	4	5
			Highly Improbable	Improbable	Possible	Probable	Highly Probable
			Likelihood/ Probability				

## Likelihood/Probability

Factor	Score	Description
Highly probable	5	More than 75% chance of occurrence.
Probable	4	40% – 75% chance of occurrence.
Possible	3	10% – 40% chance of occurrence.
Improbable	2	5% – 10% chance of occurrence.
Highly Improbable	1	Less than 5% chance of occurrence.

## Impact/Severity

Factor	Score	Effect on Service	Reputation	Personal Safety	Personal Privacy Infringement	Failure to Provide Statutory Duties/ Meet Legal Requirements	Financial	Effect on Project Objectives / Schedule Deadlines
High	5	Major loss of services, including several important areas of service and/or protracted period. Service disruption 5+ days.	Adverse and persistent national media coverage. Adverse central government response, involving (threat of) removal of delegated powers. Officer(s) and/or Members forced to resign.	Death of an individual or several people.	All personal details compromised/ revealed.	Litigation/ claims/ fines from: Departmental £250k+ Corporate £500k+.	Costing over £500,000. Up to 75% of Budget.	Complete failure of project/ extreme delay of 3 months or more.
Severe	4	Complete loss of an important services area for a short period. Major effect to services in one or more areas for a period of weeks. Service disruption 2-3 days.	Adverse publicity in professional/ municipal press affecting perception/ standing in professional/local government community. Adverse local publicity of a major and persistent nature.	Major injury to an individual or several people.	Many individual personal details compromised/ revealed.	Litigation/ claims/ fines from: Departmental £50k to £125k Corporate £100k to £250k.	Costing between £50,000 and £500,000. Up to 50% of Budget.	Significant impact on project or most of expected benefit fail/ major delay of 2-3 months.
Medium	3	Major effect to an important services area for a short period. Adverse effect to services in one or more areas for a period of weeks. Service disruption 2-3 days.	Adverse local publicity/ local public opinion aware. Statutory prosecution of a non-serious nature.	Severe injury to an individual or several people.	Some individual personal details compromised/ revealed.	Litigation/ claims/ fines from: Departmental £25k to £50k Corporate £50k to £100k.	Costing between £5000 and £50,000. Up to 25% of Budget.	Adverse effect on project/ significant slippage of 3 weeks - 2 months.
Low	2	Brief disruption of important services area. Significant effect to non-crucial services area. Service disruption 1 day.	Contained within section/ unit or Directorate. Complaint from individual/ small group, of arguable merit.	Minor injury or discomfort to an individual or several people.	Isolated individual person detail compromised/ revealed.	Litigation/ claims/ fines from: Departmental £12k to £25k Corporate £25k to £50k.	Costing less than £5000. Up to 10% of Budget.	Minimal impact to project/ slight delay of less than 2 weeks.
Highly Improbable	1	Brief to zero disruption. Minor effect to non-crucial services area. Less than 1 day disruption.	Contained with no complaints.	Minor to zero injury to an individual or several people.	Rare chance or isolated individual personal detail compromised/ revealed.	Litigation/ claims/ fines from: Departmental £1k to £11k Corporate £12k to £25k.	Costing less than £1000.	Minimal impact to project/ slight delay of less than 1 week.

## 9. Risk Register System

As part of strong governance, Halton Borough Council maintains a Corporate Risk Register, with designated individuals assigned as responsible officers to ensure that risks, along with their treatment and assurance measures, are effectively monitored and managed.

The Corporate Risk Register is a vital tool for capturing and reporting on risk activities and the Council's overall risk profile. It is a dynamic, 'live' document where new, strategic risks are recorded, existing risks are managed to an acceptable level, some are closed, and others may be de-escalated to service area, programme, or the Directorate Risk Register for ongoing operational management. Additionally, services, programmes, projects, and companies can escalate risks to the Corporate Risk Register when necessary.

The Risk Register will be available on the staff intranet and regularly updated, alongside a Risk Management Toolkit.

## 10. Roles and Responsibilities

Group or Individual	Responsibilities
<b>Chief Executive</b>	<ul style="list-style-type: none"> <li>• Demonstrate a clear understanding and responsibility of the nature of the key risks facing the Council.</li> <li>• Be accountable for the Corporate Risk Register.</li> <li>• Ensure that risk management is embedded within the job descriptions of the Management Team.</li> <li>• Promote a positive risk management culture.</li> </ul>
<b>Executive Board</b>	<ul style="list-style-type: none"> <li>• Approve and review the Authority's Corporate Risk Register.</li> <li>• Updated on a quarterly basis.</li> </ul>

<b>Policy and Performance Boards</b>	<ul style="list-style-type: none"> <li>• Challenge and review risk management arrangements and activities within their areas of responsibility through corporate performance monitoring arrangements and mid-year risk mitigation reports.</li> </ul>
<b>Audit &amp; Governance Board</b>	<ul style="list-style-type: none"> <li>• Updated by Management Team quarterly.</li> <li>• Review the adequacy of arrangements for identifying and managing business risks, including the Corporate Risk Management Policy, its implementation and approval.</li> <li>• Review the robustness of the Corporate Risk Register and the adequacy of the associated risk management arrangements.</li> <li>• Make such recommendations to the Executive Board when necessary and appropriate.</li> <li>• Receive and consider regular reports on the risk environment and associated management action.</li> <li>• Monitor effective development of risk management in the Council.</li> <li>• Monitor progress in addressing risk-related issues reported to the Board.</li> </ul>
<b>S151 Officer</b>	<ul style="list-style-type: none"> <li>• Provide advice to underpin the financial regulations that Members, officers, and others acting on behalf of the authority, are required to follow including matters of financial risk.</li> </ul>
<b>Management Team</b>	<ul style="list-style-type: none"> <li>• Review the Council's risk management policy.</li> <li>• Review the effective management of risks and internal controls and governance supported by the Risk Management Lead.</li> <li>• Own, review and maintain risks on the Corporate Risk Register with quarterly reviews in place.</li> <li>• Consult with members as required to appraise them of corporate risks.</li> <li>• Promote a positive risk management culture and monitor the effectiveness of risk management activities.</li> <li>• Agree any resources required to support the work.</li> <li>• Review the Annual Governance Statement.</li> </ul>



	<ul style="list-style-type: none"> <li>• Approve the Corporate Business Continuity Plan.</li> </ul>
<b>Directorate Level</b> <i>Reporting quarterly* to Management Team, with strategic risks reported immediately.</i>	<ul style="list-style-type: none"> <li>• Ensure that the Directorates manage risk effectively in line with their Directorate Plan and objectives.</li> <li>• Analyse information from Quarterly Monitoring Reports to assess &amp; prioritise risks according to Departmental Service activity and corporate objectives.</li> <li>• Enter all risks onto the Directorate Risk Register and submit to the Risk Management Lead.</li> <li>• Agree any resources required to support the work within Directorate.</li> <li>• Communicate and involve relevant employees, who should manage risks in relation to their service areas.</li> <li>• Maintain appropriate Directorate Business Continuity plans.</li> </ul>
<b>Service Level Teams</b>	<ul style="list-style-type: none"> <li>• Contribute to the effective implementation of risk management through reporting risks to their appropriate Director, supported by the Risk Management Lead.</li> <li>• Promote a positive risk management culture.</li> <li>• Provide updates concerning the implementation of all high- risk mitigation measures.</li> <li>• Maintain appropriate Business Continuity plans.</li> </ul>
<b>Risk Management Lead</b> <i>Reporting regularly to Management Team.</i>	<ul style="list-style-type: none"> <li>• Prepare and promote the Council's risk management policy.</li> <li>• Maintain and report on the Council's integrated Corporate Risk Register.</li> <li>• Advise and report to Management Team, Internal Audit and the Audit and Governance Board on whether the Councils' governance, appropriate risk management processes, control systems and operational procedures are in place and operating properly.</li> <li>• Provision education and training for the Council regarding risk management.</li> <li>• Share Risk Management Toolkit and Risk Register on Intranet for availability of all staff.</li> </ul>

	<ul style="list-style-type: none"> <li>• Strive for continuous improvement of risk management across the organisation and promote a positive risk management culture.</li> </ul>
<b>Internal Audit</b> <i>Reporting annually to the Audit and Governance Board.</i>	<ul style="list-style-type: none"> <li>• Advise and report independently and objectively on whether the Councils' governance, appropriate risk management processes, control systems and operational procedures are in place and operating properly.</li> </ul>
<b>All Staff Members</b>	<ul style="list-style-type: none"> <li>• Proactively identify risks and report to their managers where necessary.</li> <li>• Report inefficiencies, irrelevant or unworkable controls.</li> <li>• Ensure loss events or near misses are escalated promptly to management.</li> <li>• Attend relevant training courses focusing on risk and risk management.</li> </ul>
<b>All Elected Members</b>	<ul style="list-style-type: none"> <li>• Provide scrutiny and overview of reported risks.</li> </ul>

Quarterly meetings, reports and updates may not always coincide with financial quarters.

<b>In relation to individual risks:</b>	
<b>Risk Owner</b>	<ul style="list-style-type: none"> <li>• Accountable for the management and control of all risks assigned to them. Determine, authorise, implement, and monitor the selected controls and actions to address the threats and maximise the opportunities.</li> </ul>
<b>Mitigation and Control Owner</b>	<ul style="list-style-type: none"> <li>• Responsible for the management and control of all risks assigned to them. Implement and monitor the selected controls and actions to address the threats and maximise the opportunities.</li> </ul>

	<ul style="list-style-type: none"> <li>Accountable for providing the assurance that specified management control is effective and fit for purpose.</li> </ul>
<b>Action owner</b>	<ul style="list-style-type: none"> <li>Responsible for managing the action on the owner's behalf and to keep them apprised of progress.</li> </ul>

## 11. Guidance, Education and Training

The Risk Management Lead is responsible for developing the organisation's risk management capability by providing guidance, education, training, and support to the workforce.

Guidance, educational materials, and training resources are regularly reviewed to ensure they meet the needs and levels of the organisation, align with the HM Government *Orange Book* (2020), and foster a positive, dynamic risk culture with strong engagement from stakeholders.

## 12. Driving Continuous Improvement

Risk management is an ongoing and evolving process that Halton Borough Council is committed to, ensuring agility in responding to internal and external changes. The Council will continually strive to enhance the suitability, adequacy, and effectiveness of its risk management framework, drawing on lessons learned and conducting an annual review of the risk management strategy. As any gaps and opportunities for improvement are identified, the Council will develop plans, assign tasks, and delegate actions to those responsible for their implementation.

## 13. Review

The risk management strategy, guidance and associated working templates will be annually reviewed by the Risk Management Lead as part of the Council's overall approach to the risk management process.

**REPORT TO:** Executive Board

**DATE:** 11th September 2025

**REPORTING OFFICER:** Interim Chief Executive

**PORTFOLIO:** Corporate Services

**SUBJECT:** Equality, Diversity and Inclusion Policy

**WARD(S)** Borough Wide

**1.0 PURPOSE OF THE REPORT**

- 1.1** To inform the Board of the recently developed Equality, Diversity and Inclusion Policy.

**2.0 RECOMMENDED: That**

- 1) the report be noted; and**
- 2) the Board approves the Policy (Appendix 1.0).**

**3.0 SUPPORTING INFORMATION**

- 3.1** In 2023, the decision was made to forego a Equality, Diversity and Inclusion (EDI) Policy in the format of a 30+ paged document, and to present our EDI commitments and aims in Halton Borough Council's EDI Vision and Objectives, as well as the EDI Action Plan. That decision came about due to low interaction and viewing figures of the previous Policy document.
- 3.2** It has since become apparent that some form of Equality, Diversity and Inclusion Policy is still needed. As a local council, Halton Borough Council (HBC) is liable to receive Freedom Of Information requests, some of which have been EDI focussed and around what information and guidance we publish for:
- a) our workforce
  - b) the public
- 3.3** The establishment of the HBC Corporate Staff Network Groups (SNGs) has also emphasised the need to have the EDI Policy in the format of an informative document. Members of the SNGs are keen to know how they, and others who possess the same Protected Characteristic(s), will be supported at work.

- 3.4** As a public sector body, HBC has specific equality duties that require us to, in the exercise of our functions and decisions, have due regard to:
- Eliminate unlawful discrimination, harassment and victimisation
  - Advance equality of opportunity
  - Foster good relations
- 3.5** One of the tangible ways to show our compliance is through the physical form of a Policy
- 3.6** It is for these reasons that we are therefore wanting to implement the accompanying Equality, Diversity and Inclusion Policy.
- 3.7** The Equality, Diversity, and Inclusion Policy sets out how Halton Borough Council meets its duties and responsibilities under the Equality Act 2010. In detail, it covers our vision and commitments, the roles and responsibilities of employees and elected members, and managers; the Protected Characteristics and how HBC supports them specifically, our training and development available to all HBC colleagues, and how we comply with the Public Sector Equality Duty by carrying out Equality Impact Assessments. The Policy also highlights schemes we have in place to advance equality of opportunity, like the Staff Network Groups and Reverse Mentoring.
- 3.8** The Policy will be in place as a source of information for employees and managers.
- a) Employees can learn and understand how they will be supported
  - b) Managers can learn and understand what support they can offer their employees, and be supported in doing so
- 3.9** For specific queries that may not have been covered within the Policy, there is signposting on where and from who more information can be found.
- 3.10** To ensure the Policy is as accessible as possible, the document has been formatted in a specific way. The page colour, font size and type, line spacing, and the alignment have all been chosen to provide accessibility, especially for people with neurodiversity and colour blindness. In the reviewing process, the document was also listened to through Immersive Reader to ensure those using this feature or similar (e.g. screen readers) would have the information relayed to them correctly.
- 3.11** If the implementation of this Policy is approved, we would also like to display the same information within the document on the intranet, to provide a slightly more interactive version for colleagues. This

would be located under the newly added Equality, Diversity and Inclusion section on the Organisational Development page of the intranet. The aim is to achieve more engagement, which usually comes on the back of more interactive content.

#### **4.0 POLICY IMPLICATIONS**

- 4.1** This EDI Policy will work alongside many of the HR Policies, including Bullying and Harassment, and Flexible Working. The content will inform on and act as a source of guidance in the reviewing/ developing of any new and existing HR Policies, especially those relating to specific Protected Characteristics, i.e. pregnancy policies.

#### **5.0 FINANCIAL IMPLICATIONS**

- 5.1** Implementing this Equality, Diversity and Inclusion Policy should have no negative financial implications.
- 5.2** With our commitments and our expectations of our workforce clearly defined, the Policy should contribute towards a decrease in successful harassment, discrimination (direct or indirect), or bullying claims made by employees, equating to fewer financial repercussions.

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

##### **6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence**

There are some Protected Characteristics, such as Disability including Neurodiversity, that require reasonable adjustments to enable employees to achieve their full potential. Enforcing and promoting the allowance of these reasonable adjustments could: improve health for those with medical conditions by allowing them to adapt their working conditions as needed, promote wellbeing through the reassurance that as an organisation we are willing to work with colleagues to accommodate their needs, and support greater independence in carrying out their role.

##### **6.2 Building a Strong, Sustainable Local Economy**

None at this time.

##### **6.3 Supporting Children, Young People and Families**

This EDI Policy applies to Halton Borough Council's workforce, meaning Children and Young People within Halton won't be affected directly by the Policy. However, as the commitments,

expectations and support detailed within centre around the Protected Characteristics, one of which being Age, Children and Young People could be affected indirectly. As our commitments and values are instilled in colleagues through the Policy, they will be able to apply that way of working in their roles, some of which will be focussed around supporting children, young people and families.

**6.4 Tackling Inequality and Helping Those Who Are Most In Need**  
Having the EDI Policy in place will clearly outline the Council's responsibilities and expectations of its workforce in working towards our EDI Objectives. With each of the Protected Characteristics, and the support we provide each of them, defined, the Policy can act as a first port of call on how to tackle inequality within the workforce. The Policy should help guide colleagues on what they may be able to do, either as a manager, or an employee, to support the advancement of EDI within the Council.

**6.5 Working Towards a Greener Future**  
None at this time.

**6.6 Valuing and Appreciating Halton and Our Community**  
The Policy highlights the importance of recognising the benefits of a diverse workforce and community, and the different talents and perspectives those from different backgrounds can bring to the table. Those same diversities and talents will be found in Halton and its communities, meaning if the Policy can instil those values into our employees about our workforce, those same mindsets should be applied when colleagues work in our service delivery areas.

## **7.0 RISK ANALYSIS**

**7.1** By agreeing the implementation of the EDI Policy, the risk of non-compliance within the Public Sector Equality Duty will be greatly reduced.

**7.2** Setting out our expectations and commitments when it comes to EDI and how it is incorporated in our workforce and the delivery of our services will reduce the risk of discrimination, victimisation and harassment.

## **8.0 EQUALITY AND DIVERSITY ISSUES**

**8.1** As stated within the body of the Report.

**8.2** An Equality Impact Assessment has been completed to support the Policy.

## **9.0 CLIMATE CHANGE IMPLICATIONS**

**9.1** Not applicable.

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

**10.1** Equality Act 2010



# Halton Borough Council Equality, Diversity and Inclusion Policy June 2025



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## 1.0 Introduction

This Equality, Diversity, and Inclusion (EDI) Policy, sets out how Halton Borough Council meets its duties and responsibilities under the Equality Act 2010.

**Equality** – Equality means ensuring people are treated fairly, giving them equitable access to information, opportunities, services, and employment.

**Diversity** – Diversity is about recognising, acknowledging, and respecting differences within our community and our workforce, and that people have different needs based on protected characteristics, some of which they share with others.

**Inclusion** – Inclusion means creating an environment where everyone feels welcome and valued, especially those who might otherwise be excluded or marginalised.

## 2.0 Our Vision and Commitments

At Halton Borough Council, our vision is simply to do all within our power to create, promote and sustain an equitable society and environment that fosters positive interactive relationships where people are treated with respect, dignity and fairness.

The Council seeks to create and promote a culture where people of all backgrounds and experience feel appreciated and valued. At HBC we are all accountable for upholding an environment that is accessible and welcoming to all, as well as doing our bit to continue to work towards achieving our [EDI Objectives](#).

We are committed to seeking to employ a workforce that reflects the diverse community that we serve and are part of, as well as providing equality of opportunity. We will work to ensure that our employees, Elected Members, and service users are treated fairly and are not subjected to unlawful discrimination by the Council on the basis of their Protected Characteristic.

### 3.0 Scope

This policy applies to:

- Employees
- Officers
- Council Members
- Organisations HBC has procured
- Contract workers
- Volunteers
- Students

This policy covers **all** of Halton Borough Council's **functions** and **policies**.

### 4.0 Equality Act 2010 and the General Public Sector Equality Duty

As a public sector body, HBC has specific equality duties that require us to, in the exercise of our functions and decisions, have due regard to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity
- Foster good relations

The [Equality Act 2010](#) and the [Public Sector Equality Duty](#) provide a legal framework to protect people from bullying, discrimination, harassment, and victimisation in the workplace and wider society.

### 5.0 Roles and Responsibilities

Equality, Diversity and Inclusion is the responsibility of all HBC employees. We are all accountable for upholding an environment that is accessible and welcoming to all, as well as doing our bit to continue to work towards achieving our EDI Objectives.



## **5.1 Employees' and Elected Members' Responsibilities:**

- Read, understand and practically apply this policy alongside the relevant Dignity at Work, and the Code of Conduct documents.
- Challenge and report unacceptable behaviour in a safe manner via one of the outlined routes and in accordance with the Dignity at Work, and the Code of Conduct documents. Both formal and informal routes are covered in these policies and procedures.

## **5.2 Managers' Responsibilities:**

- Set a good example by treating all members of the Council with dignity and respect and challenging unacceptable behaviours
- Ensure all employees are aware of this Policy and know how to report discrimination, harassment or bullying, and that reporting incidents does not result in victimisation;
- Present their employees with information (or knowledge about where to find such information) about employee rights as defined within the scope of the Council's policies
- Deal with complaints fairly, equitably, thoroughly, confidentially and within the agreed timescales.

## **6.0 Protected Characteristics**

Protected characteristics are specific traits or characteristics that are safeguarded by law to ensure equitable treatment for all individuals.

The nine protected characteristics set out in the Equality Act 2010 are:

- Sexual Orientation
- Age
- Disability, which includes neurodiversity
- Gender Reassignment
- Marriage and Civil Partnership

- Pregnancy and Maternity/Paternity
- Race, which includes colour and nationality – citizenship, ethnic or national origins
- Religious Belief, which includes not having one
- Sex



At HBC, we also recognise two extra Protected Characteristics, and they are:

- Carers – those with caring responsibilities for another person(s), outside of a standard parental role
- Socio-economic status

## 6.1 How HBC supports the Protected Characteristics:

**Sexual Orientation** – HBC does not discriminate against anybody based on their sexual orientation. This includes, lesbian, gay, bisexual, queer, asexual, and other sexual orientations not listed.

- HBC will work towards enabling employees at all levels in the workforce to feel safe in being open about their sexuality if they wish to do so.

**Age** – HBC does not discriminate against anybody based on their age.



**Disability, which includes neurodiversity** – HBC does not discriminate against anybody based on their disability and/or their neurodiversity.

- The Council has been recognised as a Level 3 Disability Confident Leader.
- The Council understands and acknowledges that employees with disabilities and neurodiversity may require reasonable adjustments to allow them to achieve their full potential. Where practically possible in relation to delivery of council services and functions, managers are expected to work with employees to accommodate the reasonable adjustment(s) needed.

**Gender Reassignment** – HBC does not discriminate against anybody in regards to gender reassignment. This includes those considering going through reassignment, those in the process of undergoing reassignment, or those who have already gone through reassignment, whether that was before or during their employment at HBC.

- HBC will work towards enabling employees at all levels in the workforce to feel safe in being open about their gender identity if they wish to do so.

**Marriage and Civil Partnership** – HBC does not discriminate against anybody based on their marital status or whether or not they are in a civil partnership with another person.

**Pregnancy and Maternity/Paternity** – HBC does not discriminate against anybody in regards to pregnancy or their maternal/paternal status.

- Unfavourable treatment of a woman because of her pregnancy or maternity leave during ‘the protected period’ is unlawful pregnancy and maternity discrimination.
- The protected period starts when a woman becomes pregnant and continues until the end of her maternity leave, or until she returns to work if that is earlier.
- Pregnancy and maternity are not protected directly under the harassment provisions. However, pregnancy and maternity harassment would amount to harassment related to sex.





- Decisions on applications for Parental, Carer, or Adoption leave are based on clear, fair, and justifiable criteria set out within Halton Borough Council's Employment Policy.
- Parental, carer, and adoption leave decisions and arrangements are free from bias linked to sex, gender identity, or sexual orientation.
- All of HBC's policies regarding pregnancy, maternity and paternity can be found under the HR Policies section (9.0).

**Race** – HBC does not discriminate against anybody based on their race. This includes colour and nationality – citizenship, ethnic or national origins.

- HBC is a proud member of the Liverpool City Region Race Equality Hub. Building upon the City Region's reputation for social justice and equality, the Hub's primary purpose is to:
  - Tackle systemic injustice and inequality.
  - Drive forward positive and sustainable change for our Black, Asian, and Minority Ethnic employees and residents.
  - Work in partnership with public, private and 3rd sector employers, to encourage and support them to do the same.

**Religious Belief(s)** – HBC does not discriminate against anybody based on their religious beliefs. This includes philosophical belief and not having a belief.

- HBC will work towards enabling employees at all levels in the workforce to feel safe in being open about their faith, religion, or belief systems if they wish to do so.
- The Council will address any issues raised by an employee regarding religious observance as soon as possible.
- The Council understands and acknowledges that there are times when employees' religious observances require fasting and prayer during working hours. Where reasonable and practically possible in relation to delivery of council services and functions, managers are expected to agree to employees' requests for time off for religious festivals and to pray at work.





- Employees are also encouraged to be respectful of individuals who are fasting during periods of religious observance such as Lent, Ramadan, or Yom Kippur.

**Sex** – HBC does not discriminate against anybody based on their sex.

- To see the Equality and Human Rights Commission interim update on the Supreme Court Ruling regarding the Protected Characteristic of Sex, please click [here](#).

**Carers** – HBC does not discriminate against anybody regarding their caring status. Carers are those with caring responsibilities for others, outside of a standard parental role.

**Socio-economic status** – HBC does not discriminate against anybody based on their socio-economic status.

## 7.0 Work Attire

Halton Borough Council does not discriminate against any protected characteristics in relation to their attire, relating to religions, sexuality, gender or disability. The Council will address any issues of discrimination raised by an employee regarding attire as soon as possible.

## 8.0 Training and Development

Halton Borough Council uses training and development as a key element to integrate equality, diversity, and inclusion within the organisation.

As well as in-person training, delivered either in-house or by a reputable external training provider, HBC has 16 e-learning modules centred around EDI to give employees chance for continual learning, enrichment and growth. We review the modules regularly, and work with our Staff Network Groups to update and improve the learning. [Click here](#) to see the modules. Lunch and Learn sessions are held around matters regarding the Protected Characteristics, e.g. anti-racism, LGBTQIA+, etc. with guest speakers who have lived experience educating our workforce.

## 9.0 HR Policies

For Halton Borough Council's relevant Human Resources Policies, please click [here](#).

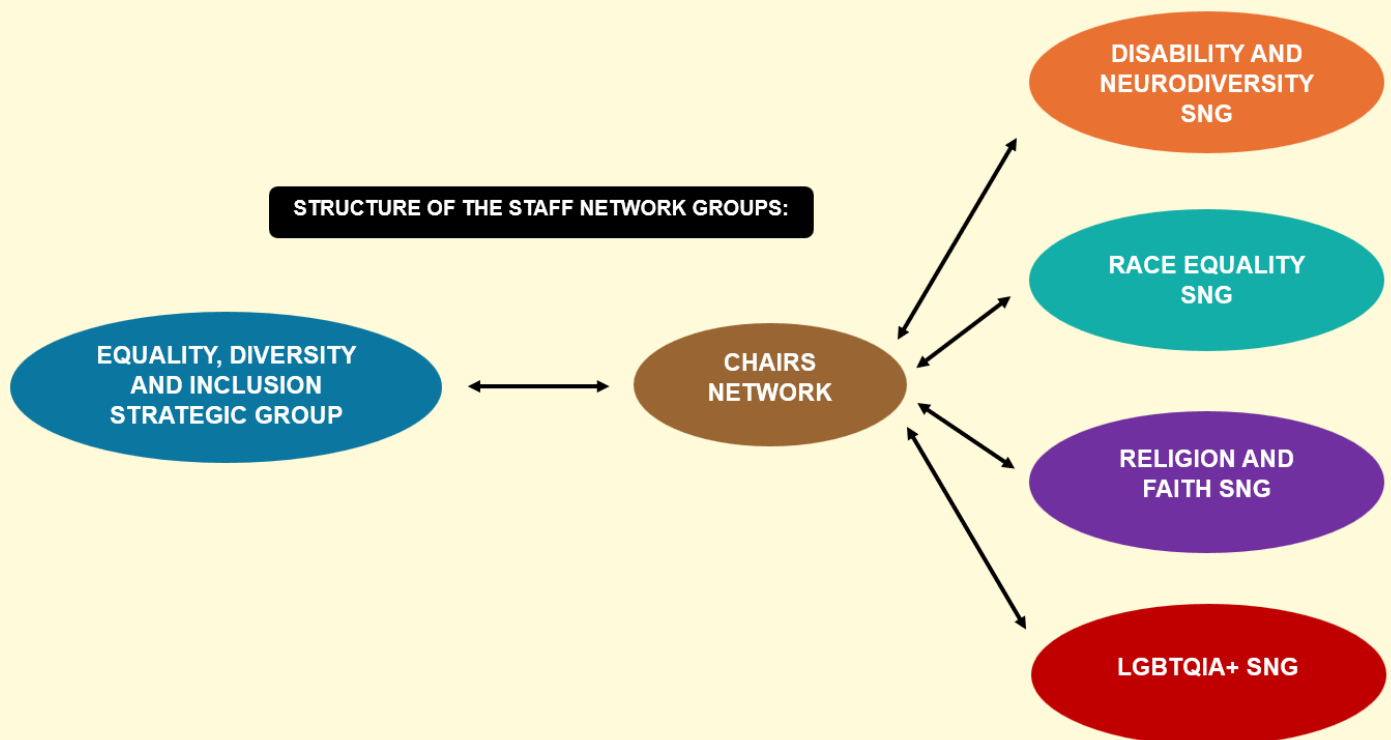
These include Bullying and Harassment, Flexible Working, and more, all of which work alongside and support this EDI Policy.

## 10.0 Staff Network Groups

The EDI Corporate Staff Network Groups (SNGs) have been created so that Halton Borough Council employees have a safe place to engage in a confidential and welcoming environment with others who share their Protected Characteristics. Members support, respect and encourage one another to share experiences and feel connected.

The current four SNGs at Halton Borough Council are:

- Disability and Neurodiversity
- Race Equality
- Religion and Faith
- LGBTQIA+



### 10.1 Purpose of the Staff Network Groups



## **10.2 Chairs' Network**

The Chair of each of the SNGs form a Chairs' Network. The Chairs' Network is in place to discuss any intersectional trends and commonalities, as well as any independencies of each of the SNGs.

The members of the Chairs' Network sits on the EDI Strategic Group to relay any feedback and points the Group should know, including actions raised at the SNGs.

The Chairs then report back to the SNGs on matters discussed at the EDI Strategic Group.

## **10.3 EDI Strategic Group**

The Strategic Group provides confidence that, throughout the organisation, actions are being taken in relation to the improvement and promotion of EDI, both in respect of the workforce and the development of services.

The Group, and its members, are there to offer support and guidance to each of the SNGs as and when needed.

For any more information regarding the Strategic Group or the Staff Network Groups, please contact our Equality, Diversity and Inclusion Officer, Liz Morton - [liz.morton@halton.gov.uk](mailto:liz.morton@halton.gov.uk)

## **11.0 Reverse Mentoring**

Reverse Mentoring enables people in senior positions to learn and understand issues from the perspective of employees from under-represented groups. At the same time, employees are exposed to new ideas, experiences, and networking opportunities. The key role of the mentor will be to provide an insight into the difficulties and barriers they may have faced and could still be facing within their roles.



Reverse Mentoring provides a safe space to allow under-represented groups to share their lived experiences whilst working for the Council. This is your opportunity to offer insights to our senior management team, and help enrich our workforce.

## **11.1 Reverse Mentoring Guide**

### **11.2 Reverse Mentoring Aims:**

- Help improve diverse mind-sets in middle and senior leaders
- Promote discussion on how staff feel about EDI
- Building and sharing on existing successes
- Help challenge engrained views on what talent looks like

### **11.3 Benefits for the Mentor (underrepresented colleagues):**

- Access to a wealth of experience for their self-development
- Increases confidence/personal profile
- Builds their relationships network
- Gains insight into our organisation
- It's an opportunity to be seen and heard

### **11.4 Benefits for the Mentee (senior colleagues):**

- Provides insight into potential cultural barriers for under-represented groups and to consider any necessary Equality, Diversity and Inclusion (EDI) improvements and support to employees
- Reflection on the impact of their own leadership style upon others
- Understanding and appreciation of the impact of Inclusive Leadership



## 12.0 Equality Impact Assessments

We continue to undertake equality analysis and use our equality impact assessment process to inform the development of our policies, procedures and service provision.

Equality impact assessments are carried out when a new policy, procedure or service is being developed or significantly changed, and where a service review is taking place, or where a potential inequality has been identified.

Assessments include evidence-based analysis of equality impacts across the Protected Characteristics covered by the Equality Act and on carers and socio-economic status.

### 12.1 Equality Impact Assessment Guidance Note

## 13.0 EDI Frequently Asked Questions

To view the Frequently Asked Questions relating to EDI, please click [here](#).

These are to assist both Halton Borough Council's employees and its managers.

## 14.0 More Information

For any queries regarding the contents of this Equality, Diversity and Inclusion Policy, please contact our Equality Diversity and Inclusion Officer, Liz Morton –

[liz.morton@halton.gov.uk](mailto:liz.morton@halton.gov.uk)

**REPORT TO:** Executive Board

**DATE:** 11 September 2025

**REPORTING OFFICER:** Director of Finance

**PORTFOLIO:** Corporate Services

**SUBJECT:** 2025/26 Councilwide Spending as at 31 July 2025

**WARD(S):** Borough-wide

## **1.0 PURPOSE OF REPORT**

- 1.1 To report the Council's overall revenue net spend position as at 31 July 2025 together with a 2025/26 forecast outturn position.

## **2.0 RECOMMENDED: That;**

- (i) Executive Directors continue to implement the approved 2025/26 saving proposals as detailed in Appendix 3;**
- (ii) Executive Directors continue to identify areas where they can further reduce their directorate's spending or generate income, in order to ensure the council wide forecast outturn overspend position for the year remains within budget.**
- (iii) This report be shared with each Policy and Performance Board, in order to ensure they have a full appreciation of the councilwide financial position, in addition to their specific areas of responsibility.**
- (iv) Council be asked to approve the revisions to the capital programme set-out in paragraph 3.24 and incorporated within Appendix 4;**

## **3.0 SUPPORTING INFORMATION**

### **Revenue Spending**

- 3.1 Appendix 1 presents a summary of spending against the operational revenue budget up to 31 July 2025 and Appendix 2 provides detailed figures for each individual Department. In overall terms, net Council spending as at 31 July 2025 is £1.629m over budget. The outturn forecast for the year estimates that net spending will be over budget by £5.572m if no corrective action is taken. This compares with the position at the end of May 2025 where forecast spend for the year was estimated to be £6.185m over budget.

- 3.2 The improved position on the forecast outturn from that reported at the end of May 2025 can be linked across a number of departments, there are though, two departments where the reported position is significantly changed from previously reported. Adult Social Care (excl Care Homes and Community Care) is forecasting a £0.698m overspend against budget, mainly as a result of higher than forecast staffing costs. There is a significant improvement against Planning & Transportation which is now forecasting an underspend position against budget of £0.266m (as at May 2025 the forecast was a net overspend of £0.672m). This can be attributed to cessation of revenue spend for programmed works and higher forecast of income against fees and charges.
- 3.3 The forecast position remains a matter of great concern and action to reduce net spend must be taken immediately. Without action being taken the Council will not be in a position to provide a balanced budget by financial year-end and will further add to borrowings which will need to be taken through Exceptional Financial Support (EFS).
- 3.4 As part of the action to ensure spend for the year remains within budget, recovery meetings have been put into action where directorate leads will provide action points on how they aim to keep net spend within the approved budget.
- 3.5 On 10 February 2025 Government issued a letter to the Council confirming it was minded to approve a capitalisation direction of a total not exceeding £52.8 million. The total is broken down by each financial year of the Council's request:
- £20.8 million in 2024-25.
  - £32 million in 2025-26.
- 3.6 Consistent with those councils that have previously sought Exceptional Financial Support, in order for Government to provide a final capitalisation direction, the council is required to undergo an external assurance review which will include, but will not be limited to, an assessment of the council's financial position and governance arrangements. No date has yet been fixed for the assessment
- 3.7 Council approved the annual budget of £183.052m on 05 March 2025, in doing so they agreed to the use of EFS totalling £29.385m. As a minimum the Council must aspire to ensure that spend for the year remains within the approved budget to ensure the provisional capitalisation direction is not breached.
- 3.8 The cost of EFS is significant over the long term for the Council, for every £1m borrowing undertaken it is estimated will cost the Council approximately £100k over each of the next 20 years. It is imperative that action is taken now to reduce the level of planned spend over the remainder of the year and that approved saving proposals are implemented with immediate effect

- 3.9 The figures reflect a prudent yet realistic view of spend and income levels through to the end of the year. Work will continue to progress on updating the financial position as more information is made available.
- 3.10 In setting the 2025/26 budget Council approved significant levels of growth to ensure the budget was more relevant to the planned level of spend. Budget growth of £33.555m (22%) was added to the 2025/26 budget to bring the approved net budget to £183.052m.
- 3.11 There are continued demand pressures on the budget which are above growth levels provided in the 2025/26 budget, these are more notable against adults community care and home to school transport. Levels of demand covering children in care appear to be under control for the first four months of the year, although still too high for an authority the size of Halton. Further information is provided within the report on the main budgetary pressure areas.
- 3.12 In setting the 2025/26 budget, inflation of 2% was provided for the pay award. The pay award has been agreed at 3.2%, therefore budgetary growth for the pay award is insufficient, it is currently forecast the additional cost of the 3.2% pay offer will add approximately £1m to the Council's running cost for the year. This additional cost is included within the reported forecast position for the year. Backdated pay will be paid during August 2025.
- 3.13 Another major factor in achieving a balanced budget position for the year is that all approved savings are fully achieved to the agreed levels. In total, savings of £7.225m were agreed for the current year, Appendix 3 provides detail on progress against the approved savings. As per Appendix 3, savings have been RAG rated to inform on progress, high level summary of this is provided below.

Department	On-course to be achieved	Uncertain or too early to say	Highly likely or certain will not be achieved
	£'000	£'000	£'000
Adult Social Care	100	1,500	280
Finance	0	150	40
Legal	6	0	0
Children & Family Services	0	1,900	22
Education, Inclusion and Provision	0	300	0
Community and Greenspaces	282	0	0
Economy, Enterprise and Property	0	100	0
Planning & Transportation	0	0	100
Public Health	45	0	0
Corporate	0	2,200	200
<b>Totals</b>	<b>433</b>	<b>6,150</b>	<b>642</b>



- 3.14 The use and cost of agency staff continues to be one of the main contributing factors to the overspend position for the year. This is mostly evident within the Children & Families Department and the Council's in-house Care Homes. Initiatives and support from the Transformation Programme are ongoing to reduce reliance upon agency staff.
- 3.15 Analysis of agency spend for the year to date, together with comparative analysis of 2024/25 costs, is included in the table below.

	2025/26				2024/25
	As at 31 May 2025 £'000	As at 31 July 2025 £'000	Total 2025/26 To Date £'000		As at 31 March 2025 £'000
Adult Social Care	955	1,687	2,642		6,035
Chief Executives Delivery Unit	130	145	275		810
Children & Family Services	574	739	1,313		5,220
Community & Greenspace	71	59	130		447
Economy, Enterprise & Property	60	77	137		417
Education, Inclusion & Provision	54	72	126		295
Finance	3	0	3		114
Legal & Democratic Services	63	59	122		881
Planning & Transportation	2	0	2		210
Public Health & Public Protection	0	0	0		22
<b>Total</b>	<b>1,912</b>	<b>2,838</b>	<b>4,750</b>		<b>14,451</b>

### Revenue - Operational Spending

- 3.16 Operational net spending for the first four months of the year is higher than the budget to date by £1.629m. Based on current forecasts it is estimated net spend will be over budget for the year by £5.572m if no further corrective action is taken.
- 3.17 Within the overall budget forecast position for the period, the key budget pressure areas are as follows;

(i) **Children and Families Department**

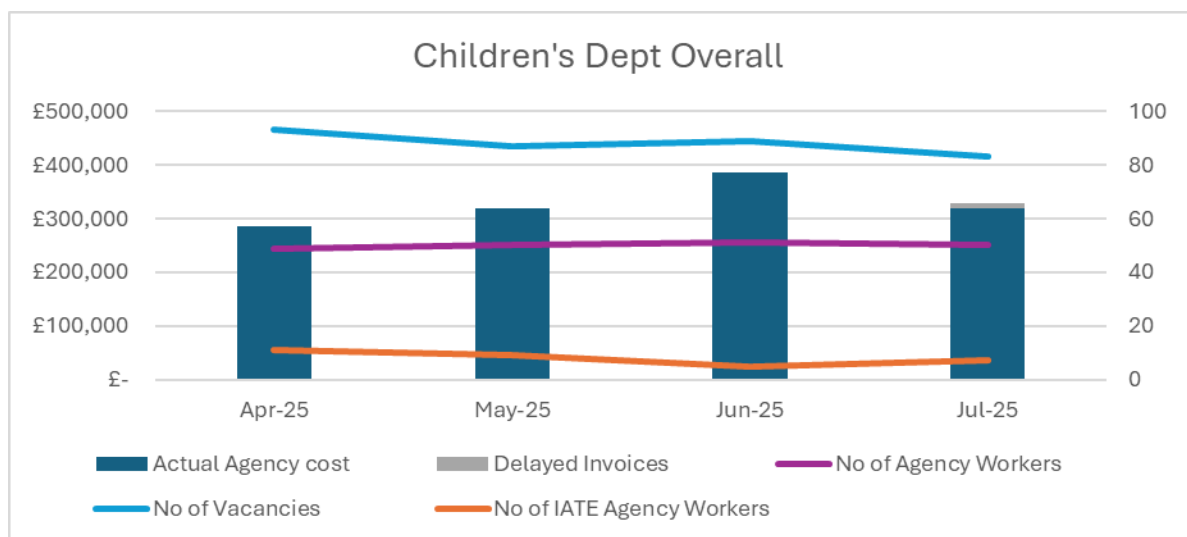
The net departmental outturn position is estimated to be over budget profile at the end of financial year 2025/26 by £2.190m with the majority relating to Social Care Services. Since last reported at 31 May 2025 there has been a reduction in overspend of £0.197m.

Employee costs are forecast to be over budget profile by the end of financial year 2025/26 by £1.204m this is a reduction of £0.245m since last reported on 31 May 2025. The reduction mainly relates to

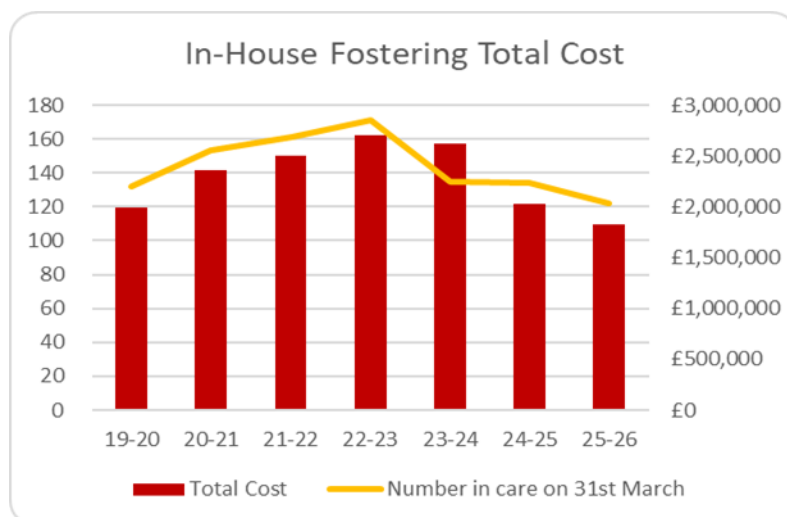
vacant posts that remain unfilled that are not being covered by agency and a slight increase in staffing budget.

The level of agency has remained consistent since April across the service. There is an expectation that a number of agency staff are due to convert to Halton BC employees in the coming months and the recruitment of newly qualified social workers should reduce the level of agency reliance. Forecasts will be updated as and when to reflect the changes in staffing.

The chart below demonstrates agency costs that cover April to July 2025, the number of agency staff that the Council have received an invoice for within each period, the number of vacancies across the department and the number of staff that are currently in addition to the establishment (IATE).

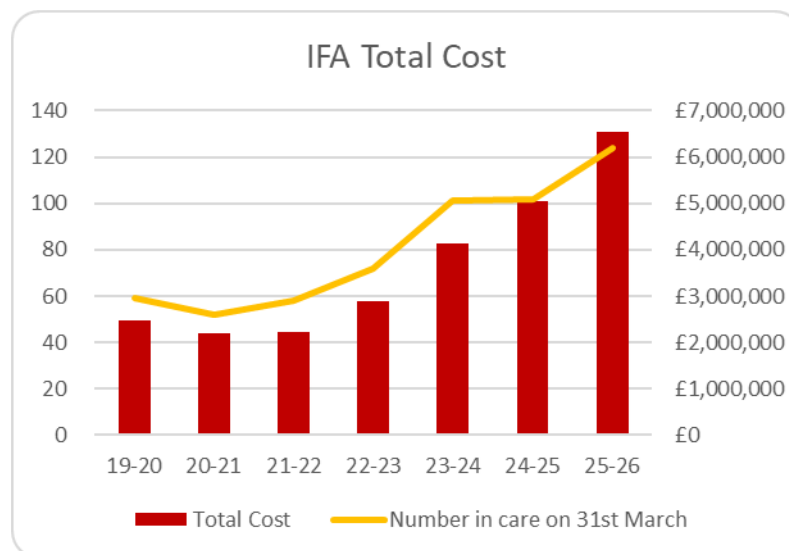


Inhouse fostering placements is estimated to be £0.493m under budget profile for financial year 2025/26.



Work continues to recruit and retain Halton's In-house foster carers, along with training to develop carers enabling them to accommodate more specialist placements. This therefore means that costs could increase. However, the ability to accommodate young people within in-house provision provides a substantial saving in comparison to Independent Fostering Agency (IFA) or residential care.

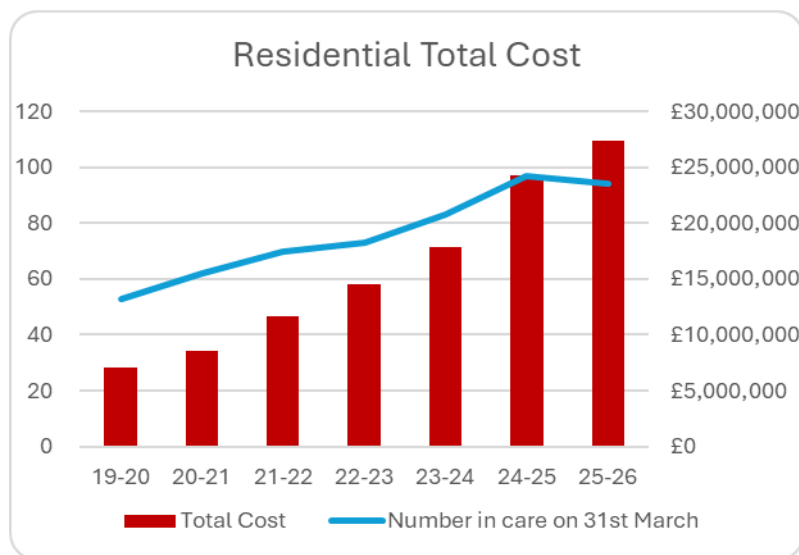
Increasing numbers of children in care and insufficient in-house fostering provision has meant increased reliance on Independent Fostering Agencies (IFA). Higher numbers of children placed within IFA provision and increased IFA rates has resulted in an estimated forecast overspend for the end of 2025/26 as £1.070m.



Out of Borough Residential Care continues to be a budget pressure for the Children and Families Department as the costs of residential care have continue to rise year on year. The numbers of young people in residential placements remains high and the cost of placements is rising significantly year-on year.

Residential care costs are forecast to be over budget profile by £0.061m, this is an increase in forecast overspend since last reported of £0.099m. This is due to not receiving sufficient funding relating to accommodation costs for Unaccompanied Asylum Seeker Children (UASC) and Care Leavers as well as a number of young people that have been placed within remand provision.

The graph below illustrates the rising costs of residential care, for consistency this does not include the costs of Unaccompanied Asylum-Seeking Children (UASC) as these costs were not included previous years.



The table below demonstrates the number of children that the department are forecasting to be in Residential care at 31 March 26.

Provision	Weekly Costs	31-Jul-25	
		No. Placed	Estimated cost for the year
Residential	£1000 - £3000	4	369,378
Residential	£3001 - £5000	28	6,674,247
Residential	£5001 - £7000	20	6,451,576
Residential	£7001 - £15982	19	10,713,790
Secure	£6397 - £8137		
Leaving Care	£443 - £7175	17	2,465,705
Parent & Child	£2000 - £5500	6	694,683
<b>Total:</b>		<b>94</b>	<b>27,369,380</b>

(ii) **Adult Social Care Directorate**

**Community Care**

The net spend position for the community care budget at the end of July 2025 is currently £0.876m over the available budget and the year end forecast is forecast to show net spend to be £2.627m over the annual budget.

This forecast is as things stand at the moment assuming no material changes, apart from increased demand of 4.9% and the agreed fee increase of 8% with care providers. However there is a risk that the forecast could be significantly more as the ICB carry out a formal “turnaround” reviewing all NHS spend which may impact on the community care budget and could result in more challenges to social care funding requests.

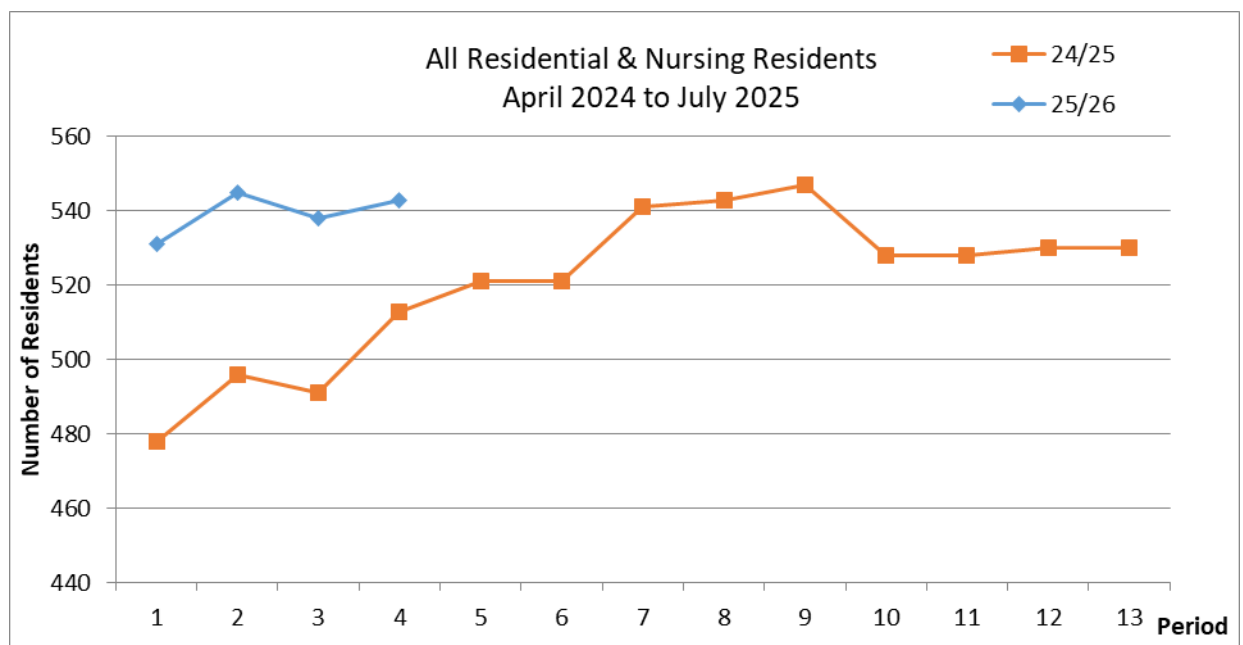
To mitigate this financial risk a number of actions are being considered for implementation to reduce costs and help bring spend back in line with budget. These are detailed below:

- Reduction of 1 to 1 packages of care if health's responsibility
- Review 15 minutes packages of domiciliary care to identify medicine prompts which are health's financial responsibility
- Ensure assessments carried out on discharge from hospital are complete and appropriate
- Maximise internal care home capacity

### Residential & Nursing Care

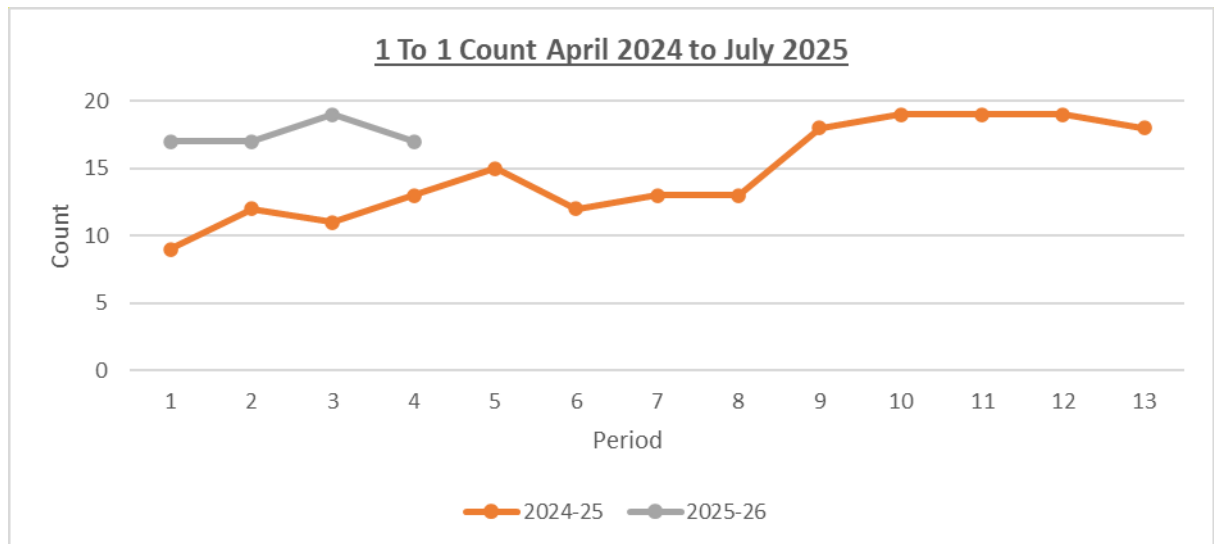
There are currently 543 residents in external residential/nursing care as at the end of July 2025 compared to 530 at the end of 2024/25, an increase of 2.45%. Compared to the 2024/25 average of 520 this is an increase of 4.4%. The average cost of a package of care is currently £869.21 compared to £850.24 at the end of 2024/25 an increase of 2.2%. Supplementary invoice payments so far amount to £0.205m.

The graph below illustrates the demand for all residential and nursing placements.



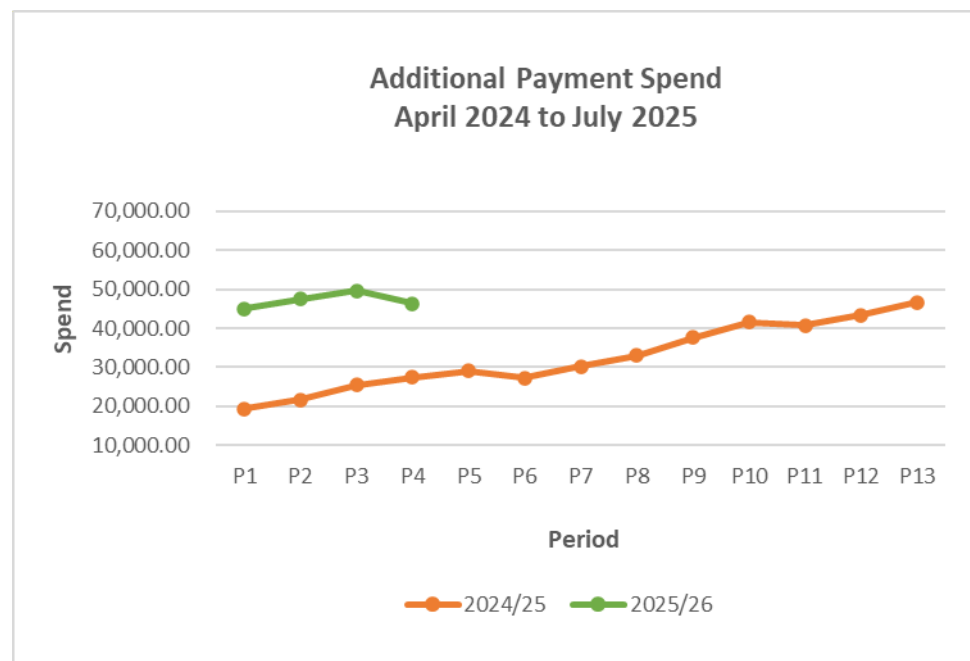
Payments for 1 to 1 support continue to exert pressure on the budget. These are generally to mitigate the risk from falls particularly on discharge from hospital. The full year cost for 2024/25 was £837,882.

The graph below shows the count of service users receiving 1 to 1 care by period. Currently there are 17 compared to 13 at the same point last year. This is an increase of 30%, although numbers have decreased from Period 3 to 4 as packages are being reviewed.



Additional payments to providers rose sharply throughout 2024/25, both in and out of the borough. This is where the care home charge an additional amount on top of the contracted bed rate. The cost of this for 2024/25 was £423,894.

The graph below illustrates the cost of additional payments by period. This clearly shows a steady increase in numbers and costs for 25/26. The spend up to Period 4 2025/26 is £188,542.83. If numbers and costs remain the same the forecast spend for the year will be approximately £0.605m.

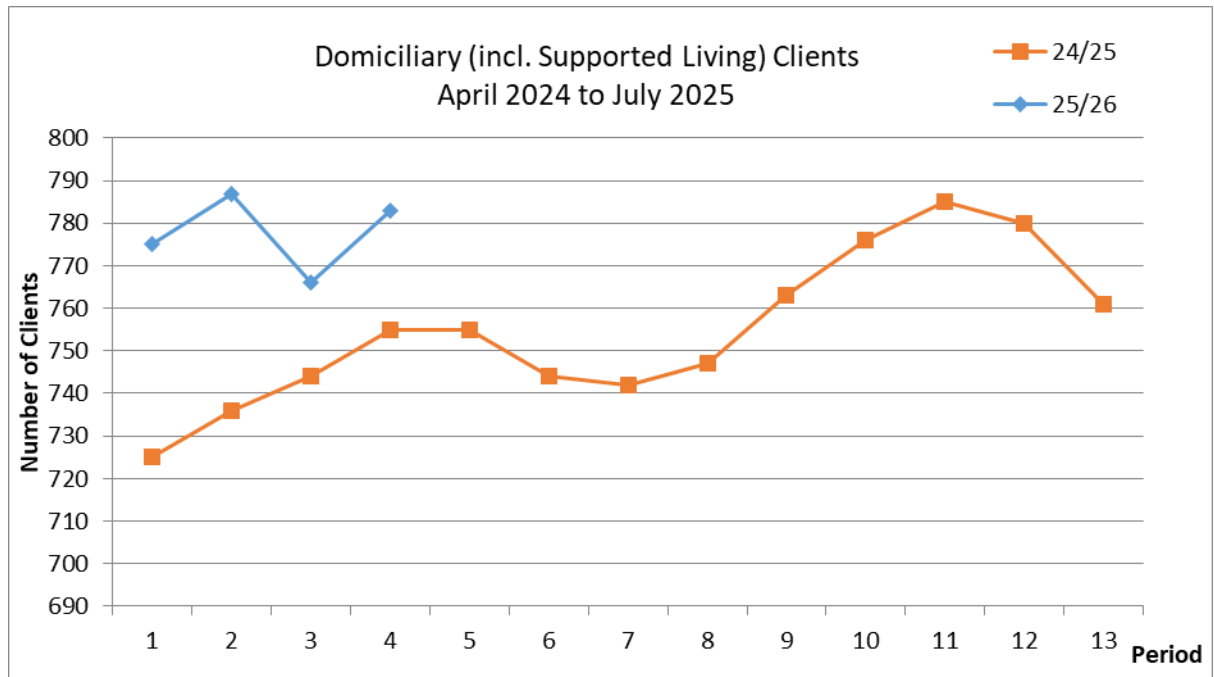


### Domiciliary Care & Supported Living

As at July there are 783 service users receiving a package of care at home, compared to the average in 2024/25 of 754, an increase of 3.8%. However compared with July 2024 the increase is 3.7%. The average

cost of a package of care is currently £519.79 compared with £450.64 in 2024/25 an increase of 15.3%.

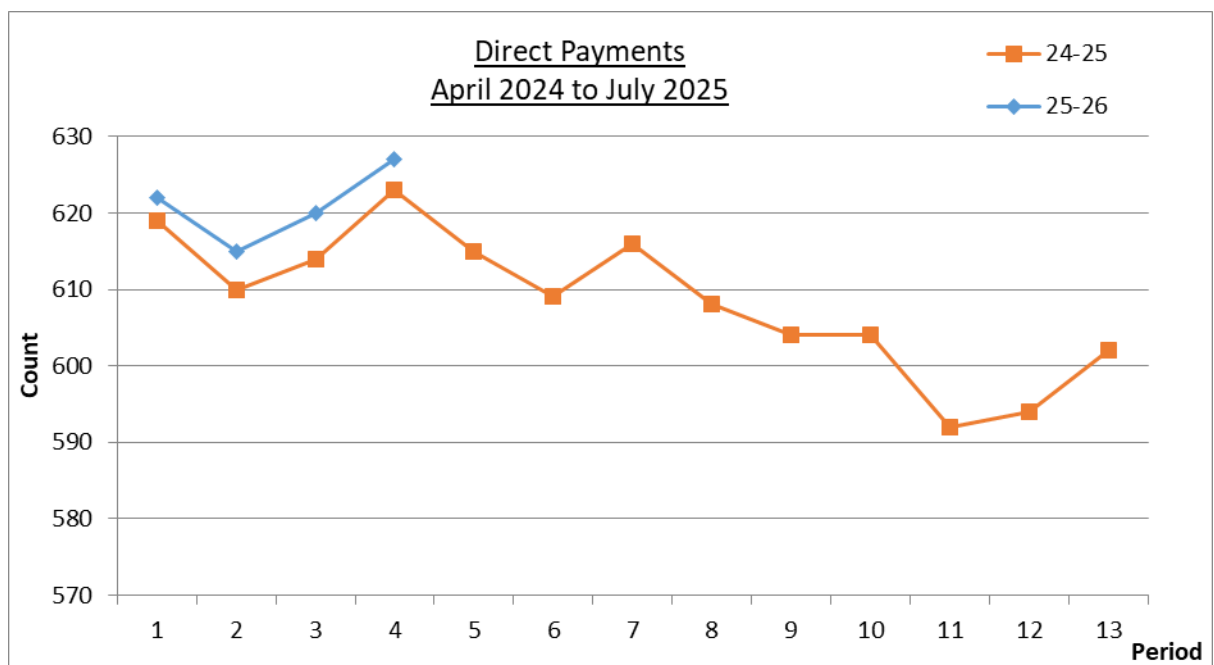
The graph below illustrates the demand for the service from April 2024 to July 2025.



### Direct Payments

The average number of clients who received a Direct Payment (DP) in Period 4 was 627 compared with 622 in Period 1, a very small increase. The average cost of a package of care has decreased from £571.26 to £509.29, a reduction of 10.8%.

The graph below shows movement throughout the year.



### **Care Homes**

Spend for the first four months of the 2025/26 financial year to 31 July is £0.330m above profile, with an estimated spend above budget for the year of £0.832m. This primarily relates to unbudgeted agency staffing costs.

Employee related expenditure is over budget profile at the end of July 2025 by £0.234m, with the expected outturn at the end of financial year being £0.713m over budget. Projections take into account agency spending patterns over the previous 3 financial years.

Recruitment of staff is a continued pressure across the care homes. There remains a high number of staff vacancies across the care homes. A proactive rolling recruitment exercise is ongoing within the care homes and is supported by HR.

Due to pressures with recruitment and retention in the sector, heavy reliance is being placed on overtime and expensive agency staff to support the care homes. At the end of July 2025 total agency spend across the care homes reached £1.675m, the cost of this has partially been offset by staff vacancies.

### **Adult Social Care (excluding Care Homes and Community Care)**

Net department expenditure, is currently £0.153m over budget profile at the end of the fourth period of the financial year. Current expenditure projections indicate an overspend for the full financial year in the region of £0.698m.

The projected full-year cost for employees is above the annual budget by £0.706m. Factors relating to the projected overspend include;

Unbudgeted agency costs in respect of covering vacant posts, particularly in terms of front-line Care Management and Mental Health Team posts. Due to ongoing and increase in vacancies, there has been an increase in agency staff use, by 6 additional agency staff members since May 2025, with the continued use of these agency staff members being forecasted until the end of the financial year.

Agency expenditure across the department as a whole at the end of July 2025 stood at £0.686m, with a full-year spend of £1.742m projected. This is partially offset by a forecasted underspend on the staffing budget of £1.036m.



An unbudgeted market supplement has been awarded to social workers across the division with spend at the end of July 2025 being £0.059m, a full year spend of £0.177m is forecasted.

**(iii) Education, Inclusion and Provision**

Net departmental expenditure is £0.359m over budget at the end of July, based on available information. The forecast outturn for 2025/26 is currently an overspend against budget of £1.184m.

Schools Transport is the main budget pressure for Education, Inclusion and Provision. The Council has a statutory responsibility to provide Special Educational Needs (SEN) pupils with transport. This is split into two main areas of SEN pupils attending In Borough and out of Borough Schools.

The table below illustrates the split between the two areas, and how each areas spend compares to the budget.

2025-26 as at July-25					
Area	Number of Users	Budget £000	Projected Spend £000	Variance £000	Average Cost per User
In Borough	476	1857	2062	(205)	£3,806.54
Out of Borough	147	1214	1546	(332)	£9,137.94
<b>Total</b>	<b>623</b>	<b>3071</b>	<b>3608</b>	<b>(537)</b>	

Note the above table excludes efficiency savings of £0.300m approved for the 2025/26 budget.

Inter Authority income is projected to underachieve its target by £0.211m. This is due to an underachievement of income within the Integrated Youth Support Services & Commissioning Division for a shared service.

**(iv) Corporate and Democracy**

The Corporate & Democracy budget is currently forecasting an underspend against budget of £1.869m at the end of the financial year, there are a number of reasons for this.

Included within the budget are council wide saving proposals of £2.6m, it is currently estimated that only £0.3m of these savings will

be achieved by 31 March 2026. Further details of the agreed savings are included at Appendix 3.

The additional cost of the pay award over the approved budget is estimated to cost the Council an additional £1m in the current financial year. This estimate has been included within Corporate and Democracy until the pay award is implemented.

Contingency of £3.688m is included and assumed will not be called upon (for new spend) through to 31 March 2026. The high level of contingency was included within the budget to allow for the gradual reduction in agency costs, demand and general cost pressures.

### **Collection Fund**

- 3.18 The council tax collection rate through to the end of July 2025 is 36.16% which is 0.07% lower than the collection rate at the same point last year.

Debt relating to previous years continues to be collected, and the Council utilises powers through charging orders and attachment to earnings/benefits to secure debts. £1.268m has so far been collected this year in relation to previous years' debt.

- 3.19 Business rate collection through to the end of July 2025 is 40.69% which is 0.9% lower than the collection rate at the same point last year.

£0.345m has so far been collected this year in relation to previous years' debt.

### **Review of Reserves**

- 3.20 As at 31 July 2025 the Council's General Reserve is unchanged from the previous period at £5.149m, which represents 2.81% of the Council's 2025/26 net budget. This level of General Reserve is considered to be insufficient and provides little to cover unforeseen costs. Within the Medium Term Financial Strategy, growth to reserves will be included at a rate of £2m per year.
- 3.21 There is a regular review of earmarked reserves undertaken to determine whether they can be released in part or in full to assist with funding the Council's current financial challenges, recognising that this only provides one-year funding solutions.

## Reserves Summary

- 3.22 A summary breakdown of the Council's reserves is presented in the table below, showing the balance of reserves as at 31 July 2025.

<b>Summary of General and Earmarked Reserves</b>	
<b>Reserve</b>	<b>Reserve Value £m</b>
<b>Corporate:</b>	
General Fund	5.149
Capital Reserve	0.398
Insurance Reserve	0.849
<b>Specific Projects:</b>	
Adult Social Care	0.710
Fleet Replacement	0.454
Highways Feasibility Costs	0.102
Local Development Framework	0.538
Community & Environment	0.542
Mersey Valley Golf Club	0.480
Mersey Gateway	33.542
CCLA Property Fund	0.263
Various Other	0.153
<b>Grants:</b>	
Building Schools for the Future	6.529
Public Health	1.468
Supporting Families Performance Payments	0.204
Children's & Education	1.188
Domestic Abuse	0.915
Enterprise & Employment	0.782
Food Waste Collection	0.237
Mersey Gateway Environmental Trust	0.492
Various Other	0.156
<b>Total Earmarked Reserves</b>	<b>55.151</b>

- 3.23 The above table shows the diminishing level of reserves available to assist with funding any future budget overspends and balancing future budgets. Only the £5.149m of the General Fund could now be used for these purposes, as all remaining reserves are committed for specific purposes.

## Capital Spending

- 3.24 Council approved the 2025/26 Capital Programme on 5 March 2025. Since then the capital programme has been revised to reflect a number of changes in spending profiles and funding as schemes have developed. Appendix 4 brings all the separate elements together and report on the Council's total planned capital programme expenditure. The schemes which have been revised within the programme are as follows:

- i. Grants - Disabled Facilities
- ii. Stair Lifts
- iii. Joint Funding RSL Adaptations
- iv. Madeline McKenna Residential Home
- v. St Lukes Residential Home
- vi. Halton Leisure Centre
- vii. Landfill Tax Credit Schemes
- viii. Spike Island / Wigg Island
- ix. Cemetery Infrastructure work
- x. Stadium Public Address System
- xi. Town Deal
- xii. Astmoor Masterplan
- xiii. ATF4 - Widnes Town Centre Accessibility
- xiv. A56 Reconstruction
- xv. Pot Hole Funding
- xvi. CRSTS
- xvii. Risk Management
- xviii. Fleet Replacements
- xix. Early Land Acquisition Mersey Gateway

3.25 Capital spending at 31 July 2025 totalled £11.4m, which represents 20.1% of the total Capital Programme of £56.5m (which assumes a 20% slippage between years).

#### **4.0 CONCLUSIONS**

- 4.1 As at 31 July 2025, net revenue spend is forecast to be £5.572m over the budget to date despite significant levels of growth being included within the budget.
- 4.2 Urgent corrective should be taken as soon as possible across all Council services to identify spend reductions and ensure that agreed savings are fully implemented in a timely manner.
- 4.3 Departments should ensure that all spending continues to be limited to what is absolutely essential throughout the remainder of the year, to ensure that the forecast outturn overspend is minimised as far as possible and future spending is brought in line with budget.

#### **5.0 POLICY AND OTHER IMPLICATIONS**

- 5.1 None.

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

- 6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**
- 6.2 **Building a Strong, Sustainable Local Economy**

**6.3 Supporting Children, Young People and Families**

**6.4 Tackling Inequality and Helping Those Who Are Most In Need**

**6.5 Working Towards a Greener Future**

**6.6 Valuing and Appreciating Halton and Our Community**

There are no direct implications, however, the revenue budget and capital programme support the delivery and achievement of all the Council's priorities above.

**7.0 RISK ANALYSIS**

7.1 There are a number of financial risks within the budget. However, the Council has internal controls and processes in place to ensure that spending remains in line with budget as far as possible.

7.2 A budget risk register of significant financial risks has been prepared and is included at Appendix 5.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 None.

**9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 None

**10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1072**

10.1 There are no background papers under the meaning of the Act

# Summary of Revenue Spending to 31 July 2025

# APPENDIX 1

Directorate / Department	Annual Budget £'000	Budget To Date £'000	Actual To Date £'000	Variance (Overspend) £'000	July 2025 Forecast Outturn (o'spend) £'000
Adult Social Care	24,522	7,812	7,965	(153)	(698)
Care Homes`	7,932	2,658	2,988	(330)	(832)
Community Care	27,968	8,515	9,391	(876)	(2,627)
Complex Care Pool	13,188	312	309	3	2
<b>Adults Directorate</b>	<b>73,610</b>	<b>19,297</b>	<b>20,653</b>	<b>(1,356)</b>	<b>(4,155)</b>
Finance	5,573	2,687	2,797	(110)	(331)
Legal & Democratic Services	297	64	70	(6)	(18)
ICT & Support Services	197	1,260	1,221	39	117
Chief Executives Delivery Unit	1,113	577	586	(9)	(26)
<b>Chief Executives Directorate</b>	<b>7,180</b>	<b>4,588</b>	<b>4,674</b>	<b>(86)</b>	<b>(258)</b>
Children & Families	53,959	13,823	14,703	(880)	(2,190)
Education, Inclusion & Provision	12,067	2,896	3,255	(359)	(1,184)
<b>Children's Directorate</b>	<b>66,026</b>	<b>16,719</b>	<b>17,958</b>	<b>(1,239)</b>	<b>(3,374)</b>
Community & Greenspace	23,711	5,651	5,690	(39)	(124)
Economy, Enterprise & Property	2,464	940	928	12	178
Planning & Transportation	9,256	1,939	1,817	122	266
<b>Environment &amp; Regeneration Directorate</b>	<b>35,431</b>	<b>8,530</b>	<b>8,435</b>	<b>95</b>	<b>320</b>
Corporate & Democracy	-1,076	2,704	1,754	950	1,869
Public Health Directorate	1,881	-2,583	-2,590	7	26
<b>Total Operational Net Spend</b>	<b>183,052</b>	<b>49,255</b>	<b>50,884</b>	<b>(1,629)</b>	<b>(5,572)</b>



## Adult Social Care

## APPENDIX 2

	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
Employees	18,229	6,076	5,632	444	1,036
Agency- Covering Vacancies	0	0	686	(686)	(1,742)
Premises	498	215	185	30	85
Supplies & Services	712	273	363	(90)	(69)
Aids & Adaptations	37	12	10	2	8
Transport	341	114	106	8	22
Food & Drink Provisions	228	76	49	27	91
Supported Accommodation and Services	1,408	469	387	82	146
Emergency Duty Team	157	39	33	6	(4)
Transfer To Reserves	282	0	0	0	0
Contracts & SLAs	1,043	342	322	20	56
<u>Housing Solutions Grant Funded Schemes</u>					
Homelessness Prevention	548	246	227	19	0
Rough Sleepers Initiative	167	56	36	20	0
Trailblazer	15	5	5	0	0
<b>Total Expenditure</b>	<b>23,665</b>	<b>7,923</b>	<b>8,041</b>	<b>(118)</b>	<b>(371)</b>
<b>Income</b>					
Fees & Charges	-1,044	-348	-191	(157)	(338)
Sales & Rents Income	-538	-240	-243	3	7
Reimbursements & Grant Income	-2,182	-612	-729	117	23
Capital Salaries	-117	-29	-29	0	0
Housing Schemes Income	-783	-727	-727	0	0
<b>Total Income</b>	<b>-4,664</b>	<b>-1,956</b>	<b>-1,919</b>	<b>(37)</b>	<b>(308)</b>
<b>Net Operational Expenditure</b>	<b>19,001</b>	<b>5,967</b>	<b>6,122</b>	<b>(155)</b>	<b>(679)</b>
<b>Recharges</b>					
Premises Support	789	263	263	0	0
Transport	792	264	271	(7)	(19)
Central Support	4,039	1,346	1,346	0	0
Asset Rental Support	13	0	0	0	0
HBC Support Costs Income	-112	-28	-37	9	0
<b>Net Total Recharges</b>	<b>5,521</b>	<b>1,845</b>	<b>1,843</b>	<b>2</b>	<b>-19</b>
<b>Net Departmental Expenditure</b>	<b>24,522</b>	<b>7,812</b>	<b>7,965</b>	<b>(153)</b>	<b>(698)</b>



## Care Homes

	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
<b><u>Madeline Mckenna</u></b>					
Employees	781	261	253	8	3
Other Premises	90	25	24	1	12
Supplies & Services	26	7	9	(2)	(7)
Food Provison	51	13	18	(5)	(5)
Private Client and Out Of Borough Income	-127	-42	-33	(9)	0
Reimbursements & other Grant Income	-34	-11	-11	0	6
<b>Total Madeline Mckenna Expenditure</b>	<b>787</b>	<b>253</b>	<b>260</b>	<b>(7)</b>	<b>9</b>
<b><u>Millbrow</u></b>					
Employees	2,423	807	398	409	1,147
Agency - covering vacancies	0	0	377	(377)	(1,228)
Other Premises	117	34	46	(12)	(23)
Supplies & Services	72	21	22	(1)	(5)
Food Provison	81	20	28	(8)	(9)
Private Client and Out Of Borough Income	-13	-4	0	(4)	(9)
Reimbursements & other Grant Income	-885	-295	-220	(75)	(180)
<b>Total Millbrow Expenditure</b>	<b>1,795</b>	<b>583</b>	<b>651</b>	<b>(68)</b>	<b>(307)</b>
<b><u>St Luke's</u></b>					
Employees	3,411	1,137	570	567	1,566
Agency - covering vacancies	0	0	857	(857)	(2,234)
Other Premises	156	45	59	(14)	(52)
Supplies & Services	67	19	25	(6)	(11)
Food Provison	128	42	53	(11)	(29)
Private Client and Out Of Borough Income	-152	-50	-15	(35)	(9)
Reimbursements & other Grant Income	-896	-298	-417	119	375
<b>Total St Luke's Expenditure</b>	<b>2,714</b>	<b>895</b>	<b>1,132</b>	<b>(237)</b>	<b>(394)</b>
<b><u>St Patrick's</u></b>					
Employees	2,113	704	297	407	787
Agency - covering vacancies	0	0	441	(441)	(895)
Other Premises	144	41	48	(7)	(24)
Supplies & Services	67	20	24	(4)	2
Food Provison	127	42	37	5	10
Private Client and Out Of Borough Income	-99	-33	-5	(28)	(93)
Reimbursements & other Grant Income	-766	-186	-186	0	(68)
<b>Total St Patrick's Expenditure</b>	<b>1,586</b>	<b>588</b>	<b>656</b>	<b>(68)</b>	<b>(281)</b>
<b><u>Care Homes Divison Management</u></b>					
Employees	322	107	57	50	141
<b>Care Home Divison Management</b>	<b>322</b>	<b>107</b>	<b>57</b>	<b>50</b>	<b>141</b>
<b>Net Operational Expenditure</b>	<b>7,204</b>	<b>2,426</b>	<b>2,756</b>	<b>(330)</b>	<b>(832)</b>
<b>Recharges</b>					
Premises Support	65	21	21	0	0
Transport Support	0	0	0	0	0
Central Support	663	211	211	0	0
Asset Rental Support	0	0	0	0	0
Recharge Income	0	0	0	0	0
<b>Net Total Recharges</b>	<b>728</b>	<b>232</b>	<b>232</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>7,932</b>	<b>2,658</b>	<b>2,988</b>	<b>(330)</b>	<b>(832)</b>

## Community Care

	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
Residential & Nursing	21,061	5,280	5,542	(262)	(333)
Domiciliary Care & Supported living	16,093	4,153	4,394	(241)	(1,343)
Direct Payments	15,513	5,668	6,027	(359)	(972)
Day Care	712	164	158	6	13
<b>Total Expenditure</b>	<b>53,379</b>	<b>15,265</b>	<b>16,121</b>	<b>(856)</b>	<b>(2,635)</b>
<b>Income</b>					
Residential & Nursing Income	-11,881	-2,782	-2,765	(17)	14
Community Care Income	-3,115	-698	-634	(64)	(210)
Direct Payments Income	-1,034	-199	-260	61	204
Income from other CCGs	-429	-105	-105	0	0
Market sustainability & Improvement Grant	-2,796	-932	-932	0	0
Adult Social Care Support Grant	-6,102	-2,034	-2,034	0	0
War Pension Disregard Grant	-54	0	0	0	0
<b>Total Income</b>	<b>-25,411</b>	<b>-6,750</b>	<b>-6,730</b>	<b>(20)</b>	<b>8</b>
<b>Net Operational Expenditure</b>	<b>27,968</b>	<b>8,515</b>	<b>9,391</b>	<b>(876)</b>	<b>(2,627)</b>

**Complex Care Pool**

	<b>Annual Budget £'000</b>	<b>Budget to Date £'000</b>	<b>Actual Spend £'000</b>	<b>Variance (Overspend) £'000</b>	<b>Forecast Outturn £'000</b>
<b>Expenditure</b>					
Intermediate Care Services	6,281	1,339	1,345	(6)	(20)
Oakmeadow	2,025	643	625	18	54
Community Home Care First	1,941	169	153	16	48
Joint Equipment Store	880	147	147	0	0
Contracts & SLA's	3,262	-49	-49	0	0
Inglenook	134	37	26	11	32
HICafs	3,720	271	315	(44)	(132)
Carers Breaks	445	76	72	4	11
Carers centre	365	-15	-15	0	0
Residential Care	7,236	2,112	2,112	0	0
Domiciliary Care & Supported Living	4,336	1,445	1,445	0	0
Pathway 3/Discharge Access	426	111	111	0	0
HBC Contracts	72	43	43	0	0
Healthy at Home	28	-28	-28	0	0
Capacity	30	8	4	4	12
<b>Total Expenditure</b>	<b>31,181</b>	<b>6,309</b>	<b>6,306</b>	<b>3</b>	<b>5</b>
<b>Income</b>					
BCF	-15,032	-5,011	-5,011	0	0
CCG Contribution to Pool	-2,959	-986	-986	0	0
Oakmeadow Income	-2	0	0	0	0
<b>Total Income</b>	<b>-17,993</b>	<b>-5,997</b>	<b>-5,997</b>	<b>0</b>	<b>0</b>
<b>ICB Contribution Share of Surplus</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(3)</b>
<b>Net Operational Expenditure</b>	<b>13,188</b>	<b>312</b>	<b>309</b>	<b>3</b>	<b>2</b>

## Finance Department

	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
Employees	7,370	2,409	2,301	108	318
Insurances	1,055	620	560	60	180
Supplies & Services	1,118	227	264	(37)	(110)
Rent Allowances	31,500	8,696	8,696	0	0
Concessionary Travel	1,902	281	261	20	58
LCR Levy	1,902	0	0	0	0
Bad Debt Provision	223	8	0	8	25
Non HRA Rent Rebates	70	27	9	18	55
Discretionary Social Fund	106	33	0	33	98
Discretionary Housing Payments	279	73	73	0	1
Household Support Fund Expenditure	1,051	1,051	1,051	0	0
<b>Total Expenditure</b>	<b>46,576</b>	<b>13,425</b>	<b>13,215</b>	<b>210</b>	<b>625</b>
<b>Income</b>					
Fees & Charges	-342	-176	-202	26	78
Burdens Grant	-58	-53	-58	5	14
Dedicated schools Grant	-150	0	0	0	0
Council Tax Liability Order	-670	-371	-386	15	43
Recovery of Legal Costs	-10	-3	0	(3)	(10)
Business Rates Admin Grant	-157	0	0	0	1
Schools SLAs	-319	-4	-2	(2)	(6)
LCR Reimbursement	-1,902	0	0	0	0
HB Overpayment Debt Recovery	-300	-89	-60	(29)	(88)
Rent Allowances	-30,700	-8,512	-8,110	(402)	(1,205)
Non HRA Rent Rebate	-70	-24	-23	(1)	(5)
Discretionary Housing Payment Grant	-279	-94	-93	(1)	(2)
Housing Benefits Admin Grant	-453	-151	-151	0	0
Housing Benefits Award Accuracy	0	-15	-22	7	22
Universal Credits	-5	-2	0	(2)	(5)
Household Support Fund Grant	-1,051	326	326	0	0
VEP Grant	0	0	0	0	3
CCG McMillan Reimbursement	-89	-23	-22	(1)	0
Reimbursements & Grant Income	-185	-124	-192	68	204
Transfer from Reserves	-34	-13	-13	0	0
<b>Total Income</b>	<b>-36,774</b>	<b>-9,328</b>	<b>-9,008</b>	<b>(320)</b>	<b>(956)</b>
<b>Net Operational Expenditure</b>	<b>9,802</b>	<b>4,097</b>	<b>4,207</b>	<b>(110)</b>	<b>(331)</b>
<b>Recharges</b>					
Premises Support	493	164	164	0	0
Transport	0	0	0	0	0
Central Support	2,092	697	697	0	0
Asset Rental Support	0	0	0	0	0
HBC Support Costs Income	-6,814	-2,271	-2,271	0	0
<b>Net Total Recharges</b>	<b>-4,229</b>	<b>-1,410</b>	<b>-1,410</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>5,573</b>	<b>2,687</b>	<b>2,797</b>	<b>(110)</b>	<b>(331)</b>

**Legal Services**

	<b>Annual Budget £'000</b>	<b>Budget to Date £'000</b>	<b>Actual Spend £'000</b>	<b>Variance (Overspend) £'000</b>	<b>Forecast Outturn £'000</b>
<b>Expenditure</b>					
Employees	2,287	697	579	118	354
Agency Related Expenditure	64	64	122	(58)	(175)
Supplies & Services	178	101	92	9	28
Civic Catering & Functions	21	2	1	1	5
Legal Expenses	422	13	63	(50)	(152)
Transport Related Expenditure	8	3	3	0	(1)
Other Expenditure	1	1	1	0	(1)
<b>Total Expenditure</b>	<b>2,981</b>	<b>881</b>	<b>861</b>	<b>20</b>	<b>58</b>
<b>Income</b>					
Fees & Charges Income	-75	-19	-10	(9)	(26)
Reimbursement & Other Grants	0	0	0	0	2
School SLA's	-100	-8	0	(8)	(23)
Licence Income	-371	-78	-69	(9)	(29)
<b>Total Income</b>	<b>-546</b>	<b>-105</b>	<b>-79</b>	<b>(26)</b>	<b>(76)</b>
<b>Net Operational Expenditure</b>	<b>2,435</b>	<b>776</b>	<b>782</b>	<b>(6)</b>	<b>(18)</b>
<b>Recharges</b>					
Premises Support	62	21	21	0	0
Transport Recharges	0	0	0	0	0
Central Support Recharges	275	92	92	0	0
Asset Rental Support	0	0	0	0	0
Support Recharge Income	-2,475	-825	-825	0	0
<b>Net Total Recharges</b>	<b>-2,138</b>	<b>-712</b>	<b>-712</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>297</b>	<b>64</b>	<b>70</b>	<b>(6)</b>	<b>(18)</b>

## ICT &amp; Support Services Department

	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
Employees	5,827	1,867	1,808	59	177
Supplies & Services	1,169	579	646	(67)	(202)
Capital Finance	100	37	12	25	75
Computer Repairs & Software	2,019	2,058	1,962	96	288
Communication Costs	133	16	45	(29)	(87)
Premises	139	62	64	(2)	(5)
Transport	3	0	0	0	1
Other	4	2	4	(2)	(6)
<b>Total Expenditure</b>	<b>9,394</b>	<b>4,621</b>	<b>4,541</b>	<b>80</b>	<b>241</b>
<b>Income</b>					
Fees & Charges	-849	-250	-240	(10)	(29)
Schools SLA Income	-659	-48	-16	(32)	(98)
Transfer from Reserves	0	-2	-3	1	3
<b>Total Income</b>	<b>-1,508</b>	<b>-300</b>	<b>-259</b>	<b>(41)</b>	<b>(124)</b>
<b>Net Operational Expenditure</b>	<b>7,886</b>	<b>4,321</b>	<b>4,282</b>	<b>39</b>	<b>117</b>
<b>Recharges</b>					
Premises Support	373	124	124	0	0
Transport	22	7	7	0	0
Central Support	1,391	464	464	0	0
Asset Rental Support	1,494	0	0	0	0
HBC Support Costs Income	-10,969	-3,656	-3,656	0	0
<b>Net Total Recharges</b>	<b>-7,689</b>	<b>-3,061</b>	<b>-3,061</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>197</b>	<b>1,260</b>	<b>1,221</b>	<b>39</b>	<b>117</b>

## Chief Executives Delivery Unit

	Annual Budget	Budget to Date	Actual Spend	Variance (Overspend )	Forecast Outturn
	£'000	£'000	£'000	£'000	£'000
<b>Expenditure</b>					
Employees	3,525	1,115	1,085	30	91
Employees Training	99	49	40	9	27
Apprenticeship Levy	330	109	122	(13)	(40)
Supplies & Services	412	210	215	(5)	(14)
Agency	3	3	3	0	0
<b>Total Expenditure</b>	<b>4,369</b>	<b>1,486</b>	<b>1,465</b>	<b>21</b>	<b>64</b>
<b>Income</b>					
Fees & Charges	-241	-65	-67	2	6
Schools SLA Income	-580	-32	0	(32)	(96)
<b>Total Income</b>	<b>-821</b>	<b>-97</b>	<b>-67</b>	<b>(30)</b>	<b>(90)</b>
<b>Net Operational Expenditure</b>	<b>3,548</b>	<b>1,389</b>	<b>1,398</b>	<b>(9)</b>	<b>(26)</b>
<b>Recharges</b>					
Premises Support	157	52	52	0	0
Transport Support	0	0	0	0	0
Central Support	1,008	336	336	0	0
Asset Rental Support	53	18	18	0	0
Recharge Income	-3,653	-1,218	-1,218	0	0
<b>Net Total Recharges</b>	<b>-2,435</b>	<b>-812</b>	<b>-812</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>1,113</b>	<b>577</b>	<b>586</b>	<b>(9)</b>	<b>(26)</b>

## Children &amp; Families

	Annual Budget	Budget to Date	Actual Spend	Variance (Overspend)	Forecast Outturn
	£'000	£'000	£'000	£'000	£'000
<b>Expenditure</b>					
Employees	19,427	5,905	6,307	(402)	(1,204)
Other Premises	392	142	150	(8)	(23)
Supplies & Services	1,592	469	709	(240)	(721)
Transport	367	122	76	46	126
Direct Payments	1,220	477	447	30	86
Commissioned services to Vol Orgs	224	42	42	0	0
Residential Care	27,517	7,077	7,247	(170)	(61)
Out of Borough Adoption	97	24	0	24	92
Out of Borough Fostering	5,469	1,079	1,436	(357)	(1,070)
In House Adoption	557	50	36	14	41
Special Guardianship Order	2,604	725	701	24	73
In House Foster Carer Placements	2,766	791	626	165	493
Lavender House Contract Costs	279	70	69	1	4
Home Support & Respite	494	175	137	38	110
Care Leavers	434	107	106	1	3
Family Support	81	20	11	9	24
Contracted services	3	1	1	0	(1)
Emergency Duty	184	33	33	0	0
Youth Offending Services	461	0	0	0	0
<b>Total Expenditure</b>	<b>64,168</b>	<b>17,309</b>	<b>18,134</b>	<b>(825)</b>	<b>(2,028)</b>
<b>Income</b>					
Fees & Charges	-33	-12	-7	(5)	(14)
Rents	-82	-31	-31	0	0
Reimbursement & other Grant Income	-493	-217	-166	(51)	(153)
Transfer from reserve	-15	0	-1	1	5
Dedicated Schools Grant	-50	0	0	0	0
Government Grants	-13,477	-4,539	-4,539	0	0
<b>Total Income</b>	<b>-14,150</b>	<b>-4,799</b>	<b>-4,744</b>	<b>(55)</b>	<b>(162)</b>
<b>Net Operational Expenditure</b>	<b>50,018</b>	<b>12,510</b>	<b>13,390</b>	<b>(880)</b>	<b>(2,190)</b>
<b>Recharges</b>					
Premises Support	736	245	245	0	0
Transport	10	3	3	0	0
Central Support Recharges	3,331	1,110	1,110	0	0
Asset Rental Support	0	0	0	0	0
HBC Support Costs Income	-136	-45	-45	0	0
<b>Net Total Recharges</b>	<b>3,941</b>	<b>1,313</b>	<b>1,313</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>53,959</b>	<b>13,823</b>	<b>14,703</b>	<b>(880)</b>	<b>(2,190)</b>



## Education, Inclusion &amp; Provision

	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
Employees	8,788	2,575	2,588	(13)	260
Agency - covering vacancies	0	0	73	(73)	(204)
Agency - in addition to establishment	43	45	49	(4)	7
Premises	15	0	1	(1)	2
Supplies & Services	3,010	950	976	(26)	(79)
Independent School Fees	10,155	3,916	3,916	0	0
Schools Contingency	400	117	117	0	0
Transport	43	12	19	(7)	(20)
Schools Transport	2,771	735	914	(179)	(837)
Early Years Payments including Pupil Premium	15,615	3,976	3,976	0	0
Commissioned Services	1,982	578	576	2	9
Inter Authority Special Needs	1,545	503	503	0	0
Grants to Voluntary Organisations	115	0	16	(16)	(67)
Capital Finance	4,604	1,423	1,423	0	1
<b>Total Expenditure</b>	<b>49,086</b>	<b>14,830</b>	<b>15,147</b>	<b>(317)</b>	<b>(928)</b>
<b>Income</b>					
Fees & Charges Income	-267	-161	-164	3	20
Government Grant Income	-6,541	-1,925	-1,925	0	0
Dedicated Schools Grant	-30,267	-10,089	-10,089	0	0
Inter Authority Income	-234	-94	-59	(35)	(211)
Reimbursements & Other Grant Income	-1,744	-594	-594	0	0
Schools SLA Income	-608	-11	-1	(10)	(59)
Government Grant Income	-500	-142	-142	0	(1)
<b>Total Income</b>	<b>-40,161</b>	<b>-13,016</b>	<b>-12,974</b>	<b>(42)</b>	<b>(251)</b>
<b>Net Operational Expenditure</b>	<b>8,925</b>	<b>1,814</b>	<b>2,173</b>	<b>(359)</b>	<b>(1,179)</b>
<b>Recharges</b>					
Premises Support	405	135	135	0	0
Transport Support	773	298	298	0	(5)
Central Support	1,947	649	649	0	0
Asset Rental Support	17	0	0	0	0
Recharge Income	0	0	0	0	0
<b>Net Total Recharges</b>	<b>3,142</b>	<b>1,082</b>	<b>1,082</b>	<b>0</b>	<b>(5)</b>
<b>Net Departmental Expenditure</b>	<b>12,067</b>	<b>2,896</b>	<b>3,255</b>	<b>(359)</b>	<b>(1,184)</b>

## Community &amp; Greenspaces

	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
Employees	15,529	5,130	4,921	209	626
Agency - Covering vacancies	12	8	8	0	0
Agency - In addition to establishment	16	42	121	(79)	(237)
Premises	3,304	823	868	(45)	(136)
Supplies & Services	3,589	891	965	(74)	(224)
Transport	117	8	17	(9)	(28)
Extended Producer Responsibility	500	0	0	0	0
Other Agency Costs	454	176	191	(15)	(45)
Other Expenditure	187	12	13	(1)	(5)
Waste Disposal Contracts	7,121	942	955	(13)	(40)
Transfers to Reserves	1,091	0	0	0	0
<b>Total Expenditure</b>	<b>31,920</b>	<b>8,032</b>	<b>8,059</b>	<b>(27)</b>	<b>(89)</b>
<b>Income</b>					
Sales Income	-1,359	-544	-554	10	29
Fees & Charges Income	-6,300	-2,543	-2,530	(13)	(39)
Rental Income	-1,118	-324	-295	(29)	(86)
Government Grant Income	-5,210	-1,319	-1,319	0	0
Reimbursement & Other Grant Income	-871	-171	-171	0	0
SLA Income	-23	0	0	0	0
Internal Fees Income	-216	-37	-84	47	140
Capital Salaries	-236	-12	0	(12)	(35)
Transfers From Reserves	-619	0	0	0	0
<b>Total Income</b>	<b>-15,952</b>	<b>-4,950</b>	<b>-4,953</b>	<b>3</b>	<b>9</b>
<b>Net Operational Expenditure</b>	<b>15,968</b>	<b>3,082</b>	<b>3,106</b>	<b>(24)</b>	<b>(80)</b>
<b>Recharges</b>					
Premises Support	1,657	552	552	0	0
Transport Support	2,433	866	881	(15)	(44)
Central Support	4,297	1,432	1,432	0	0
Asset Rental Support	199	0	0	0	0
Recharge Income	-843	-281	-281	0	0
<b>Net Total Recharges</b>	<b>7,743</b>	<b>2,569</b>	<b>2,584</b>	<b>(15)</b>	<b>(44)</b>
<b>Net Departmental Expenditure</b>	<b>23,711</b>	<b>5,651</b>	<b>5,690</b>	<b>(39)</b>	<b>(124)</b>

## Economy, Enterprise &amp; Property

	Annual Budget	Budget to Date	Actual Spend	Variance (Overspend)	Forecast Outturn
	£'000	£'000	£'000	£'000	£'000
<b>Expenditure</b>					
Employees	3,911	1,581	1,490	91	272
Agency - covering vacancies	0	0	137	(137)	(270)
Repairs & Mainenance	1,691	486	486	0	0
Premises	174	136	136	(0)	(1)
Energy & Water Costs	1,082	246	218	28	84
NNDR	647	658	655	3	10
Rents	157	40	40	0	0
Economic Regeneration Activities	43	0	0	0	0
Security	508	34	35	(1)	(3)
Supplies & Services	500	201	200	1	3
Supplies & Services - Grant	643	185	185	0	0
Grants to Voluntary Organisations	72	11	12	(0)	(1)
<b>Total Expenditure</b>	<b>9,428</b>	<b>3,579</b>	<b>3,594</b>	<b>(16)</b>	<b>94</b>
<b>Income</b>					
Fees & Charges Income	-482	-166	-195	29	86
Rent - Commercial Properties	-908	-329	-328	(1)	(2)
Rent - Investment Properties	-38	-14	-14	0	0
Government Grant	-668	-215	-215	0	0
Reimbursements & Other Grant Income	-133	-99	-99	0	0
Schools SLA Income	-55	-21	-21	0	0
Recharges to Capital	-412	-39	-39	0	0
Transfer from Reserves	-572	-522	-522	0	0
<b>Total Income</b>	<b>-3,268</b>	<b>-1,405</b>	<b>-1,433</b>	<b>28</b>	<b>84</b>
<b>Net Operational Expenditure</b>	<b>6,160</b>	<b>2,174</b>	<b>2,162</b>	<b>12</b>	<b>178</b>
<b>Recharges</b>					
Premises Support	2,738	912	912	0	0
Transport	26	8	8	0	0
Central Support	2,878	959	959	0	0
Asset Rental Support	4	0	0	0	0
HBC Support Costs Income	-9,342	-3,113	-3,113	0	0
<b>Net Total Recharges</b>	<b>-3,695</b>	<b>-1,234</b>	<b>-1,234</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>2,464</b>	<b>940</b>	<b>928</b>	<b>12</b>	<b>178</b>

## Planning &amp; Transportation Department

	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
Employees	6,070	1,980	1,901	79	238
Efficiency Savings	-100	-33	0	(33)	(100)
Premises	188	83	68	15	45
Hired & Contracted Services	415	69	60	9	27
Supplies & Services	117	119	196	(77)	(231)
Street Lighting	1,643	189	281	(92)	(275)
Highways Maintenance - Routine & Reactive	1,803	451	591	(140)	(419)
Highways Maintenance - Programmed Works	812	189	0	189	567
Fleet Transport	1,467	451	445	6	19
Bus Support - Halton Hopper Tickets	14	1	0	1	1
Bus Support	506	233	233	0	0
Agency Related Expenditure	8	0	0	0	0
Grants to Voluntary Organisations	31	31	31	0	0
NRA Levy	75	0	0	0	0
LCR Levy	1,553	388	388	0	0
Contribution to Reserves	359	0	0	0	0
<b>Total Expenditure</b>	<b>14,961</b>	<b>4,151</b>	<b>4,194</b>	<b>(43)</b>	<b>(128)</b>
<b>Income</b>					
Sales & Rents Income	-97	-32	-20	(12)	(38)
Planning Fees	-798	-266	-248	(18)	(54)
Building Control Fees	-251	-84	-75	(9)	(27)
Other Fees & Charges	-971	-425	-528	103	306
Reimbursements & Grant Income	-174	-24	-55	31	0
Government Grant Income	-32	-50	-50	0	0
Halton Hopper Income	-15	-5	-3	(2)	(7)
Recharge to Capital	-305	0	0	0	0
LCR Levy Reimbursement	-1,553	-388	-388	0	0
Contribution from Reserves	-132	-132	-132	0	0
<b>Total Income</b>	<b>-4,328</b>	<b>-1,406</b>	<b>-1,499</b>	<b>93</b>	<b>180</b>
<b>Net Operational Expenditure</b>	<b>10,633</b>	<b>2,745</b>	<b>2,695</b>	<b>50</b>	<b>52</b>
<b>Recharges</b>					
Premises Support	739	246	246	0	0
Transport	808	253	249	4	11
Central Support	2,505	837	837	0	0
Asset Rental Support	918	0	0	0	0
HBC Support Costs Income	-6,347	-2,142	-2,210	68	203
<b>Net Total Recharges</b>	<b>-1,377</b>	<b>-806</b>	<b>-878</b>	<b>72</b>	<b>214</b>
<b>Net Departmental Expenditure</b>	<b>9,256</b>	<b>1,939</b>	<b>1,817</b>	<b>122</b>	<b>266</b>

## Corporate &amp; Democracy

	Annual Budget	Budget to Date	Actual Spend	Variance (Overspend )	Forecast Outturn
	£'000	£'000	£'000	£'000	£'000
<b>Expenditure</b>					
Employees	412	137	161	(24)	(16)
Contracted Services	12	3	0	3	0
Supplies & Services	102	44	22	22	0
Premises Expenditure	24	11	11	0	0
Transport Costs	1	0	40	(40)	0
Members Allowances	994	331	340	(9)	0
Interest Payable - Treasury Management	4,258	1,419	1,281	138	415
Interest Payable - Other	215	72	72	0	0
Contingency	3,638	1,229	0	1,229	3,688
Capital Financing	3,504	3,504	3,366	138	138
Contribution to Reserves	300	300	263	37	0
Debt Management Expenses	20	7	3	4	0
Precepts & Levies	244	244	244	0	0
Pay Award over 2%	0	0	0	0	(1,000)
<b>Efficiency Savings:</b>					
Purchase of Additional Leave	-100	-33	0	(33)	(50)
Voluntary Severance Scheme	-200	-67	0	(67)	(200)
Apprenticeship First Model	-200	-67	0	(67)	(50)
Agency Staff Reduction	-1,700	-567	0	(567)	(1,700)
Accelerate the Lease or Sale of Surplus Land	-100	-33	0	(33)	(100)
Review of Debt Management	-100	-33	0	(33)	(100)
Review Existing Contracts	-200	-67	0	(67)	(100)
<b>Total Expenditure</b>	<b>11,124</b>	<b>6,434</b>	<b>5,803</b>	<b>631</b>	<b>925</b>
<b>Income</b>					
Interest Receivable - Treasury Management	-3,045	-1,015	-1,330	315	944
Interest Receivable - Other	-19	-6	-6	0	0
Other Fees & Charges	-146	-46	-50	4	0
Grants & Reimbursements	-334	-56	-56	0	0
Government Grant Income	-6,272	-2,091	-2,091	0	0
<b>Total Income</b>	<b>-9,816</b>	<b>-3,214</b>	<b>-3,533</b>	<b>319</b>	<b>944</b>
<b>Net Operational Expenditure</b>	<b>1,308</b>	<b>3,220</b>	<b>2,270</b>	<b>950</b>	<b>1,869</b>
<b>Recharges</b>					
Premises Support	22	7	7	0	0
Transport	0	0	0	0	0
Central Support	898	316	316	0	0
Asset Rental Support	0	0	0	0	0
HBC Support Costs Income	-3,304	-839	-839	0	0
<b>Net Total Recharges</b>	<b>-2,384</b>	<b>-516</b>	<b>-516</b>	<b>0</b>	<b>0</b>
<b>Net Departmental Expenditure</b>	<b>-1,076</b>	<b>2,704</b>	<b>1,754</b>	<b>950</b>	<b>1,869</b>

## Public Health




	Annual Budget £'000	Budget to Date £'000	Actual Spend £'000	Variance (Overspend) £'000	Forecast Outturn £'000
<b>Expenditure</b>					
Employees	5,708	1,656	1,585	71	210
Other Premises	6	2	0	2	6
Supplies & Services	370	80	140	(60)	(181)
Contracts & SLA's	6,875	1,976	1,979	(3)	1
Transport	4	1	0	1	2
Transfer to Reserves	380	0	0	0	0
Grants to Voluntary Organisations	20	0	0	0	0
Other Agency	24	24	24	0	0
<b>Total Expenditure</b>	<b>13,387</b>	<b>3,739</b>	<b>3,728</b>	<b>11</b>	<b>38</b>
<b>Income</b>					
Fees & Charges	-122	-43	-35	(8)	(23)
Reimbursements & Grant Income	-203	-58	-63	5	13
Transfer from Reserves	-120	-36	-36	0	0
Government Grant Income	-12,522	-6,672	-6,672	0	0
<b>Total Income</b>	<b>-12,967</b>	<b>-6,809</b>	<b>-6,806</b>	<b>(3)</b>	<b>(10)</b>
<b>Net Operational Expenditure</b>	<b>420</b>	<b>-3,070</b>	<b>-3,078</b>	<b>8</b>	<b>28</b>
<b>Recharges</b>					
Premises Support	209	70	70	0	0
Transport Support	24	8	9	(1)	(2)
Central Support	1,897	632	632	0	0
Asset Rental Support	0	0	0	0	0
Recharge Income	-669	-223	-223	0	0
<b>Net Total Recharges</b>	<b>1,461</b>	<b>487</b>	<b>488</b>	<b>(1)</b>	<b>(2)</b>
<b>Net Departmental Expenditure</b>	<b>1,881</b>	<b>-2,583</b>	<b>-2,590</b>	<b>7</b>	<b>26</b>



## Progress Against Agreed Savings

## APPENDIX 3




### Adult Social Care

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			25/26 Agreed Council 01 February 2023 £'000	25/26 Agreed Council 05 March 2025 £'000		
Housing Solutions	474	Remodel the current service based on good practice evidence from other areas.	125	0		Currently Under Review
Voluntary Sector Support	N/A	Review the support provided by Adult Social Care and all other Council Departments, to voluntary sector organisations. This would include assisting them to secure alternative funding in order to reduce their dependence upon Council funding. A target saving phased over two years has been estimated.	100	0		Achieved
Community Wardens/Telecare Service		Community Wardens/Telecare Service – a review will be undertaken of the various options available for the future delivery of these services, with support	0	280		Unlikely to be achieved – currently forecast overspend position




		from the Transformation Delivery Unit.				
Care Management Community Care Budget		Community Care – continuation of the work being undertaken to review care provided through the Community Care budget, in order to reduce the current overspend and ongoing costs.	0	1,000	U	Unlikely to be achieved – currently forecast overspend position
Various		Review of Service Delivery Options – reviews will be undertaken of the various service delivery options available for a number of areas including; Day Services, Halton Supported Housing Network, In-House Care Homes, Reablement Service and Oak Meadow.	0	375	U	Currently Under Review
<b>Total ASC Directorate</b>			<b>225</b>	<b>1,655</b>		

## Finance



Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			25/26 Agreed Council 01 February 2023 £'000	25/26 Agreed Council 05 March 2025 £'000		
Internal Audit	300	Restructure in light of potential retirements over the next two years within the Internal Audit Team.	50	0		It appears unlikely that the proposed £50k budget saving will be fully realised this year, if at all
Council Tax	84	Increase the charges applied when a court summons is issued by 30% (£23), to achieve full cost recovery over the three year period.	40	0		Look to increase costs in 2026/27 but this is pending a Government consultation on council tax of which summons charges are being reviewed.
Debt Management		Debt Management – undertake a review of debt management policies and procedures, in order to implement a more robust approach to debt management and debt recovery, considering options such as seeking payment in advance wherever possible, to improve cashflow and reduce the risk of non-recovery.	0	100		Currently part of workstream being undertaken by the Transformation Programme.

<b>Total Finance Department</b>	<b>90</b>	<b>100</b>		
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## Legal and Democratic Services

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			25/26 Agreed Council 01 February 2023 £'000	25/26 Agreed Council 05 March 2025 £'000		
Members		Deputy Mayor – cease provision of the Deputy Mayor’s allowance, whilst retaining a nominated Deputy Mayor.	0	6		Achieved.
<b>Total Legal and Democratic Services</b>			<b>0</b>	<b>6</b>		


## Children and Families Department

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			25/26 Agreed Council 01 February 2023 £'000	25/26 Agreed Council 05 March 2025 £'000		
Children's Centres	1,293	Review the operation of Windmill Hill Children's Centre, where there is the potential to save on premises and staffing costs.	22	0		With the implementation of the family hubs the review of windmill hill will no longer be viable. The centre is located in an area of deprivation and the role of the centre as a family hub is a priority in the children's social care review and supporting families at an earlier level, improving access to services for the most vulnerable and ensure a positive start for all children. These priorities fit with the council priorities
Children's Residential Care		Residential Placements – continuation of the work being undertaken to review residential placements, especially high cost placements, and identify opportunities to step-down	0	1,500		Residential placements were all reviewed in early 2024 with some reduction in costs established. As part of the longer term plan included in the sufficiency strategy, Halton has partnered with a not for profit organisation, Juno, who are awaiting




		placements or find alternatives, in order to reduce the current overspend and ongoing costs.				registration from OFSTED - this approach is part of the LCR approach working with NFP organisations. In addition significant changes have been made to reduce the numbers of children coming into care. Mocking bird constellation is in place and evidenced support has resulted in appropriate transition so the need for residential is mitigated. A property has been identified for care leavers and further properties identified for additional semi-independent provisions. Juno will focus on their second home after July
Fostering		Independent Fostering Agencies and Out of Borough Fostering – continuation of the work being undertaken to review placements, to increase use of In-Borough foster carers wherever possible and thereby reduce costs, in order to reduce the current overspend and ongoing costs.	0	200	U	Recruitment campaign has been launched to attract in house foster carers so our reliance on IFA's is reduced. Unfortunately there is a national shortage of foster carers and as a result the reliance on IFA's continues
Legal Costs		Court Costs – implementation of measures in conjunction with Legal Services, to reduce the backlog and ongoing number of Children's cases going to court,	0	200	U	Progress has been made on reducing the cost of court with success in reducing the number of applications, the reduction in timeliness of proceedings, further work is currently underway to reduce the number of

		thereby reducing the timescales involved and cost of court proceedings, in order to reduce the current overspend and ongoing costs.				C2 applications to court. PLO process is proving effective for some families in diverting away from legal proceedings and safely maintaining children with parents, further exploration is taking place on the use of in house psychologists to undertake assessments in the court arena to further reduce court costs
<b>Total Children &amp; Families Department</b>			<b>22</b>	<b>1,900</b>		

## Education, Inclusion and Provision Department

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			25/26 Agreed Council 01 February 2023 £'000	25/26 Agreed Council 05 March 2025 £'000		
Home to School Transport		Home to School Transport – undertake consultation with stakeholders and partners with regard to implementing a new Home to School and College Travel and Transport Policy for Children and Young People with Special Educational Needs and Disabilities.	0	300		The consultation with stakeholders and partners has taken place. The results have been analysed and recommendations put to Executive Board for possible policy changes from the beginning of the new academic year.
<b>Total EIP Department</b>			<b>0</b>	<b>300</b>		


## Community and Greenspace Department

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			25/26 Agreed Council 01 February 2023 £'000	25/26 Agreed Council 05 March 2025 £'000		
Stadium & Catering Services – School Meals	12	Cease to deliver the school meals service, which has made significant losses of over £200,000 for a number of years and is forecast to make a similar loss by year-end. Work would be undertaken with schools over the next two years to support them to secure an alternative means of delivery, whether in-house or via an external provider.	12	0		School meals service has ceased and is reflected in the 25/26 budget.
Green Waste		Green Waste – increase green waste charges from £43 to £50 per annum, to bring Halton onto a comparable basis with charges levied by neighbouring councils.	0	100		Green waste charges have been increased to £50.
Area Forums		Area Forums – cease the funding for Area Forums.	0	170		Area forum budgets have been removed in 25-26




Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			25/26 Agreed Council 01 February 2023 £'000	25/26 Agreed Council 05 March 2025 £'000		
<b>Total Community &amp; Greenspace Dept</b>			<b>12</b>	<b>270</b>		


## Economy, Enterprise and Property Department

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			25/26 Agreed Council 01 February 2023 £'000	25/26 Agreed Council 05 March 2025 £'000		
Asset Management		Accelerate the lease or sale of surplus land, non-operational buildings, surplus space within building, etc. to either generate lease rentals or capital receipts to help fund capital schemes and thereby reduce future capital financing costs.	0	100		It is currently too early to establish if this can be achieved. Although all options will be explored.
<b>Total EEP Dept</b>			<b>0</b>	<b>100</b>		

## Policy, Planning and Transportation Department

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			24/25 £'000	25/26 £'000		
Highways		LED Advertising Screens – install LED advertising screens at appropriate locations within the Borough in order to generate advertising revenue. The estimated annual income is the Council's share of advertising revenue net of capital financing costs for the installations.	0	100		It is not anticipated that this income will be achieved this financial year as the LED screens are no closer to being installed.
<b>Total PPT Dept</b>			<b>0</b>	<b>100</b>		




## Public Health Directorate Department

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			24/25 £'000	25/26 £'000		
Environmental Health		Pest Control – increase charges for pest control on the basis of benchmarking data, to bring Halton onto a comparable basis with charges levied by neighbouring councils.	0	45		Charges Increased
<b>Total Public Health Directorate</b>			<b>0</b>	<b>45</b>		

## Corporate and Democracy

Service Area	Net Budget £'000	Description of Saving Proposal	Savings Value		Current Progress	Comments
			24/25 £'000	25/26 £'000		
Chief Executives Delivery Unit		Purchase of Additional Leave – development of a voluntary scheme to enable staff to purchase additional annual leave.	0	100		Scheme has been agreed and implemented. Work is being undertaken to identify the value of savings which will be achieved.
Chief Executives Delivery Unit		Voluntary Severance Scheme – development of a policy whereby staff may be offered voluntary severance in appropriate circumstances, but without creating a significant pension strain liability.	0	200		Scheme to be designed and approved. Uncertainty to timing and sign-up to the scheme. Unlikely to be in place for this financial year.
Chief Executives Delivery Unit		Apprenticeships - implement an “Apprentice First” policy, with all appropriate vacant posts assessed initially to determine whether they might be suitable as an apprenticeship. This will	0	200		Scheme being developed, uncertainty to take up of the scheme.

		build longer term resilience into the organisation's workforce and provide short term cost savings by drawing down funding from the apprenticeship levy. The scheme will be co-ordinated by the newly appointed Apprenticeship Officer, funded and supported by the Transformation Delivery Unit.				
Council Wide		Agency Staff Reduction – continuation of the work being co-ordinated by the Transformation Delivery Unit to reduce the reliance upon agency workers across the Council, in particular within Adults and Children's Social Care. Target net savings of £1.7m for 2025/26, £1.3m for 2026/27 and £1.1m for 2027/28.	0	1,700	U	<p>There is evidence of reduced agency usage within the Children's directorate but targets have been built into directorate budget which duplicate what is included here.</p> <p>Uncertainty with regard to reductions across Adult Social Care.</p> <p>Highly unlikely the £1.7m saving will be achieved in the current financial year.</p>
Council Wide		Review all existing contracts across the Council to re-consider their requirements and performance on the basis of outputs achieved.	0	200	U	Currently part of workstream being undertaken by the Transformation Programme.
<b>Total Corporate &amp; Democracy</b>			<b>0</b>	<b>2,400</b>		

<u>Symbol</u>	<u>Objective</u>
	Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.
	Indicates that it is <u>uncertain or too early to say at this stage</u> whether the milestone/objective will be achieved within the appropriate timeframe.
	Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.

# 2025/26 Capital Programme as at 31 July 2025

# APPENDIX 4

Scheme Detail	205/26 Original Allocation £000	2025/26 Revised Allocation £000	Cumulative Spend to 31 July 2025 £000	Cumulative Forecast Spend to 30 Sept 2025 £000	Cumulative Forecast Spend to 30 Nov 2025 £000	Cumulative Forecast Spend to 31 Jan 2026 £000	Cumulative Forecast Spend to 31 March 2026 £000	Allocation remaining £000
<b>Childrens Directorate</b>								
Capital Repairs	882.1	882.1	189.0	675.0	688.0	700.0	754.0	128.1
Asbestos Management	10.0	10.0	0.4	3.0	5.0	6.0	10.0	0.0
Schools Access Initiative	37.7	37.7	11.0	15.0	20.0	25.0	30.0	7.7
Basic Need Projects	600.8	600.8	0.0	0.0	0.0	0.0	100.0	500.8
Small Capital Works	173.0	173.0	22.9	50.0	65.0	80.0	173.0	0.0
SEND capital allocation	1,871.2	1,871.2	142.2	171.0	400.0	575.0	1,022.0	849.2
SEND capital unallocated	1,775.5	1,775.5	0.0	0.0	0.0	0.0	0.0	1,775.5
SCA unallocated	129.3	129.3	0.0	0.0	0.0	0.0	0.0	129.3
Family Hubs & Start for Life	63.0	63.0	2.3	15.0	35.0	48.0	63.0	0.0
Childcare Expansion	314.8	314.8	18.1	18.1	18.1	18.1	314.8	0.0
AMP Data	25.0	25.0	8.4	23.0	23.0	24.0	25.0	0.0
<b>Childrens Directorate Total</b>	<b>5,882.4</b>	<b>5,882.4</b>	<b>394.3</b>	<b>970.1</b>	<b>1,254.1</b>	<b>1,476.1</b>	<b>2,491.8</b>	<b>3,390.6</b>



## 2025/26 Capital Programme as at 31 July 2025 continued

Scheme Detail	205/26 Original Allocation £000	2025/26 Revised Allocation £000	Cumulative Spend to 31 July 2025 £000	Cumulative Forecast Spend to 30 Sept 2025 £000	Cumulative Forecast Spend to 30 Nov 2025 £000	Cumulative Forecast Spend to 31 Jan 2026 £000	Cumulative Forecast Spend to 31 March 2026 £000	Allocation remaining £000
<b>Adults Directorate</b>								
Grants - Disabled Facilities	2,200.0	2,000.0	248.7	1,100.0	1,450.0	1,800.0	2,000.0	0.0
Stair Lifts	400.0	650.0	191.9	325.0	430.0	550.0	650.0	0.0
Joint Funding RSL Adaptations	300.0	250.0	72.8	125.0	170.0	210.0	250.0	0.0
Madeline McKenna Residential Home	300.0	250.0	24.5	125.0	170.0	210.0	250.0	0.0
Millbrow Care Home	200.0	200.0	21.1	100.0	130.0	170.0	200.0	0.0
St Lukes	50.0	150.0	39.7	75.0	100.0	125.0	150.0	0.0
St Patricks	200.0	200.0	13.0	100.0	130.0	170.0	200.0	0.0
Care Home Refurbishment	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Telehealthcare Digital Switchover	135.0	135.0	0.0	70.0	90.0	110.0	135.0	0.0
Oakmeadow and Peelhouse Network Improvements	40.0	40.0	0.0	20.0	30.0	30.0	40.0	0.0
Crow Wood Lane Specialist Housing	250.0	250.0	0.0	126.0	170.0	210.0	250.0	0.0
<b>Adults Directorate Total</b>	<b>4,075.0</b>	<b>4,125.0</b>	<b>611.7</b>	<b>2,166.0</b>	<b>2,870.0</b>	<b>3,585.0</b>	<b>4,125.0</b>	<b>0.0</b>

**2025/26 Capital Programme as at 31 July 2025 continued**

Scheme Detail	205/26 Original Allocation	2025/26 Revised Allocation	Cumulative Spend to 31 July 2025	Cumulative Forecast Spend to 30 Sept 2025	Cumulative Forecast Spend to 30 Nov 2025	Cumulative Forecast Spend to 31 Jan 2026	Cumulative Forecast Spend to 31 March 2026	Allocation remaining
	£000	£000	£000	£000	£000	£000	£000	£000
<b>Environment &amp; Regeneration Directorate</b>								
Stadium Minor Works	22.1	22.1	24.6	24.6	24.6	24.6	24.6	-2.5
Halton Leisure Centre	99.7	99.7	71.8	76.8	86.8	88.8	90.8	8.9
Children's Playground Equipment	67.8	67.8	50.5	55.5	60.5	60.5	65.0	2.8
Landfill Tax Credit Schemes	340.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Upton Improvements	13.0	13.0	0.0	0.0	0.0	0.0	13.0	0.0
Crow Wood Park Play Area	12.0	12.0	0.0	0.0	0.0	0.0	12.0	0.0
Open Spaces Schemes	600.0	600.0	384.0	434.0	484.0	534.0	600.0	0.0
Runcorn Town Park	450.6	450.6	0.0	0.0	0.0	60.0	125.0	325.6
Spike Island / Wigg Island	1,841.6	1,841.6	125.3	153.4	170.0	180.0	250.0	1,591.6
Pickerings Pasture Cafe	469.2	469.2	6.0	80.0	175.0	300.0	450.0	19.2
Cemetery Infrastructure work	469.1	469.1	0.0	0.0	89.0	207.0	410.0	59.1
Stadium Public Address System	810.0	346.0	26.0	76.0	176.0	286.0	346.0	0.0
Litter Bins	20.0	20.0	0.0	0.0	0.0	0.0	20.0	0.0
*Replacement Cremator*	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Equality Act Improvement Works	303.5	303.5	0.0	20.0	150.0	236.0	303.5	0.0
Foundary Lane Residential Area	3,520.9	3,520.9	647.7	707.5	800.0	1,020.9	3,520.9	0.0
Property Improvements	231.1	231.1	89.4	95.5	133.2	153.6	231.1	0.0
Town Deal	21,823.1	18,949.5	3,010.7	5,631.6	8,663.1	11,300.7	13,210.2	5,739.3
UK Shared Prosperity Fund	101.2	101.2	0.0	0.0	20.0	55.0	102.2	-1.0
Runcorn Waterfront Residential Development	82.0	82.0	4.2	4.2	33.3	56.4	82.0	0.0
Changing Places	17.0	17.0	0.0	0.0	0.0	0.0	17.0	0.0
Kingsway Centre Demolition	708.0	708.0	293.0	345.2	535.0	602.2	708.0	0.0
Port of Weston	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Sci-tech Daresbury Project Violet	2,200.0	2,200.0	0.0	0.0	0.0	0.0	2,200.0	0.0
Astmoor Masterplan	81.6	81.6	0.0	0.0	0.0	30.0	81.6	0.0
Sci-tech Daresbury - CPO	3,000.0	3,000.0	0.0	0.0	0.0	0.0	3,000.0	0.0

**2025/26 Capital Programme as at 31 July 2025 continued**

Scheme Detail	205/26 Original Allocation £000	2025/26 Revised Allocation £000	Cumulative Spend to 31 July 2025 £000	Cumulative Forecast Spend to 30 Sept 2025 £000	Cumulative Forecast Spend to 30 Nov 2025 £000	Cumulative Forecast Spend to 31 Jan 2026 £000	Cumulative Forecast Spend to 31 March 2026 £000	Allocation remaining £000
Bridge and Highway Maintenance	839.2	839.2	0.0	209.8	419.6	629.4	839.2	0.0
Runcorn Busway	90.0	90.0	76.0	90.0	90.0	90.0	90.0	0.0
ATF3 Murdishaw to Whitehouse	757.0	757.0	370.0	757.0	757.0	757.0	757.0	0.0
ATF4 - Widnes Town Centre Accessibility	114.5	114.5	0.0	0.0	0.0	0.0	0.0	114.5
A56 Reconstruction	943.7	943.7	0.0	0.0	314.5	629.0	943.7	0.0
LCWIP phase 2 Daresbury	3,862	3,862	19.0	34.5	84.5	84.5	84.5	3,777.3
Pot Hole Funding	968	968	36.0	269.0	502.0	735.0	968.0	0.4
CRSTS	4,405	4,405	351.0	1,364.5	2,378.0	3,391.5	4,405.0	0.0
Street Lighting - Structural Maintenance	1,025.1	1,025.1	0.0	50.0	100.0	150.0	200.0	825.1
Street Lighting - Upgrades	728.4	728.4	0.0	25.0	50.0	75.0	100.0	628.4
East Runcorn Connectivity	5,851.7	5,851.7	3,141.0	4,496.4	5,851.8	5,851.8	5,851.8	-0.1
Risk Management	712.9	120.0	23.0	43.0	53.0	83.0	103.0	17.0
Widnes Loops	0.0	0.0	65.0	65.0	65.0	65.0	65.0	-65.0
Fleet Replacements	4,482.0	2,500.0	214.0	785.5	1,357.0	1,928.5	2,500.0	0.0
Early Land Acquisition Mersey Gateway	210.0	80.0	45.0	62.3	68.0	73.0	80.0	0.0
Mersey Gateway Crossings Board	60.0	0.0	-249.6	-247.0	-244.4	-241.8	-241.8	241.8
<b>Environment &amp; Regeneration Directorate Total</b>	<b>62,333.3</b>	<b>55,890.7</b>	<b>8,823.6</b>	<b>15,709.3</b>	<b>23,446.5</b>	<b>29,496.6</b>	<b>42,608.3</b>	<b>13,282.4</b>
<b>Chief Executives Directorate</b>								
IT Rolling Programme	805.6	1,305.6	677.1	767.1	937.5	1,100.5	1,305.6	0.0
Halton Smart Microgrid	10,870.0	1,000.0	0.0	0.0	0.0	0.0	1,000.0	0.0
Transformation Programme	1,538.0	2,465.7	832.7	1,293.9	1,729.3	2,107.0	2,465.7	0.0
<b>Chief Executives Directorate Total</b>	<b>13,213.6</b>	<b>4,771.3</b>	<b>1,509.8</b>	<b>2,061.0</b>	<b>2,666.8</b>	<b>3,207.5</b>	<b>4,771.3</b>	<b>0.0</b>
<b>Grand Total</b>	<b>85,504.4</b>	<b>70,669.4</b>	<b>11,339.4</b>	<b>20,906.4</b>	<b>30,237.4</b>	<b>37,765.2</b>	<b>53,996.4</b>	<b>16,673.0</b>

Risk No	Risk Identified	Impact	Likelihood	Risk Score	Risk Control Measures	Assessment of Residual Risk with Control Measures Implemented			Responsible Person	Timescale for Review	Progress Comments	Date Updated
						Impact	Likelihood	Risk Score				
1	<b>Pay costs</b> <ul style="list-style-type: none"> <li>Pay award</li> <li>Staff Turnover Saving Target</li> <li>Agency, casuals and overtime</li> <li>National Living Wage</li> <li>Pension Costs</li> </ul>	4	4	16	<ul style="list-style-type: none"> <li>Budget based upon individual staff members/vacancies</li> <li>Budget monitoring</li> <li>Contingency</li> <li>Balances</li> <li>Medium Term Forecast</li> <li>Engage with Cheshire Pension Scheme and pension actuary</li> <li>Market supplement paid in multiple service areas</li> <li>Employer of Choice Initiative</li> <li>Connect to Halton – Review of Scheme</li> </ul>	3	3	9	ED/SB/Directors	Monthly	<p>2025/26 budget includes pay growth at forecast 2% pay award. Pay offer agreed at 3.2%, this will cost approximately a further £1m to the budget. Backdated pay to be paid in August 2025</p> <p>Agency costs and usage remain high although some evidence of reduction in numbers within Children Social Care.</p> <p>Market Supplements being paid to increasing number of service users.</p>	31/7/25

											Connect to Halton scheme went live September 2024, agency and casual appointments to be covered by the scheme.	
2	<b>Redundancy and Early Retirements</b>	3	3	9	<ul style="list-style-type: none"> <li>• Benefits Tracking Process</li> <li>• Future savings to take into account cost of redundancy and early retirements.</li> <li>• Seek Government approval to use capital receipts to fund transformation costs.</li> <li>• Develop policy for voluntary severance scheme</li> </ul>	2	3	6	ED/SB	Quarterly	<p>Tracker created to monitor redundancy costs in current year.</p> <p>Look to capitalise redundancy costs where possible where evidence exists it creates a longer term saving.</p> <p>£0.200m saving included in 25/26 budget for savings from voluntary severance scheme.</p>	31/07/25

3	<b>Savings not achieved</b>	4	3	12	<ul style="list-style-type: none"> <li>• Budget monitoring</li> <li>• Contingency</li> <li>• Rigorous process in approving savings.</li> <li>• Review of savings at departmental and directorate level</li> <li>• Monthly budget monitoring</li> <li>• Medium Term Financial Forecast</li> <li>• RAG monitoring of savings included in bi-monthly monitoring reports.</li> <li>• Transformation saving targets reported monthly through Transformation Programme Board.</li> </ul>	4	2	8	RR/ED/SB/Directors	Monthly	<p>Savings for 2025/26 have been written into Directorate budgets.</p> <p>Budget savings monitored closely and if necessary offsetting savings sought.</p> <p>Transformation Programme Board meeting on monthly basis to discuss progress against programme.</p>	31/07/25
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4	<b>Price inflation</b>	3	3	9	<ul style="list-style-type: none"> <li>• Prudent budget provision</li> <li>• Latest forecast information used eg. utilities</li> <li>• Budget monitoring</li> <li>• Contingency</li> <li>• Balances</li> <li>• CPI/RPI monitoring</li> <li>• MTFS</li> </ul>	3	3	9	ED/SB	Monthly	<p>CPI for June 2025 is 3.6% and RPI is 4.4%. Both running higher than inflation included in 2025.26 budget.</p> <p>Office of Budget Responsibility (OBR) forecast inflation to be 3.2% in 2025 and 2.1% through to 2027. Rates are higher than forecast that at 2025/26 budget setting and remain above Governments 2% target.</p>	31/07/25
5	<b>Review of LG Finance</b> <ul style="list-style-type: none"> <li>• Business rates retention – 100% Pilot and Review</li> <li>• Fair Funding Review</li> <li>• National Public Spending Plans</li> <li>• Social Care Green Paper</li> </ul>	4	4	16	<ul style="list-style-type: none"> <li>• MPs</li> <li>• SIGOMA / LG Futures</li> <li>• Liverpool City Region &amp; Merseyside Treasurers Group</li> <li>• Medium Term Financial Strategy</li> </ul>	3	3	9	ED/SB/NS/MW/MG	Weekly/Monthly	<p>Business rate retention pilot continues through to March 2026.</p> <p>Government are committed to providing more certainty on LG Finances through multi year settlements.</p>	31/07/25



					<ul style="list-style-type: none"> <li>• Member of business rate retention pilot region</li> <li>• Dialogue with DCLG</li> <li>• Responding to reviews and consultations</li> </ul>						<p>Government issued the Fair Funding consultation on 20 June 2025. Closing date of 15 August. Halton response together with that of LCR and Sigoma.</p> <p>Resetting the Business Rates Retention consultation was issued by Government in April 2025 with Halton submitting a response prior to the 02 June deadline.</p>	
6	<b>Treasury Management</b> <ul style="list-style-type: none"> <li>• Borrowing</li> <li>• Investment</li> </ul>	2	3	6	<ul style="list-style-type: none"> <li>• Treasury Management Strategy</li> <li>• Link Asset Services advice</li> <li>• Treasury Management planning and monitoring</li> </ul>	1	3	3	ED/SB/MG	Daily / Quarterly	<p>BoE base rate reduced to 4.0%.</p> <p>Impact of Exceptional Financial Support request to be assessed with regards to timing of future borrowing.</p>	31/07/25

					<ul style="list-style-type: none"> <li>Attendance at Networking and Benchmarking Groups</li> <li>Officer and Member Training</li> </ul>							
7	<b>Demand led budgets</b> <ul style="list-style-type: none"> <li>Children in Care</li> <li>Out of borough fostering</li> <li>Community Care</li> <li>High Needs</li> </ul>	4	4	16	<ul style="list-style-type: none"> <li>Budget monitoring</li> <li>Contingency</li> <li>Balances</li> <li>Review service demand</li> <li>Directorate recovery groups</li> <li>Monthly budget monitoring</li> <li>Children Improvement Plan Investment Funding</li> </ul>	4	4	16	ED/SB/NS/MW	Monthly	<p>Numbers of children in care and with protection plans reviewed on a weekly basis.</p> <p>Community care costs and numbers on increase, reviewed on a regular basis.</p> <p>Investment in Children Services following OFSTED inspection to be monitored with regard to control and reduction of future costs.</p>	31/07/25
8	<b>Mersey Gateway Costs</b>	4	2	8	<ul style="list-style-type: none"> <li>Regular monitoring with Crossing Board</li> </ul>	2	1	2	ED/SB/MG	Quarterly	Arrangements in place to monitor spend and	31/07/25

	<ul style="list-style-type: none"> <li>Costs</li> <li>Toll Income</li> <li>Funding</li> <li>Accounting treatment</li> </ul>				<ul style="list-style-type: none"> <li>Capital reserve</li> <li>Government Grant</li> <li>Liquidity Fund</li> </ul>						availability of liquidity fund.	
9	<b>Council Tax Collection</b>	3	3	9	<ul style="list-style-type: none"> <li>Council tax monitoring on monthly basis</li> <li>Review of Collection Rate</li> <li>Collection Fund Balance</li> <li>Provision for bad debts</li> <li>Review recovery procedures</li> <li>Benchmarking</li> </ul>	3	2	6	ED/PG/SB/PD/BH/MG	Monthly	<p>Collection rate to 31 July 2025 was 36.16% which is marginally lower than the rate of 36.09% at the same point last year.</p> <p>To 31 July 2025 £1.268m was collected in relation to old year debt.</p>	31/07/25
10	<b>Business Rates Retention Scheme</b>	3	3	9	<ul style="list-style-type: none"> <li>Review and monitoring of latest business rates income to baseline and estimate for year.</li> <li>Prudent allowance for losses in collection</li> </ul>	3	1	3	ED/SB/LB/MG	Monthly	<p>Collection rate to 31 July 2025 was 40.69% which is 0.9% lower than the rate at the same point last year.</p> <p>To 31 May 2025 £0.345m was</p>	31/07/25

					<ul style="list-style-type: none"> <li>Prudent provision set aside for losses from valuation appeals</li> <li>Regular monitoring of annual yield and baseline / budget position</li> <li>Benchmarking Groups</li> <li>Review recovery procedures</li> </ul>						collected in relation to old year debt.	
11	<b>Income recovery</b> <ul style="list-style-type: none"> <li>Uncertainty to economy following cost of living and high inflation</li> </ul>	3	3	9	<ul style="list-style-type: none"> <li>Corporate charging policy</li> <li>Budget monitoring</li> <li>Contingency</li> <li>Balances</li> <li>Income benchmarking</li> </ul>	3	2	6	ED/MM/SB	Monthly	Income shortfalls identified and cause of increased concern in certain areas are being closely monitored.  Additional posts created within Adult Social Care Directorate, responsible for improving the overall collection of social care debt.	31/07/25
13	<b>Capital Programme</b> <ul style="list-style-type: none"> <li>Costs</li> </ul>	4	3	12	<ul style="list-style-type: none"> <li>Project Management</li> <li>Regular monitoring</li> </ul>	3	2	6	Project Managers/ED /SB/LH	Quarterly	Capital receipts have been fully committed therefore new	31/07/25

	<ul style="list-style-type: none"> <li>Funding</li> <li>Key Major Projects</li> <li>Clawback of Grant</li> <li>Availability and timing of capital receipts</li> <li>Cashflow</li> <li>Contractors</li> </ul>				<ul style="list-style-type: none"> <li>Detailed financial analysis of new schemes to ensure they are affordable</li> <li>Targets monitored to minimise clawback of grant.</li> <li>Contractor due diligence</li> <li>Dialogue with Government departments.</li> </ul>						capital schemes need to bring own funding.	
14	<b>Academy Schools</b> <ul style="list-style-type: none"> <li>Impact of transfer upon Council budget</li> <li>Loss of income to Council Services</li> </ul>	2	4	8	<ul style="list-style-type: none"> <li>Early identification of school decisions</li> <li>DfE Regulations</li> <li>Prudent consideration of financial transactions to facilitate transfer</li> <li>Services continue to be offered to academies</li> <li>Transfer Protocol</li> </ul>	1	3	3	ED/SB/NS	Monthly	Consideration given in MTFS for loss of funding.	31/07/25
15	<b>Reserves</b> <ul style="list-style-type: none"> <li>Diminishing reserves, used to balance budget,</li> </ul>	3	4	12	<ul style="list-style-type: none"> <li>Monitored on a bi-monthly basis, reported to Management Team and Exec Board</li> </ul>	3	3	9	ED/SB	Quarterly	Monitored and reported on a regular basis.	31/07/25

	fund overspend positions.				<ul style="list-style-type: none"> <li>• Benchmarking</li> <li>• Financial Forecast</li> <li>• Programme to replenish reserves.</li> </ul>						<p>Council reserves at historic low levels.</p> <p>Reserves will need to be replenished within future budgets</p>	
16	<b>Budget Balancing</b> <ul style="list-style-type: none"> <li>• Council has struggled to achieve a balanced budget position for a number of years.</li> <li>• Forecast for current year is an overspend position of £19m.</li> <li>• Reserves insufficient to balance current year budget.</li> <li>• Council has been given approval in-principle for Exceptional Financial Support (day to day costs funded through capital borrowings) for 2024/25 and 2025/26.</li> </ul>	4	4	16	<ul style="list-style-type: none"> <li>• Current year budgets monitored on a regular basis.</li> <li>• Forward forecasting through to March 2029 reported on a prudent basis.</li> <li>• Regular conversations with DHLUC re Council's financial position.</li> <li>• LGA to undertake a financial assurance review.</li> <li>• Transformation programme in place.</li> <li>• Financial Recovery Plan required to better inform how the Council</li> </ul>	4	4	16	ED/SB	Ongoing	<p>Council has received in-principle agreement to fund day to day costs through Exceptional Financial Support.</p> <p>EFS covers a total of £52.8m over two years, split: 24/25 - £20.8m 25/26 - £32.0m</p> <p>Council utilised £10m of EFS in 24/25, below the approved amount.</p> <p>Financial recovery plan to be put in place to limit Council exposure to EFS</p>	31/07/25

					will achieve future sustainable budgets.						and repayment of borrowings to date.	
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**REPORT TO:** Executive Board

**DATE:** 11 September 2025

**REPORTING OFFICER:** Director of Finance

**PORTFOLIO:** Corporate Services

**SUBJECT:** Medium-Term Financial Strategy 2026/27 – 2030/31

**WARD(S):** Borough-wide

## **1.0 PURPOSE OF REPORT**

- 1.1 To establish the Council's Medium-Term Financial Strategy for the period 2026/27 to 2030/31.

## **2.0 RECOMMENDATION: That;**

- (i) the Medium Term Financial Strategy presented in Appendix 1, be approved;**
- (ii) the 2026/27 base budget be prepared on the basis of the underlying assumptions set out in the Strategy;**
- (iii) the Reserves and Balances Strategy presented in Appendix 2 be approved;**
- (iv) the award of Council Tax Support for 2025/26 remains at the 2025/26 level of 21.55%.**

## **3.0 SUPPORTING INFORMATION**

### Medium-Term Financial Strategy

- 3.1 The Medium-Term Financial Strategy (MTFS) sets out a five-year projection of the Council's resources and spending. It has been based on the most recent information that is currently available.
- 3.2 Government have confirmed that there will be significant and wide-ranging changes introduced to the local government finance system in 2026/27, known as the Fair Funding Review. The aim of the review is to target funding where it is most needed most by using updated funding formulae to determine the different needs and costs faced by individual authorities, as well as their ability to raise revenue locally through Council Tax. A Fair Funding Review consultation was issue in June, with a closing date of 15<sup>th</sup> August 2025.



Although the consultation provided some details of the formulae and methodologies that will be used to determine individual local authorities' allocations under the new system, no funding exemplifications were provided, and uncertainty remains around some crucial elements of the system, most notably the future of the 100% business rates retention pilot schemes and transitional arrangements. The potential impact of the Fair Funding Review for Halton has been modelled, and is set out in Appendix 1, Section 2.0, however, it is important to note that this figure is an estimate only, and is subject to a high degree of uncertainty given that Government have not published the data underlying the proposed funding formulae, and the scope for additional changes to be made to proposals ahead of the Local Government Finance Settlement later in the year.

- 3.3 Council net spending at 31<sup>st</sup> March 2025 was £16.073m over budget, which was funded by a transfer of £6.073m from earmarked reserves, and £10m of Exceptional Financial Support (EFS), formally approved by the Ministry of Housing, Communities and Local Government (MHCLG) on 21 August 2025. Growth of £33.556m was applied to the Council's budget in 2025/26 using £29.385m of EFS. EFS permits councils in financial difficulty to capitalise annual revenue costs and funding them with long-term borrowing over 20 years from the Public Works Loans Board (PWLb). EFS does not provide grant funding, and the cost of any borrowing taken will need to be borne by the Council's revenue budget over the next 20 years. EFS approval for 2025/26 is pending the Council undergoing an external assurance review which will include, but will not be limited to, an assessment of the council's financial position and governance arrangements. No date has yet been fixed for the assessment
- 3.4 Review of the Council's in-year spend position is reviewed and reported to Executive Board on a bi-monthly basis. As at 31 July 2025 the net Council spending position is £1.629m over budget. The outturn forecast for the year estimates that net spending will be over budget by £5.572m if no corrective action is taken. The Council is taking steps to bring in-year spend within budget not doing so will increase the level of EFS and will result in higher financing costs over the next 20 years. Spend is increasing against the key pressure areas, notably children social care, adult social care and home to school transport. The Council spend against social care areas is significantly higher on a per head basis than comparator authorities and urgent action is required over the MTFS period to bring this down.
- 3.5 Given the scale of the request for EFS, it is imperative that work is undertaken at pace and scale to reduce the Council's overall cost base. Work is currently being undertaken by the Transformation Team to scope the potential for future savings to contribute towards a sustainable budget within the medium-term.
- 3.6 The information presented within the MTFS is based on the best current estimates of inflation and demand, and any other known increases to spending. It does not include any estimates for savings achieved as part of the refocused Transformation Programme. The Financial Recovery Plan, presented as the

next item on the agenda, demonstrates the scale of the savings required to return the Council to a sustainable budget position over the medium-term.

- 3.7 Appendix 1 details the Medium-Term Financial Strategy from 2026/27 – 2030/31 which has been produced using a prudent estimate of the financial conditions over the course of the next five years.
- 3.8 Adopting a prudent view, the Strategy identifies that the gap between the Council's expenditure and the resources available is estimated to be £118.613m by 2030/31 if current levels of spending are maintained. This represents 54% of the Council's estimated resources in 2030/31.
- 3.9 The forecast shows that it is vital that a significant level of budget savings are achieved over the next five years, the scale of which will be extremely difficult to implement.
- 3.10 The Council has a legal duty to set a balanced budget each year, meaning that anticipated expenditure cannot exceed the income which the Council expects to receive in any particular year.

#### Exceptional Financial Support

- 3.11 If a local authority does not expect to be able to set a balanced budget, they can apply to MHCLG for Exceptional Financial Support (EFS). This will normally take the form of a capitalisation direction, permitting the authority to meet revenue costs through capital resources. It is important to note that EFS is not a long-term solution to solving financial difficulties. The additional capital resources required will take the form of borrowing from the Public Works Loan Board.
- 3.12 Government will only grant EFS where they are satisfied that authorities will continue to mitigate and manage their cost pressures, in order to ensure they return to a sustainable budget position in the short to medium-term. Any authority receiving EFS will be subject to an external assurance review and will be required to regularly report to Government on their financial position.
- 3.14 The cost of this borrowing, which can be significant, must be met from future revenue budgets, putting additional pressure on the funding available for core services. These costs will vary according to interest rates, but currently, each £10m of borrowing taken will increase revenue costs by approximately £1m.
- 3.15 £10m of EFS was used to finance spending in the 2024/25 financial year, and £29.385m was used in setting the 2025/26 budget. If this structural budget deficit is not addressed during 2025/26, a further application for EFS will be required for future years.

#### Section 114 of the Local Government Finance Act 1988

- 3.16 If MHCLG do not approve an application for EFS, the Section 151 Officer of any council which cannot set a balanced budget, will be required to issue a Section

114 Notice under the Local Government Finance Act 1988. Once the Notice is issued, no new spending can be undertaken without authorisation of the Section 151 Officer, and the council must meet within 21 days to discuss how to reduce expenditure to match the funding available. Government may also elect to intervene in the management of the council, either through direct instructions to make certain changes or the appointment of commissioners to take over operations.

- 3.17 The Council must urgently take steps to agree, implement and adhere to a recovery plan to bring spend to a sustainable position during the course of the this MTFS period. Not doing so will heighten the risk of Government not providing EFS support to the Council and leaving no further option other than Section 114 notice. The Council must adopt a Section 114 attitude to all future spending plans, with spend only being committed where it is absolutely required.

#### **4.0 POLICY IMPLICATIONS**

- 4.1 The MTFS represents the “finance guidelines” which form part of the Council’s medium-term corporate planning process. These guidelines identify the financial constraints which the Council will face in delivering its key priorities and objectives, and are an important influence on the development of the Corporate Plan, Service Plans and Strategies.

#### **5.0 FINANCIAL IMPLICATIONS**

- 5.1 The MTFS provides a guide to projected funding resources and spending requirements over the four year term. The grant amounts included in the MTFS are based on the latest information provided by Government. As new information comes to light the forecast of future income streams will be updated. Decreases to funding resources will create further budget pressures for the Council in delivering its key priorities and objectives.

#### **6.0 IMPLICATIONS FOR THE COUNCIL’S PRIORITIES**

- 6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**
- 6.2 **Building a Strong, Sustainable Local Economy**
- 6.3 **Supporting Children, Young People and Families**
- 6.4 **Tackling Inequality and Helping Those Who Are Most In Need**
- 6.5 **Working Towards a Greener Future**

## **6.6 Valuing and Appreciating Halton and Our Community**

There are no direct implications, however, the revenue budget and capital programme support the delivery and achievement of all the Council's priorities.

## **7.0 RISK ANALYSIS**

7.1 The MTFS is a key part of the Council's financial planning process, and as such it aims to minimise the risk that the Council fails to achieve a balanced budget.

7.2 The financial forecast is presented on a prudent basis but there is continued uncertainty around Government support, funding levels and the high cost of inflation. This will be reviewed on a constant basis to help mitigate the increased level of risk.

7.3 The failure to set a balanced revenue budget may lead to the requirement for the Council's Section 151 Officer to issue a Section 114 Notice.

## **8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 There are no direct equality and diversity issues.

## **9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 There are no direct climate change issues.

## **10.0 REASON FOR THE DECISION**

10.1 To seek approval for the Council's Medium Term Financial Strategy for 2026/27 to 2030/31.

## **11.0 ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

11.1 The alternative option of not maintaining a Medium-Term Financial Strategy has been considered. However, this would not follow good financial management practice, as the Medium Term Financial Strategy is a key element in informing the Council's financial planning and budget setting processes.

## **12.0 IMPLEMENTATION DATE**

12.1 The Medium Term Financial Strategy 2026/27 to 2030/31 will be implemented from 1st April 2026.

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

<b>Document</b>	<b>Place of Inspection</b>	<b>Contact Officer</b>
Local Government Grant Settlement 2025/26	Revenues and Financial Management Division, Halton Stadium, Widnes	Steve Baker

## Appendix 1

### Medium Term Financial Strategy 2026/27 – 2030/31

#### 1.0 Introduction

- 1.1 The Medium Term Financial Strategy (MTFS) sets out a five-year projection of the Council's resources and spending covering the period 2026/27 to 2030/31. The projections made within the MTFS must be treated with caution and require continuous updating as the underlying assumptions behind them become clearer.
- 1.2 The MTFS represents the "finance guidelines" that form part of the medium-term corporate planning process. These guidelines identify the financial constraints which the Council will face in delivering its key objectives, and are an important influence on the development of the Corporate Plan, Service Plans and other strategies.
- 1.3 The financial forecast presented within the MTFS is based on current levels of spend and demand continuing into future years and does not include an estimate of any savings except those where work is already progressing and cost reductions are beginning to be realised. The Financial Recovery Plan, presented as the next item on the agenda, includes further scenarios which consider the level of savings which will be required over the next five years in order to return to a sustainable budget position.

#### 2.0 Fair Funding Review

- 2.1 The Fair Funding Review is the first fundamental update to the local government finance system since 2013/14. It will involve rebuilding the existing system from the ground up, with new Relative Needs Formulae (RNF) developed to determine each council's share of assessed needs, a reset of the business rates system, and a resource adjustment to reflect the varying ability of local authorities to generate income through Council Tax.

##### Business Rates

- 2.2 Halton currently participates in the 100% business rates retention pilot scheme operating within Liverpool City Region. This arrangement has increased the funding available to Halton by allowing all growth above the business rates baseline to be retained rather than shared with Government.
- 2.3 Government have confirmed that there will be a reset of the business rates system in 2026/27, coinciding with a revaluation of non-domestic properties by

the Valuation Office Agency, and the introduction of new multiplier rates for retail, hospitality and leisure properties, and for larger properties with a rateable value of over £0.5m.

- 2.4 The main aim of the reset is to remove the growth that authorities are collecting above their existing Business Rates Baseline and redistribute this according to an assessment of need. The current system has not been reset since 2013/14, and it is estimated that £1.5bn in growth above the baseline is being retained by authorities in 2025/26, which will be available for distribution according to relative needs in 2026/27.
- 2.5 Government have stated their intention to reset the business rates system more regularly in order to prevent excessive growth being retained by authorities. It is likely that future resets will correspond with Government Spending Reviews, although it is currently unclear whether this will happen every three years, or every six years.
- 2.6 There has been no information published by Government on whether the 100% business rates pilots will continue to operate beyond 2025/26, and if so, whether any of the growth accumulated within the schemes can be retained. The Liverpool City Region constituent authorities have written to MHCLG seeking clarity over the future of the schemes. For the purposes of this forecast, it has been assumed that the pilot scheme will cease to operate in 2026/27, and that all growth will returned to Government for redistribution within the Settlement.

### **Council Tax**

- 2.7 Government has confirmed that the current 3% core council tax referendum principle will remain in place until at least 2029/30, with a further 2% increase allowed for the adult social care precept. This forecast assumes that the referendum principles will remain unchanged beyond 2029/30.
- 2.8 Within the Fair Funding Review, Government have stated that any councils seeking to increase their level of Council Tax above these thresholds will have their request considered on a case-by-case basis, but that no request would be granted where Council Tax was already set above the national average level.

### **Relative Needs Assessments**

- 2.9 The Fair Funding Review seeks to update the formulae and methodologies that are currently used to assess the relative needs of authorities across a range of council services. The current formulas were last updated in 2013/14 and were based on older datasets, some of which date back to 2001.
- 2.10 Government are proposing bespoke formulae for the following service areas:
  - Adult Social Care
  - Children's Social Care

- Fire and Rescue
- Highways Maintenance
- Home-to-School Transport
- Temporary Accommodation
- Foundation Formula (covering all other council services)

2.11 These formulae seek to determine relative need, i.e. the percentage of the total funding available on a national basis for these services that is required by each individual council, representing a measure of the demand that each local authority faces in the delivery of these services compared to other local authorities.

2.12 Government have stated their intention to roll-in several existing grants into Settlement, which will then be distributed via the new formulae. The full list of grants to be rolled in has not yet been confirmed. For the purposes of this forecast, it is assumed that the following grants will be affected:

- Revenue Support Grant
- Local Authority Better Care Fund
- New Homes Bonus
- Social Care Grant
- Market Sustainability and Improvement Fund
- Recovery Grant
- National Insurance Compensation Funding
- Homelessness Prevention Grant

Where applicable, it has been assumed that these grants will no longer be received, but that additional core funding will be received by the Council, distributed by the relevant new formulae.

2.13 The rolling-in of existing grant funding is a major area of uncertainty within the forecast as the distributions of the existing grants are largely very different from the proposed distributions under the new formulae. If any of the above grants remain as separate funding streams, or if any additional grants not listed were rolled into Settlement, the amount received from Fair Funding could increase or decrease significantly.

### **Resources Adjustment**

2.14 The resources allocated to each authority according to its assessed needs, will be adjusted to take account of its ability to raise revenue locally through Council Tax. The Government are proposing full equalisation of Council Tax, which will redistribute funding from high-taxbase areas, to those with a smaller Council Tax base, such as Halton. This is intended to compensate for the fact that a 1% increase in Council Tax raises far less revenue in low-taxbase areas than high-taxbase areas.



- 2.15 Government are proposing to take account of all mandatory discounts, and the Pension Age Local Council Tax Support Scheme within the resources adjustment, but are proposing to exclude the impact of mandatory discounts and premiums. It is proposed that a statistical proxy will be used in place of actual figures for the Working Age Local Council Tax Support Scheme, as many councils have reviewed these schemes and changed the value of the reductions awarded since the scheme was localised in 2013/14.

### **Transitional Arrangements**

- 2.16 It is highly likely that transitional arrangements will be put in place to protect councils that are set to lose funding as a result of the Fair Funding Review by phasing in a move to new allocations over a three-year period, and the introduction of a funding floor to protect the authorities who will see the largest funding reductions by a specified cash amount. It is highly unlikely that funding will be made available by Government outside of Settlement to cover these costs, so these protections are effectively paid for by the authorities whose funding assessment has increased from the Review.
- 2.17 The current proposal is for any gains and losses to be phased-in over three years, with a one third change in each year. This means that any funding increase for Halton as a result of the Fair Funding Review will not be fully realised until 2028/29.

### **Impact of Fair Funding**

- 2.18 Modelling has been undertaken to estimate the impact of these funding reforms from 2026/27 to 2028/29, which corresponds to the period covered by the latest Spending Review.
- 2.19 It is anticipated that Halton's Core Spending Power will increase as a result of the Fair Funding Review. The current best estimate of the impact of the Fair Funding Review is that Core Spending Power is expected to increase by approximately £10.45m, assuming that all Business Rates growth is lost, with this increase phased-in over three years from 2026/27 to 2028/29. It is important to note, however, that this estimate is based on some significant assumptions, including which grants will be rolled into Settlement and distributed according to the new needs formulae, the total value of Business Rates growth to be redistributed within the system, the future of the Business Rates pilot schemes, and the differences between reported Council Tax bases and those that will be modelled by MHCLG as part of the resources adjustment. It is also important to note that all areas of the Fair Funding Review are subject to change until the Local Government Finance Settlement is published. Any changes to the assumptions used, or any decision by Government to make changes to the funding distribution, could potentially lead to very large changes in the funding received.

### **3.0 Council Tax Support**

- 3.1 Funding to support council tax discounts is received from Government through a grant included in the Settlement Funding Assessment. Every council is responsible for implementing a local scheme to offer council tax discounts to those residents who may have been eligible to this previously through Council Tax Benefit.
- 3.2 The Halton scheme uses as a basis the previous regulations relating to Council Tax Benefit, which ensures that support for claimants with disabilities, claimants with children, and claimants who are working is maintained. Residents who qualify for the scheme will have their liability reduced to 21.55% of the maximum amount paid.
- 3.3 Council Tax Support Grant is not separately identifiable within Settlement Funding Assessment. It is assumed the level of funding will move in line with the Council's overall Settlement Funding Assessment.
- 3.4 The MTFS assumes that the level of Council Tax Support given to existing claimants will remain at the rate of 21.55% for the period of the MTFS. It also assumes that Council Tax Support funding will not be shared with Parish Councils.

### **4.0 Council Tax Forecast**

- 4.1 For 2025/26 the council tax for a Band D property in Halton is £1,846.66 (excluding Police, Fire, LCR and Parish precepts), which is expected to generate income of £68.208m.
- 4.2 When setting council tax levels, higher increases reduce the requirement to make budget savings. However, there are other factors that need to be considered when determining the appropriate increase in council tax. These factors include:
- Halton has the fourth lowest council tax levels in the North West for 2025/26.
  - Halton's 2025/26 council tax is £58.85 (3.1%) below the average council tax set by unitary councils in England.
  - Inflation - the Consumer Price Index (CPI) as at July 2025 (latest available) is currently at 3.8% and the Retail Price Index (RPI) is at 4.8%.

- 4.3 The 2026/27 council tax base will be approved by Council in December 2025. Using figures from August 2025, it is estimated that there will be an increase of 40 Band D equivalent properties to a total of 36,796, assuming a collection rate of 97%. This increase is lower than in recent years due to the number of properties subject to the empty property and second home premiums reducing significantly. The increase in the tax base will result in an increase of £0.074m of council tax income.
- 4.4 It is anticipated that there will be a £0.996m Council Tax surplus at the end of the 2025/26 financial year which will be included within the 2026/27 budget. It is forecast that there will be a further £0.400m surplus available for inclusion within the 2027/28 budget.
- 4.5 For the purposes of this strategy it is assumed that a Council Tax increase of 2.99% will be applied throughout the period covered by the forecast. It is further assumed there will be a 2% increase for the adult social care precept in all years.
- 4.6 Table 1 estimates the net amount of Council Tax income that will be generated by various percentage increases in Halton's Band D council tax for the next five years, assuming no change in Council Tax base beyond 2026/27. The Council Tax referendum limits have been confirmed for 2026/27 – 2028/29. The MTFS assumes that these limits will remain at 3% for Council Tax, plus an additional 2% for the adult social care precept until at least 2030/31.

**Table 1 – Additional Council Tax Income 2026/27 to 2030/31**

<b>Projected Increases in Council Tax Income</b>	<b>2026/27 £'000</b>	<b>2027/28 £'000</b>	<b>2028/29 £'000</b>	<b>2029/30 £'000</b>	<b>2030/31 £'000</b>
0%	-	-	-	-	-
1%	683	690	697	704	711
2%	1,366	1,393	1,421	1,449	1,478
3%	2,048	2,110	2,173	2,238	2,306
4%	2,731	2,841	2,954	3,073	3,195
5%	3,414	3,585	3,764	3,952	4,150

## **5.0 Dedicated Schools Grant Deficit**

- 5.1 The Dedicated Schools Grant (DSG) is a ring-fenced grant allocation which is used to fund a variety of education services, with the majority forming the Individual Schools Budget.
- 5.2 The conditions of the grant make clear that it can only be spent on the Schools Budget, so that any underspend must be carried forward to future years.

- 5.3 In recent years, significant pressures on high needs budgets have led to many local authorities recording deficits against the DSG. Proper accounting practice requires these deficits to be offset against the council's General Fund, reducing the funding available for other local services.
- 5.4 In 2019/20 the Government issued a statutory override, to be applied from the 2020/21 financial year, which requires DSG deficits to be carried forward to the Schools Budget in future years, and prevents this being funded from General Fund resources.
- 5.5 The statutory override was due to expire on 31<sup>st</sup> March 2026, but has now been extended by a further two years to 31<sup>st</sup> March 2028. Without further government intervention, DSG deficits will need to be funded from General Fund resources from 1<sup>st</sup> April 2028. Given the level of deficits nationally, with some authorities recording a DSG deficit greater than the balance on their general fund, it is highly likely that the expiry of the statutory override would trigger a number of Section 114 notices and applications for EFS.
- 5.6 Halton is currently participating in the Delivering Better Value in SEND Programme, which supports local authorities to improve services to children and young people with SEND and aims to deliver effective and financial sustainable SEND services.
- 5.7 Table 2 shows a forecast of Halton's DSG deficit over the medium-term. The forecast deficit in future years does not yet take into account the mitigation on costs which the Delivering Better Value programme will bring. Work is underway to provide analysis on the mitigating factors but for the purpose of the forecast current known trends have been used in estimating future deficits.

**Table 2 – Forecast DSG Deficit**

<b>Year</b>	<b>2024/25</b>	<b>2025/26</b>	<b>2026/27</b>	<b>2027/28</b>	<b>2028/29</b>	<b>2029/30</b>
Cumulative Deficit	£14.5m	£23.5m	£33.8m	£45.8m	£60.2m	£77.6m

- 5.8 Due to the high impact that the ending of the statutory override will have on a large number of authorities, the forecast assumes that this will be extended until at least 2030/31, or that alternative means of funding this deficit will be set out in the Government's SEND White Paper, due to be published in the autumn.
- 5.9 It is not permitted to charge the cost of financing of DSG deficits to the grant itself. These costs arise from a reduction in investment returns and a greater borrowing requirement due to lower cash balances. An estimate of these costs is included within the forecast.

## **6.0 Five-Year Financial Forecast**

- 6.1 The Medium-Term Financial Strategy (MTFS) provides a forecast of the increase in revenue expenditure that will be required over the next five years in order to maintain existing policies and programmes.
- 6.2 The Council's financial position over the course of 2026/27 – 2030/31 is extremely uncertain due to the uncertainty surrounding the outcome of the Fair Funding Review, the continuing increase in demand for key Council services, costs within Adults and Children's social care increasing above the rate of general inflation, and limited progress made to-date towards achieving proposed savings. This forecast uses prudent estimates based on the information that is currently available. Although individual figures should be treated with caution and will need to be continually updated as new information becomes available, the forecast is clear about the scale of the financial challenges over the next five years.
- 6.3 For the purposes of this forecast it has been assumed that the Fair Funding Review will be implemented as per the published consultation in the 2026/27 financial year, and that the 100% business rates pilot scheme will cease on 31<sup>st</sup> March 2026. Detailed information about the Fair Funding Review can be found in Section 2 of this report.
- 6.4 In each year of the forecast, it has been assumed that general Council Tax will rise by 2.99%, and that the adult social care precept of 2% will be levied. Any Council Tax rise below these thresholds will increase the forecast budget gap.
- 6.5 £0.996m of Council Tax surplus, and £1m of Business Rates surplus has been included within the 2026/27 budget forecast. It is anticipated that there will be a further £0.400m of Council Tax surplus available for distribution in 2027/28.
- 6.6 At July 2025, Retail Price Index (RPI) inflation stood at 4.8%, with Consumer Prices Index (CPI) inflation at 3.8%. 2% has been built into the MTFS for general contract inflation, with 4% inflation built into the forecast for social care contracts which are sensitive to increases in the National Living Wage.
- 6.7 The Association of Directors of Adult Social Services (ADASS) estimates that 70% of the inflationary increases to care packages are attributable to rises in the National Living Wage (NLW) and 30% are attributable to increase in CPI. The Low Pay Commission are currently forecasting the NLW to increase by 4.1% in 2026/27, with a range of between 2.8% - 5.3%. The table below shows the range of potential increases to the cost of care packages as a result of inflation.

**Table 3 – Care Contract Inflation Estimate 2026/27**

	<b>Lower NLW, Lower CPI</b>	<b>Central NLW, Central CPI</b>	<b>Higher NLW, Higher CPI</b>
<b>NLW Forecast</b>	2.8%	4.1%	5.3%
<b>CPI Forecast</b>	3.0%	3.5%	4.0%

<b>Overall</b>	<b>2.86%</b>	<b>3.92%</b>	<b>4.91%</b>
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- 6.8 For 2025/26, a pay rise of 3.2% was agreed for spinal column points 1 – 43, with agreement on a 3.2% proposed pay rise for senior officers still pending. A 3% increase in pay budgets has been allowed for in each year of the forecast. If pay awards exceed or fall short of this level, the impact on the forecast will be as follows:

**Table 4 – Pay Forecast**

<b>Increase in Pay</b>	<b>2026/27 £000</b>	<b>2027/28 £000</b>	<b>2028/29 £000</b>	<b>2029/30 £000</b>	<b>2030/31 £000</b>	<b>Total £000</b>	<b>Difference to MTFS £000</b>
1%	269	264	259	1,023	1,034	2,849	(10,754)
2%	1,278	1,287	1,297	2,108	2,150	8,120	(5,483)
3%	2,286	2,331	2,376	3,256	3,354	13,603	0
4%	3,294	3,394	3,497	4,469	4,648	19,302	5,699
5%	4,302	4,477	4,659	5,749	6,036	25,223	11,620

- 6.9 Proposed pension contribution rates for 2026/27 to 2028/29 have been received from Cheshire Pension Fund and included within the forecast, although these will not be formally approved until later in the 2025/26 financial year. The following contribution rates have been proposed:

- 2026/27 – 19%
- 2027/28 – 18%
- 2028/29 – 17%

This represents a reduction in the employer's pension contribution rate of 20% in 2025/26. For the 2029/30 financial year onwards, it has been assumed that the pension contribution rate will remain at 17%. The reduction in pension contributions means that the growth in pay budget is forecast to be lower in the first three years of the forecast than in 2029/30 and 2030/31, where it is assumed that the pension contribution rate will remain constant.

- 6.10 The net revenue costs associated with the capital programme are included in the forecast. It is estimated that there will be an increase in costs of £0.465m, £0.794m, £0.221m, and £0.042m over the next four years. Costs are then anticipated to reduce by £0.210m in 2030/31. The forecast assumes that any new capital projects which are approved over the medium-term will be self-funded through capital grants, capital receipts, or will generate revenue savings to fund the cost of borrowing.
- 6.11 The additional costs associated with the Children's Service Improvement Programme Funding, presented to Executive Board on 24<sup>th</sup> October 2024 have been included in the forecast. The programme aims to stabilise the service and is anticipated to lead to decreases in the costs of placements and agency staff.

Additional budget of £4.310m was provided for during 2025/26 to reflect the costs of the additional established posts. The funding requirement is forecast to decrease by £0.232m in 2026/27, due to a re-profiling of the spend. The Programme is expected to produce cost mitigation of £2.091m during 2025/26, with further cost reductions of £3.336m and £1.215m anticipated in 2026/27 and 2027/28 respectively. The progress of the Programme will be regularly evaluated and these figures will be updated in future forecasts.

- 6.12 Funding has been included within the forecast to account for an increase in demand for Adult Social Care packages based on historical data. £5.595m has been included for 2026/27, with an additional £6.217m, £6.908m, £7.677m, and £8.531m provided in the following four financial years. Rising demand for Adult Social Care services is major risk to the Council's budget. The figures included in the forecast are based on the increase in costs due to demand between 2024/25, and the forecast position at July 2025. The following table shows the impact on the budget if demand is lower or higher than forecast:

**Table 5 – Adult Social Care Demand**

Percentage Demand Increase	2026/27 £000	2027/28 £000	2028/29 £000	2029/30 £000	2030/31 £000	Total	Difference to MTFS
8%	4,024	4,346	4,693	5,069	5,474	23,606	(11,322)
10%	5,030	5,533	6,086	6,694	7,364	30,707	(4,221)
11.1% (included in forecast)	5,595	6,217	6,908	7,677	8,531	34,928	0
12%	6,035	6,760	7,571	8,479	9,497	38,342	3,414
14%	7,041	8,027	9,151	10,432	11,893	46,544	11,616

- 6.13 There has been a significant rise in demand for placements within Children's Services over recent years, although current forecasts show that this increase in demand is now slowing down. Funding has been included within the forecast for these demand pressures, based on the growth in placement costs between the 2024/25 financial year, and the July 2025 forecast. The anticipated savings in placement costs as a result of the Children's Improvement Programme are included separately within the forecast. The following table shows the impact on the budget if demand is lower or higher than forecast:

**Table 6 – Children's Social Care Demand**

Percentage Demand Increase	2026/27 £000	2027/28 £000	2028/29 £000	2029/30 £000	2030/31 £000	Total	Difference to MTFS
1%	327	330	333	337	340	1,667	(6,395)
3%	980	1,010	1,040	1,071	1,103	5,204	(2,858)

4.5% (included in forecast)	1,473	1,540	1,609	1,682	1,758	8,062	0
6%	1,960	2,078	2,203	2,335	2,475	11,051	2,988
8%	2,614	2,823	3,049	3,293	3,556	15,335	7,271

- 6.14 Growth of £1.546m has been included in the MTFS for 2026/27 to reverse the 10% cuts made to supplies and services, property maintenance, and highways maintenance budgets in 2024/25.
- 6.15 £0.523m of budget growth has been included within the forecast for 2026/27 for the Domestic Abuse Prevention Service. These services have been fully-funded by an external grant, but will need core budget in future years.
- 6.16 There have been an increase in housing benefit claims in relation to residents in supported accommodation in recent years. The Council awards full housing benefit for these residents, but is only reimbursed by the Department for Work and Pensions for the value of the rent in a standard property. This leaves the Council to pick up the additional costs associated with maintaining and managing these homes. An additional £0.100m is included in each year of the forecast for these costs.
- 6.17 An additional £1m of waste management costs arising from the introduction of statutory food waste collections and changes to recycling services have been included within the forecast for 2026/27. Government have committed to providing new funding to councils as a result of the changes to recycling services, but there is currently no indication of the value of this funding, or when it will be received. It has therefore been excluded from this forecast.
- 6.18 £1.5m of contingency has been provided in 2026/27 to deal with any unexpected costs. In subsequent years, a contingency figure of £2m has been used to reflect the additional uncertainty of estimates made within the forecast over a longer timescale.
- 6.19 £2.5m of funding for the Transformation Programme has been included from 2026/27 to 2028/29. Although the structure of the Programme has not been agreed for April 2026 onwards, it has been considered prudent to include this in the forecast as the scale of the financial challenges facing the Council mean that there is little alternative but to invest in the transformation of services. This will be updated as the future Programme structure is developed.
- 6.20 Additional costs associated with financing the DSG deficit have been included within the forecast. Although the deficit is currently covered by the statutory override, the costs of financing the deficit position that arise from increased borrowing or decreased investment returns due to lower cash balances, are not permitted to be charged to the DSG. These are required to be funded by the Council, and will impact on the general fund position.



- 6.21 An estimate for the revenue costs of EFS in each year is included within the forecast, based on the anticipated funding gap in each year.

**Table 7 – Medium Term Spending Forecast 2026/27 – 2030/31**

Increase in Spending Required	Year on Year Change £'000				
	2026/27	2027/28	2028/29	2029/30	2030/31
Pay Inflation	2,286	2,331	2,376	3,256	3,354
Pay Increments	500	500	500	500	500
Price Inflation	4,935	5,147	5,332	5,524	5,723
Sales, Fees and Charges Income Inflation	(648)	(661)	(675)	(688)	(702)
Capital Programme	464	794	221	42	(210)
Contingency	1,500	2,000	2,000	2,000	2,000
Increased Demand Pressures – Children's Social Care	1,473	1,540	1,609	1,682	1,758
Re-Profiling of Children's Investment Funding	(232)	0	0	0	
Cost Mitigation from Children's Investment	(3,336)	(1,215)	0	0	0
Increased Demand Pressures – Adult Social Care	5,595	6,217	6,908	7,677	8,531
Housing Benefit Subsidy	100	100	100	100	100
Reversal of 10% Supplies and Services Savings	840	0	0	0	0
Reversal of 10% Property Maintenance Savings	247	0	0	0	0
Reversal of 10% Highways Maintenance Savings	459	0	0	0	0
Additional Waste Disposal Costs	1,000	0	0	0	0
Transformation Programme	2,500	0	0	(2500)	0
Other Expenditure	622	18	19	0	(300)
Cost of Financing DSG Deficit	430	515	600	720	870
Additional Annual Revenue Costs of Exceptional Financial Support	3,327	4,845	6,288	7,952	10,023
<b>Total Increase</b>	<b>22,062</b>	<b>22,131</b>	<b>25,278</b>	<b>26,265</b>	<b>31,647</b>

## 7.0 The Funding Gap

- 7.1 At this level of spending there is a significant funding gap with the forecast level of resources, both on an in-year and cumulative basis. Table 8 demonstrates the forecast gap between spending and forecast resources from 2026/27 – 2030/31.

**Table 8: Funding Gap 2026/27 – 2030/31**

	<b>2026/27 £'000</b>	<b>2027/28 £'000</b>	<b>2028/29 £'000</b>	<b>2029/30 £'000</b>	<b>2030/31 £'000</b>
Increase in Net Spend Forecast (Table 7)	22,062	22,131	25,278	26,265	31,647
Increase in Estimated Funding from Central Government	(2,032)	(2,103)	(4,263)	(1,946)	(1,978)
Increase in Funding from Increase in Council Tax Base (Para 4.3)	(74)	(683)	(689)	(696)	(704)
Decrease / (Increase) in Council Tax Surplus (Para 4.4)	(996)	596	400	0	0
<b>In-Year Funding Gap Before Council Tax</b>	<b>18,960</b>	<b>19,941</b>	<b>20,726</b>	<b>23,623</b>	<b>28,965</b>
<b>In-Year Funding Gap After Estimated Council Tax Increase</b>	<b>15,552</b>	<b>14,027</b>	<b>15,693</b>	<b>19,450</b>	<b>24,506</b>
<b>Cumulative Funding Gap After Estimated Council Tax Increase<sup>1</sup></b>	<b>44,937</b>	<b>58,964</b>	<b>74,656</b>	<b>94,107</b>	<b>118,613</b>

Note<sup>1</sup> – The 2026/27 cumulative funding gap includes the 2025/26 budget deficit of £29.385m funded through Exceptional Financial Support.

## 8.0 Capital Programme

- 8.1 The Council's capital programme is updated regularly throughout the year. Table 8 summarises the fully funded capital programme for the next two years.

**Table 9 – Capital Programme**

	<b>2026/27 (£'000)</b>	<b>2027/28 (£'000)</b>
<b>Spending</b>	<b>29,418</b>	<b>7,976</b>
Funding:		
Prudential Borrowing	19,131	6,236
Grants	9,407	1,140
External Contributions	880	600
Capital Receipts	0	0

<b>Total Funding</b>	<b>29,418</b>	<b>7,976</b>
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- 8.2 The current system of capital controls allows councils to support and fund the capital programme by way of prudential borrowing. Such borrowing is required to be:
- prudent
  - affordable, and
  - sustainable
- 8.3 The capital programme is underpinned by the Capital Strategy agreed by Council in March 2025.
- 8.4 The Council has used prudential borrowing provided that the cost of borrowing has been covered by revenue budget savings and the spending forecast continues this assumption.
- 8.5 In previous years the Council has been extremely successful in attracting capital grants and contributions. In this way, the Council has been able to undertake significant capital expenditure without financing costs falling on the revenue budget and this approach will continue.

## **9.0 Reserves and Balances**

- 9.1 The Council's Reserves and Balances Strategy is attached in Appendix 2. It sets out the Council's strategy in respect of the level of reserves and balances it wishes to maintain, by reference to the financial needs and risks associated with the Council's activities.
- 9.2 The level of balances and reserves will be reviewed as part of the budget monitoring and final accounts processes.

## **10.0 Conclusions**

- 10.1 The forecast funding gap of £118.613m over the next five years is clearly unsustainable, and will require the Council to make significant savings if the Section 151 Officer is to avoid issuing a Section 114 notice. It is clear that, to achieve the level of savings required, it will no longer be possible for the Council to maintain the range and level of service provision that it currently offers.
- 10.2 If the level of Council spending continues as set out in this forecast, the revenue costs associated with Exceptional Financial Support will reach an estimated £32.935m in 2030/31, representing approximately 15% of the anticipated total resources. It is therefore essential that the Council's costs are reduced

significantly, and at pace, to ensure that these costs are affordable in future years.

- 10.3 The Financial Recovery Plan, which follows this item on the agenda, sets out additional forecasts with the aim of demonstrating how the Council can return to a sustainable budget position by 2030/31.
- 10.4 The Medium-Term Financial Strategy provides a framework and underlying assumptions which will be used in the preparation of the 2026/27 annual budget. It has been based upon information that is currently available, however, revisions to the Strategy will need to be made as new developments take place and new information becomes available.
- 10.5 Appendix 2 sets out the Council's Strategy in respect of the level of reserves and balances it wishes to maintain, by reference to the financial needs and risks associated with the Council's activities.

## RESERVES AND BALANCES STRATEGY

### 1.0 INTRODUCTION

- 1.1 The following sets out the Council's Strategy in respect of the level of reserves and balances it wishes to maintain, by reference to the financial needs and risks associated with the Council's activities.
- 1.2 The overall strategy is to provide the Council with an appropriate level of reserves and balances in relation to its day to day activities and to ensure the Council's financial standing is sound and supports the achievement of its long term objectives and corporate priorities.
- 1.3 The Director, Finance will undertake bi-monthly reviews of the level of reserves and balances and take appropriate action in order to ensure the overall Strategy is achieved. The outcome of the reviews will be reported to the Executive Board and will be used to inform the Medium Term Financial Strategy (MTFS), the annual budget setting process and the final accounts process.
- 1.4 The Strategy concentrates upon the Council's key reserves and balances, being those which may potentially have a significant affect upon the Council's financial standing and its day-to-day operations.

### 2.0 RESERVE BALANCES

- 2.1 As at 31 July 2025 the balance of the Council's general reserve was £5.149m. The general reserve balance represents 2.81% of the Council's 2025/26 net budget. This level of General Reserve is considered to be insufficient and provides little to cover unforeseen costs. It is important once the Council gets to a sustainable budget position that priority is given to increasing the level of reserves.
- 2.2 The Council has used reserves in helping to provide balanced budget positions, but the level of reserves is now such that using reserves in this way is no longer possible. There is an urgent need to start the process of replenishing reserves, although in the current climate and against the need to take on Exceptional Financial Support this makes replenishment difficult.
- 2.3 In addition to the general reserve the Council holds earmarked reserves set aside for specific purposes. As at 31 July 2025 the balance of earmarked reserves was £50.005m, a breakdown of which is presented below.
- 2.4 The reserve table shows the diminishing level of reserves available to assist with funding any future budget overspends and balancing future budgets. Only the £5.149m of the General Fund could now be used for these purposes, as all remaining reserves are committed for specific purposes.

<b>Summary of General and Earmarked Reserves</b>	
<b>Reserve</b>	<b>Reserve Value £m</b>
<b>Corporate:</b>	
General Fund	5.149
Capital Reserve	0.398
Insurance Reserve	0.849
<b>Specific Projects:</b>	
Adult Social Care	0.710
Fleet Replacement	0.454
Highways Feasibility Costs	0.102
Local Development Framework	0.538
Community & Environment	0.542
Mersey Valley Golf Club	0.480
Mersey Gateway	33.542
CCLA Property Fund	0.263
Various Other	0.153
<b>Grants:</b>	
Building Schools for the Future	6.529
Public Health	1.468
Supporting Families Performance Payments	0.204
Children's & Education	1.188
Domestic Abuse	0.915
Enterprise & Employment	0.782
Food Waste Collection	0.237
Mersey Gateway Environmental Trust	0.492
Various Other	0.156
<b>Total Earmarked Reserves</b>	<b>55.151</b>

### 3.0 PROVISIONS

#### Sundry Debtors

- 3.1 The Council makes provision for bad and doubtful debts based upon an annual review of outstanding debts profiled by age and the associated risks of non-payment, depending upon the types of debt.
- 3.2 Past experience has shown that after 43 days (the period covering the initial stages of recovery action) the likelihood of sundry debts being paid reduces significantly and therefore the risk of them not being recovered increases greatly. Increased provision will therefore be made for all sundry debts outstanding for more than 43 days.
- 3.3 The bad debt provisions in respect of sundry debtors at 31 March 2025 totals £6.147m.

**Council Tax / Business Rates (NNDR)**

- 3.4 Bad debt provisions are made in respect of Council Tax and National Non Domestic Rate (NNDR) debts. The bad debt provisions (Council Share) in respect of Council Tax and NNDR debtors at 31 March 2025 totals £17.274m.
- 3.5 The levels of bad debt provisions held are considered prudent in relation to the current level and age profile of outstanding debts. But they will be reviewed annually, particularly in the light of the prevailing economic climate. Therefore appropriate provisions will be made to minimise the risk of financial loss to the Council.
- 3.6 The Council is also required to hold a provision for NNDR valuation appeal claims. The provision as at 31 March 2025 totals £2.386m.



**REPORT TO:** Executive Board

**DATE:** 11 September 2025

**REPORTING OFFICER:** Director of Finance

**PORTFOLIO:** Corporate Services

**SUBJECT:** Financial Recovery Plan

**WARD(S):** Borough-wide

### **1.0 PURPOSE OF REPORT**

- 1.1 To establish an outline of the Council's Financial Recovery position and to provide options for the Council to achieve a sustainable budget position by the year 2030/31.

### **2.0 RECOMMENDATION: That;**

- (i) The report be noted;**
- (ii) Benchmarking information be used to start the process of setting departmental budget reductions for the period 2026/27 to 2030/31;**
- (iii) Executive Directors supported by the Transformation Delivery Unit provide options for the Transformation Board, regarding how budget reductions on the scale outlined within this report might be achieved, along with details of the associated service delivery implications;**
- (iv) Executive Directors identify specific budget savings proposals to be implemented from 1<sup>st</sup> April 2026 as a matter of urgency, utilising the template in Appendix B, in order to support setting the 2026/27 budget.**

### **3.0 SUPPORTING INFORMATION**

- 3.1 The Council's Medium Term Financial Strategy is being reported to Executive Board on 11 September 2025. It shows that based upon current levels of spend, income, and forecast growth in service costs and demand across the Council, by 2030/31 the cumulative deficit or funding gap on the Council's budget will have reached £118.613m.
- 3.2 The position is clearly unsustainable and action must be taken over the MTFS period to ensure the Council has a balanced budget position by 2030/31 at the latest, along with removing the dependency upon Exceptional Financial Support.

- 3.3 This report presents outline proposals regarding the action which must be taken to ensure this is achieved. It is by no means the answer to providing a balanced budget but provides data to start the process of setting targeted budget reductions and provoke discussion to set the Council on the way to a sustainable medium and longer term financial position, whilst also minimising Exceptional Financial Support costs over the shorter term.
- 3.4 The Council's Transformation Programme was established to identify and implement fundamental changes in service delivery with reductions in associated costs. Given the worsening financial position, the Transformation Programme is being reshaped to deliver greater reductions at an accelerated pace. The proposals within this report should encapsulate and support the work being undertaken via the Transformation Programme and are not in addition.

### **Scenario Planning**

- 3.5 In addition to the financial forecast included within the MTFS, two additional scenarios are presented within this report:

**Scenario A** – this scenario is based primarily upon reductions in the budget being based upon benchmarking analysis of the Council's cost base across all services, compared to the average "nearest neighbour" comparators. Whilst this scenario significantly reduces the budget deficit, it is still insufficient to provide a future balanced budget.

**Scenario B** – this scenario adds to the benchmarking analysis, by suggesting further reductions to budgets to arrive at a balanced budget position over the medium term. The suggested reductions included within this scenario are by no means fixed, they are provided as examples of what needs to happen to achieve a balanced budget position. However, where a suggestion is not taken forward it would need to be replaced by alternative proposals.

- 3.6 Tables 1 and 2 below provide a summary of the two models. Further detail on each of the suggestions presented within the tables is provided within the report.

**Table 1 – Budget Deficit Position under Scenario A**

	2026/27	2027/28	2028/29	2029/30	2030/31
	£m	£m	£m	£m	£m
Previous Year Budget Deficit	29.385	41.396	50.752	55.087	58.303
Annual Growth as per MTFS	15.552	14.027	15.693	19.450	24.506
Cumulative Budget Deficit	44.937	55.423	66.445	74.537	82.809
<b>Scenario A Proposed Reductions</b>					
Service Benchmarking Reductions:					
Adults Directorate	-1.466	-2.931	-4.397	-5.863	0.000
Childrens Directorate	-1.556	-3.112	-4.668	-6.224	0.000
Environment & Regeneration Directorate	-0.535	-1.069	-1.604	-2.138	0.000
Staffing Costs Associated with Benchmarking Reductions		2.500			-2.500
Change in EFS Financing Cost	0.015	-0.058	-0.689	-2.009	-3.500
<b>Scenario A Budget Deficit</b>	<b>41.396</b>	<b>50.752</b>	<b>55.087</b>	<b>58.303</b>	<b>76.809</b>

**Table 2 – Budget Deficit Position under Scenario B**

	2026/27	2027/28	2028/29	2029/30	2030/31
	£m	£m	£m	£m	£m
Previous Year Budget Deficit	29.385	27.432	24.572	14.579	1.118
Annual Growth as per MTFS	15.552	14.027	15.693	19.450	24.506
Cumulative Budget Deficit	44.937	41.459	40.265	34.029	25.624
<b>Scenario B Proposed Reductions</b>					
Service Benchmarking Reductions:					
Adults Directorate	-1.466	-2.931	-4.397	-5.863	-0.130
Childrens Directorate	-1.556	-3.112	-4.668	-6.224	-0.138
Environment & Regeneration Directorate	-0.535	-1.069	-1.604	-2.138	-0.047
Staffing Costs Associated with Benchmarking Reductions	0.000	2.500	0.000	0.000	-2.500
Increase in Council Tax (8.3% increase 2026/27)	-2.260	-0.136	-0.145	-0.154	-0.162
Pay	-1.072	-1.168	-1.278	-1.348	-1.408
Prices	-1.977	-2.096	-2.220	-2.349	-2.465
Income	-0.260	-0.273	-0.286	-0.300	-0.315
Contingency	-0.500	-1.000	-1.000	-1.000	-1.000
Financing DSG Deficit	-0.430	-0.515	-0.600	-0.720	-0.870
Demand Pressures Children Social Care	-0.737	-0.770	-0.805	-0.841	-0.879
Demand Pressures Adult Social Care	-3.730	-4.145	-4.605	-5.118	-5.687
Supplies and Services	-1.546	0.000	0.000	0.000	0.000
Extended Producer Responsibility Spend	-1.000	0.000	0.000	0.000	0.000
Change in EFS Financing Cost	-0.437	-2.172	-4.078	-6.856	-10.023
<b>Scenario B Budget Deficit</b>	<b>27.432</b>	<b>24.572</b>	<b>14.579</b>	<b>1.118</b>	<b>0.000</b>

## **4.0 Proposed Budget Reductions**

### **Benchmarking Reductions**

- 4.1 The Council has undertaken an exercise to review its cost base across a number of services and compared this to its nearest neighbour group. The nearest neighbour group being a model designed by the Chartered Institute of Public Finance and Accountancy (CIPFA) creating a list of authorities that are most similar to each other based upon around 40 socio-economic factors. Each borough's "nearest neighbours" are those that are most similar to it in terms of its demographics, economy, deprivation and a range of other measures.
- 4.2 The nearest neighbour comparators for Halton are:
- Bury
  - Doncaster
  - Knowsley
  - North Lincolnshire
  - North Northamptonshire
  - Rochdale
  - Rotherham
  - St Helens
  - Stockton-on-Tees
  - Tameside
  - Telford and Wrekin
  - Wakefield
  - Warrington
  - Wigan
- 4.3 To help compare costs on a similar basis to the nearest neighbour group, the Council has used the 2023/24 Revenue Outturn (RO) submissions which each local authority has to submit to MHCLG on an annual basis following the end of each financial year. The latest available RO information is for 2023/24 which has been used here, but will be updated during the Autumn when the 2024/25 data becomes available. The RO submission is broken down into main service headings and then sub-totalled by more than 150 detailed service lines.
- 4.4 To give a snapshot view of how Halton compares to the nearest neighbour group, a calculation has been made of the average cost for each service across the nearest neighbours, broken down on a per-head basis. The difference per-head between Halton and the average cost for the comparators, is then multiplied up by population to give an indication of how much more or less the Council is spending compared to the nearest neighbour group average. The results are shown in Table 3.

**Table 3 – Comparison of Halton Cost Base to Nearest Neighbours**

	Cost per Head Nearest Neighbours	Cost per Head Halton	Difference per Head	Overall Cost Difference to Nearest Neighbour Group	Comments
	£	£	£	£m	
Education	713.73	534.00	179.73	23.091	Excluded as funded by ringfenced grant
Highways (excluding Mersey Gateway)	82.55	98.63	-16.08	-2.066	
Children's Social Care	295.62	174.50	121.12	15.561	
Adult's Social Care	422.82	308.73	114.09	14.658	
Public Health	84.24	56.44	27.81	3.573	Excluded as funded by ringfenced grant
Housing Services	28.48	14.11	14.37	1.847	Excluded, mainly funded by grant
Culture, Libraries, and Sports	35.34	15.66	19.68	2.529	
Regulatory Services (Licensing and Environmental Health)	9.33	9.71	-0.37	-0.048	
Community Safety Services	5.18	7.80	-2.62	-0.337	
Environment Services (Waste and Open Spaces)	100.93	86.16	14.77	1.897	
Planning and Building Control	6.38	7.41	-1.03	-0.132	
Economic and Community Development	18.84	11.69	7.15	0.919	
Central Services	90.02	115.53	-25.52	-3.278	
<b>Total Cost Differential Halton to Nearest Neighbours</b>				<b>58.214</b>	

4.5 Table 3 indicates that across all service headings the Council's cost base is £58.214m higher on an annual basis than the average of the nearest neighbour group. There are a number of services which have been initially excluded from the scenario planning in Section 3 of the report, these include Education and Public Health services given they are funded through a ringfenced grant. There are service heads which show the cost to Halton is lower than the average of the nearest neighbour group, these have been excluded from the scenario planning analysis also, including Central Services and Community Safety. Whilst initially removed from the scenario analysis, further in-depth review of costs should still be undertaken to assess whether it is feasible to further reduce the cost of these services.

4.6 Using the benchmarking analysis, a total saving target of £35.563m of reductions (on the 2023/24 cost base) has been included within Scenarios A and B. Given the time required to achieve cost reductions of this scale and nature, the model profiles that 10% of the savings target should be achieved by 01 April 2026, a further 20% by April 2027, a further 30% by April 2028 and a final 40% by April 2029. Achieving these reductions earlier than indicated will help bring forward the planned date of balancing the budget and reduce the EFS cost.

- 4.7 The benchmark related saving target of £35.563m used in Scenarios A and B, is split between the three Directorates which have the greatest variations from the average:
- Adult Social Care - £14.657m
  - Children Social Care - £15.561m
  - Environment and Regeneration - £5.345m
- 4.8 The benchmarking data above is intended merely to provide a starting point for identifying areas where changes to service delivery and associated costs might be achieved. Significant further work would need to be undertaken to drill down into the detailed data and investigate the reasons behind the variances, which will include discussing with other nearest neighbour councils how they appear to operate certain services at lower cost.

#### **Other Reductions – Scenario B**

- 4.9 As outlined in Scenario B a number of other reductions are proposed as follows.
- 4.10 There is a proposed increase to council tax of 8.3% in 2026/27. This is based on the current Fair Funding consultation by Government, which proposed a notional council tax Band D level of £2,000 (excl precepts). For Halton to achieve a Band D level of £2,000 it would require an increase of 8.3% on the current Halton Band D level. However, the council tax increase is expected to be capped at 4.99% for 2026/27, therefore, it would require permission from Government to implement an 8.3% increase without a public referendum.
- 4.11 Pay awards over the 5-year MTFS period have been assumed at a 3% increase in basic pay each year with a 1% decrease to the employer pension contribution rate for the first three years. Under Scenario B it is proposed the pay award forecast is reduced to 2% in each of the five years. This is in line with the Government's annual inflation target of 2%.
- 4.12 It is proposed that the future year contract inflation is capped at 2%. It is assumed this will be achieved through improved negotiation and commissioning of contracts. Where any increases are set above this, it is expected that departments will fund the increase from a reduction in other budgets they are responsible for.
- 4.13 Sales, fees and charges inflation is assumed at 2% over MTFS period, however, it is proposed that this is increased to 3%. This should be achieved via a thorough review of existing fees and charges with the approach that all chargeable services should only be provided through full cost recovery, with no council subsidy being provided. Service leads should also ensure that any work provided in line with external partners should be fully chargeable. To minimise the risk of uncollected debt from chargeable services, departments should ensure services are invoiced and paid in advance of being provided wherever possible.

- 4.14 Included within the MTFS is £1.5m contingency for 2026/27 and an additional £2m in each of the last 4 years. The further away from the current position the more uncertainty there is on the budget position, hence the need for a greater contingency amount. It is proposed that the contingency for each of the years in the MTFS is reduced to £1m per year. This presents a financial risk to the Council, but the MTFS is a fluid document and will be updated as and when further information on cost pressures is known.
  
- 4.15 The forecast deficit on the Dedicated Schools Grant (DSG) as at March 2030 is expected to reach £77.6m prior to any mitigating action. The impact of funding this deficit will be felt upon the Council's General Fund, therefore, the cost of financing the deficit must be recorded here as opposed to the DSG. It is clear nationally that the continued deficit position on DSG is unsustainable. Therefore, the Government are expected to issue a White Paper later this year to discuss the future funding of DSG and High Need pressures in particular. Scenario B therefore assumes Government will fully address these pressures and negate the need for council general funds to meet future DSG financing costs.
  
- 4.16 Increasing demand pressures have been a key feature of the Council's cost base over the past decade and the MTFS assumes this will continue to be the case based upon historical information. Included over the five years of the MTFS are demand pressures of £8.062 for Children Social Care (CSC) and £34.928m for Adult Social Care (ASC). To help achieve a balanced budget position it is proposed that forecast demand funding for CSC is reduced by 50% to £4.031m and for ASC is reduced by two thirds to £11.643m. It is proposed that demand will be managed by the service area based upon the funding available, through continuous service improvements and strategies to mitigate against the increasing level of demand.
  
- 4.17 Supplies and service budgets (including road and property maintenance) were cut by 10% in 2024/25, with the MTFS reinstating these reductions from 2026/27. Opting not to reinstate the budgeted reductions will save £1.546m in 2026/27. Service managers will therefore be expected to spend within budget for all supplies and service requirements.
  
- 4.18 An additional £1m of waste management costs arising from the introduction of statutory food waste collections and changes to recycling services has been included within the forecast for 2026/27. Government has committed to providing funding for additional waste recycling services, but as yet this is to be confirmed and as such no funding has been included with the MTFS. Scenario B now assumes Government grant funding for this. It will be expected that whatever the final grant allocation is, spending will have to fit within this.

## **5.0 Exceptional Financial Support**

- 5.1 The cost of the Council carrying a year-on-year deficit is felt through financing the EFS borrowing required to provide a final balanced budget position. The longer the time period the Council carries an EFS requirement, increases the level of financing required to fund the additional borrowing cost. The MTFS

forecasts the annual cost of EFS by 2030/31 will be in the region of £32.435m. Following the principals applied in Scenario B will reduce the EFS impact greatly. Under Scenario B it is forecast that the annual cost of EFS by 2030/31 will be in the region of £8.869m.

- 5.2 The earlier the Council reduces the budget deficit, will have a significant and material impact upon EFS costs. The advantage will not only be felt in the MTFS 5-year period but also over the 20 years that the Council will have to repay the EFS borrowing.

## **6.0 Departmental Budgets**

- 6.1 To help provide context on the level of savings required compared to the size of departmental budgets, analysis is provided at Appendix A on the level of departmental gross spend and income budgets as at 31 July 2025, excluding recharges.

## **7.0 Conclusions**

- 7.1 It is clear from the updated Medium Term Financial Strategy the Council cannot continue to spend at current and forecast levels. That the five-year forecast estimates by 2030/31 the Council will have a budget deficit in excess of £100m is a significant concern. Clearly if the Council does not take action to immediately remedy this, then the implication will be to issue a Section 114 notice to force through the changes required.
- 7.2 Executive Directors should take immediate action to identify the savings, cost control and income generation proposals identified under Scenario B. This will include but not be limited to:
- Understanding and communicating the scale of efficiencies required.
  - Providing an initial outline of proposed areas for efficiencies and cost control.
  - Identifying the efficiencies and control of costs to be achieved.
  - Establishing the timescales involved, noting the earlier efficiencies are achieved the lower the EFS impact upon budgets and funding over the long term.
  - Consideration of all risks and service delivery impacts and that these are fully assessed.
- 7.3 To assist with undertaking the actions outlined at paragraph 7.2, a template is provided at Appendix B. This should be completed by Directorates as soon as possible to help outline and review proposed efficiencies.

## **8.0 POLICY IMPLICATIONS**

- 8.1 The Council has a statutory duty to set a balanced budget position on an annual basis. This is currently only being achieved with a capitalisation direction (Exceptional Financial Support – EFS) from MHCLG, allowing the Council to borrow to fund day-to-day spend. This is unsustainable in the medium term,



therefore, the Council needs to urgently evidence how it intends to balance future budgets without the need for EFS.

## **9.0 FINANCIAL IMPLICATIONS**

- 9.1 The report provides a suggested approach to how the Council can set a future balanced budget without the need for EFS. Where any suggestions of budget reductions within this report are rejected, they will need to be replaced by other planned and achievable reduction targets.

## **10.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

- 10.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**
- 10.2 **Building a Strong, Sustainable Local Economy**
- 10.3 **Supporting Children, Young People and Families**
- 10.4 **Tackling Inequality and Helping Those Who Are Most In Need**
- 10.5 **Working Towards a Greener Future**
- 10.6 **Valuing and Appreciating Halton and Our Community**

There are no direct implications, however, the revenue budget supports the delivery and achievement of all the Council's priorities.

## **11.0 RISK ANALYSIS**

- 11.1 The report is produced to help set future balanced budgets. Failure to take appropriate steps towards setting a balanced revenue budget, may lead to the requirement for the Council's Section 151 Officer to issue a Section 114 Notice.

## **12.0 EQUALITY AND DIVERSITY ISSUES**

- 12.1 There are no direct equality and diversity issues.

## **13.0 CLIMATE CHANGE IMPLICATIONS**

- 13.1 There are no direct climate change issues.

## **14.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

<b>Document</b>	<b>Place of Inspection</b>	<b>Contact Officer</b>
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Local Government  
Grant Settlement  
2025/26

Revenues and  
Financial Management  
Division, Halton  
Stadium, Widnes

Steve Baker

# Departmental Forecast 2025/26 Gross Operational Spend and Income

## Appendix A

2025/26 Forecast Operational Spend and Income as at 31 July 2025	Forecast Operational Spend £000	Forecast Operational Income £000	Net Operational Income £000
<b>Adult Services Directorate</b>			
Adult Social Care excl Care Homes and Community Care	24,036	-4,356	19,680
Care Homes	11,030	-2,994	8,036
Community Care	56,014	-25,419	30,595
Complex Care Pool	31,176	-17,993	13,183
<b>Total Adult Services Directorate</b>	<b>122,256</b>	<b>-50,762</b>	<b>71,494</b>
<b>Chief Executives Directorate</b>			
Finance	45,951	-35,818	10,133
Legal & Democratic Services	2,923	-470	2,453
ICT & Support Services	9,153	-1,384	7,769
Chief Executives Delivery Unit	4,305	-731	3,574
<b>Total Chief Executives Directorate</b>	<b>62,332</b>	<b>-38,403</b>	<b>23,929</b>
<b>Children Services Directorate</b>			
Children & Families	66,196	-13,988	52,208
Education, Inclusion & Provision	50,014	-39,910	10,104
<b>Total Children Services Directorate</b>	<b>116,210</b>	<b>-53,898</b>	<b>62,312</b>
<b>Environment &amp; Regeneration Directorate</b>			
Community & Greenspace	32,009	-15,961	16,048
Economy, Enterprise & Property	9,334	-3,352	5,981
Planning & Transportation	15,089	-4,508	10,581
<b>Total Environment &amp; Regeneration Directorate</b>	<b>56,432</b>	<b>-23,821</b>	<b>32,610</b>
<b>Corporate &amp; Democracy</b>	<b>10,199</b>	<b>-10,760</b>	<b>-561</b>
<b>Public Health Directorate</b>	<b>13,349</b>	<b>-12,957</b>	<b>392</b>
<b>TOTAL SPEND</b>	<b>380,778</b>	<b>-190,601</b>	<b>190,176</b>

## Financial Recovery Proposed Saving Template

## Appendix B

<b>Directorate</b>	
<b>Proposal</b>	
<b>Proposed change / saving</b> <i>Provide an overview of the change / saving proposal</i>	
<b>Scope</b> <i>Clearly define the service areas in focus and include any exclusions or limitations</i>	
<b>Timeframe</b> <i>Include any drivers / deadlines for the change</i>	
<b>Stakeholders</b> <i>Provide detail of those impacted by the change (you may wish to include a stakeholder map), consider cross-service implications</i>	
<b>Current Service Overview</b>	
<b>Service Description</b> <i>Provide an overview of the current service, including current KPIs, restrictions, limitations</i>	
<b>Resource Allocation</b> <ul style="list-style-type: none"> <li>- Detail current costs associated with delivering the service – including budget for past 3 years, and actual outturn; and income / grants</li> <li>- Staffing establishment – to include vacancies and agency?</li> <li>- Other key areas of significant resource / expenditure (e.g. supplies, contracts for services, assets etc)</li> </ul>	
<b>Benchmarking</b> <i>Please include any other benchmarking or best practice discussions</i>	
<b>Savings Option</b>	
<i>Financial Impact (identify the potential savings of the option, detail any additional costs i.e. redundancy costs)</i>	
<i>Service Impact (impacts on outcomes, service users and other services)</i>	
<i>Risk Assessment (identify the key risks – reputational, financial, political)</i>	
<b>Implementation Plan</b>	
<b>Action Steps</b> <i>Outline the key steps required to implement the chosen option/s</i>	

<b>Timeline</b> <i>Provide details of the timeline for implementation, indicating when the saving should be realised</i>	
<b>Resource Allocation</b> <i>Identify the resources required for implementation including who will be leading this from the service</i>	
<b>Communication Plan</b> <i>Outline key stakeholders that need to be communicated with and when</i>	
<b>Risk Mitigation</b> <i>Detail any actions taken to mitigate / minimise the risk</i>	
<b>Monitoring and Evaluation</b>	
<b>Performance Indicators</b> <i>Identify the KPIs to support the effectiveness of the implemented changes</i>	
<b>Benefits</b> <i>Detail any non-financial benefits that may be achieved through the change</i>	

**Agenda Item**

**REPORT TO:** Executive Board

**DATE:** 11 September 2025

**REPORTING OFFICER:** Finance Director

**PORTFOLIO:** Corporate Services

**TITLE:** Treasury Management Annual Report 2024-25

**WARDS:** Borough-wide

**1.0 PURPOSE OF REPORT**

- 1.1 The purpose of this report is to provide an update regarding activities undertaken on the money market as required by the Treasury Management Policy.

**2.0 RECOMMENDATION: That**

- 1) the report be noted.

**3.0 SUPPORTING INFORMATION****Economic Outlook**

- 3.1 The following analysis of the 2024/25 economic situation has been provided by MUFG Asset Services, the Council's treasury management advisors.
- 3.2 UK inflation has proved somewhat stubborn throughout 2024/25. Having started the financial year at 2.3% in April, the CPI measure of inflation briefly dipped to 1.7% in September before picking up pace again in the latter months. The latest data shows CPI rising by 2.8% in February, but there is a strong likelihood that figure will increase to at least 3.5% by the Autumn of 2025.
- 3.3 Against that backdrop, and the continued lack of progress in ending the Russian invasion of Ukraine, as well as the potentially negative implications for global growth as a consequence of the implementation of US tariff policies by US President Trump in April 2025, Bank Rate reductions have been limited. Bank Rate remained at 4.5% at the end of the year, despite the Office for Budget Responsibility reducing its 2025 GDP forecast for the UK economy to only 1% (previously 2% in October).
- 3.4 Borrowing has becoming increasingly expensive in 2024/25. Gilt yields rose significantly in the wake of the Chancellor's Autumn Statement, and the

loosening of fiscal policy, and have remained elevated ever since, as dampened growth expectations and the minimal budget contingency (<£10bn) have stoked market fears that increased levels of borrowing will need to be funded during 2025.

- 3.5 From a fiscal perspective, the increase in businesses' national insurance and national minimum wage costs from April 2025 is likely to prove a headwind, although in the near-term the Government's efforts to provide 300,000 new homes in each year of the current Parliament is likely to ensure building industry employees are well remunerated, as will the clamp-down on immigration and the generally high levels of sickness amongst the British workforce. Currently wages continue to increase at a rate close to 6% year on year. The MPC would prefer a more sustainable level of around 3.5%.
- 3.6 As for equity markets, the FTSE 100 has recently fallen back to 7,700 having hit an all-time intra-day high 8,908 as recently as March. The £ has also endured a topsy-turvy time, hitting a peak of \$1.34 before dropping to \$1.22.

### Interest Rate Forecast

- 3.7 The following forecast has been provided by MUFG Asset Services for the following three years.

MUFG Corporate Markets Interest Rate View 11.08.25													
	Sep-25	Dec-25	Mar-26	Jun-26	Sep-26	Dec-26	Mar-27	Jun-27	Sep-27	Dec-27	Mar-28	Jun-28	Sep-28
BANK RATE	4.00	4.00	3.75	3.75	3.50	3.50	3.50	3.50	3.25	3.25	3.25	3.25	3.25
3 month ave earnings	4.00	4.00	3.80	3.80	3.50	3.50	3.50	3.50	3.30	3.30	3.30	3.30	3.30
6 month ave earnings	4.00	3.90	3.70	3.70	3.50	3.50	3.50	3.50	3.30	3.30	3.40	3.40	3.40
12 month ave earnings	4.00	3.90	3.70	3.70	3.50	3.50	3.50	3.50	3.30	3.40	3.50	3.60	3.60
5 yr PWLB	4.80	4.70	4.50	4.40	4.30	4.30	4.30	4.20	4.20	4.20	4.20	4.10	4.10
10 yr PWLB	5.30	5.20	5.00	4.90	4.80	4.80	4.80	4.70	4.70	4.70	4.70	4.60	4.60
25 yr PWLB	6.10	5.90	5.70	5.70	5.50	5.50	5.50	5.40	5.40	5.30	5.30	5.30	5.20
50 yr PWLB	5.80	5.60	5.40	5.40	5.30	5.30	5.30	5.20	5.20	5.10	5.10	5.00	5.00

During the 2024/25 financial year, the base rate has dropped 4 times, Starting the year at 5.25% the rate dropped 0.25% in August 24, November 24, February 25 and finally dropping to 4.5% in February 2025. The rate has dropped two more times since the end of the financial year, and is currently at 4.00% in August 25.

## Treasury Management Annual Report 2024-25

3.8 The borrowing rates from September 2024 to March 2025 are shown below:

### Short Term Borrowing Rates

	Sep	Oct	Nov	Dec	Jan	Feb	Mar
	%	%	%	%	%	%	%
Base Rate	5.00	5.00	4.75	4.75	4.75	4.50	4.50
Call Money (Market)	5.00	4.90	4.65	4.95	4.65	4.40	4.35
1 Month (Market)	4.95	4.75	4.70	4.80	4.45	4.45	4.45
3 Month (Market)	4.95	4.85	4.80	4.85	4.50	4.45	4.40

### Longer Term Borrowing Rates

	Sep	Oct	Nov	Dec	Jan	Feb	Mar
	%	%	%	%	%	%	%
1 Year (PWLb)	4.95	5.23	5.10	5.13	4.94	4.82	4.82
10 Year (PWLb)	4.79	5.20	5.03	5.40	5.35	5.30	5.42
25 Year (PWLb)	5.33	5.62	5.49	6.89	6.86	5.81	5.98

3.9 Market rates are based on rates provided by Reuters and PWLB rates are for new loans based on principal repayable at maturity. The rates are shown for the end of each month.

### Borrowing and Investments

#### Turnover During the Period

	No of deals	Turnover £m
Short Term Borrowing	10	44
Short Term Investments	6	45

#### Position at Month End

	Sep £m	Oct £m	Nov £m	Dec £m	Jan £m	Feb £m	Mar £m
Total Borrowing	197	197	205	209	214	219	232
Total Investments	(112)	(67)	(62)	(52)	(52)	(47)	(52)
Call Account Balance	(8)	(9)	(13)	(9)	(16)	(15)	(11)



If should be noted that during October 2025, the Council repaid £45m of grant funding to DfT replating to surplus funds from the Mersey Gateway Bridge, hence the Council's investments dropped significantly from September to October 2024.

#### Investment Benchmarking

<b>Benchmark</b>	<b>Benchmark Return %</b>	<b>Performance Oct - Mar %</b>	<b>Investment Interest Earned £000</b>
1 day	4.70	4.42	383
1 month	4.65	4.97	30
3 month	4.69	5.32	1,190
6 month	4.61	5.31	116
9 month	4.60	5.15	208
12 month	4.59	5.60	301
Over 12 months	-	4.53	355
Property Fund	-	4.24	212
<b>Total</b>			<b>2,795</b>

- 3.10 The table above shows the Council exceeded the majority of benchmarks during the last six months of 2024/25. The one day is performance is under benchmark due to the rates in the Council's call accounts paying lower than benchmark, but especially for three months and over it can be seen the Council have over achieved the benchmark rates. This is due to the Council holding some longer duration investments, where rates remain high against falling rates, and the Council were also able to take advantage of higher investment rates in the local authority market towards the end of the year.

#### **Budget Monitoring**

- 3.11 Overall, Treasury Management costs have come in under budget by £0.327m in 2024/25. There was an underspend of £1.202m on investment income, caused by higher investment balances at the start of the year, and higher than predicted investment rates, but due to the Council having reduced cash balances during the year and needing to borrow, this was counteracted by a £0.875m overspend on borrowing costs.

The council's cash levels were impacted by the Council's overspending position, and a large number of capital costs being paid in year (such as the Leisure Centre). This resulted in the Council borrowing short term on the local authority market, before borrowing £50m from the Public Works Loans Board when rates fell in February and March 2025.

Net Interest at 31st March 2025			
	Annual Budget £000	Actual £000	Variance £000
Investments	(3,622)	(4,824)	1,202
Borrowings	1,342	2,217	(875)
<b>Total</b>	<b>(2,280)</b>	<b>(2,607)</b>	<b>327</b>

### New Long-Term Borrowing

- 3.12 As discussed in 3.11, the Council borrowed £50m from the PWLB during February and March 2025. Although classed as long term (over one year), this borrowing was only taken for around 14 months to April 2025 and May 2026. This was due to long-term PWLB rates still being very high, and it is predicted that PWLB rates would fall significantly between Feb 25 and May 26.

### Policy Guidelines

- 3.13 The Treasury Management Strategy Statement (TMSS) for 2024/25, which includes the Annual Investment Strategy, was approved by the Council on 05 March 2025. It sets out the Council's investment priorities as being:
- Security of capital;
  - Liquidity; and
  - Yield
- 3.14 The Council will also aim to achieve the optimum return (yield) on investments commensurate with proper levels of security and liquidity. In the current economic climate and the heightened credit concerns it is considered appropriate to keep the majority of investments short term and to ensure all investments are in line with credit rating methodology.

### Treasury Management Indicators

- 3.15 It is a statutory duty for the Council to determine and keep under review the affordable borrowing limits. The Council's approved Treasury and Prudential Indicators were set out in the Treasury Management Strategy Statement and are reviewed in Appendix 1.
- 3.16 It should be noted that during 2024/25 financial year the Operational Boundary was breached. As can be seen on Appendix 1, at 31<sup>st</sup> March 2025 the Council's External Debt was £620.7m, and the Operational Boundary, set in February 2024 as part of the Treasury Management Strategy, was £558.2m.
- 3.17 The Operational Boundary is based on the expectations of the maximum debt level the Council will reach according to probable events and acts as a self-imposed limit to warn officers that borrowing levels are higher than expected. The boundary has been exceeded by £62.4m. £10m was due to the Council's

overspend in year, but the remaining £52.4m relates to a technical accounting issue as detailed below.

### **IFRS16**

- 3.17 As part of the implementation of the accountancy standard IFRS16, the financial liability relating to PFI schemes needed to be restated in the 2024/25 accounts. The new valuation of liability is calculated using the indexed unitary charge payments made, whereas previously the liability was calculated using the unitary charge payments made when the PFI schemes were adopted. The Council hold two PFI Schemes, for The Grange School, whose liability was increased by £4.7m and for the Mersey Gateway Bridge, whose liability increased by £46.1m.

### **Debt Rescheduling**

- 3.17 No debt rescheduling was undertaken during the quarter.

## **4.0 POLICY IMPLICATIONS**

- 4.1 None.

## **5.0 FINANCIAL IMPLICATIONS**

- 5.1 The financial implications are as set out in the report.

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

- 6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**

- 6.2 **Building a Strong, Sustainable Local Economy**

- 6.3 **Supporting Children, Young People and Families**

- 6.4 **Tackling Inequality and Helping Those Who Are Most In Need**

- 6.5 **Working Towards a Greener Future**

- 6.6 **Valuing and Appreciating Halton and Our Community**

There are no direct implications on the above priorities, however, the revenue budget and capital programme support the delivery and achievement of all the Council's priorities.

## **7.0 RISK ANALYSIS**

- 7.1 The main risks with Treasury Management are security of investment and volatility of return. To combat this, the Council operates within a clearly defined

Treasury Management Policy and annual borrowing and investment strategy, which sets out the control framework

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 None.

**9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 None

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

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

## Appendix 1

## Treasury and Prudential Indicators – 2024/25

	2023/24	2024/25	
Prudential Indicators	Full Year Actual £000	Original Estimate £000	Full Year Actual £000
Capital Expenditure	44,202	53,671	56,518
Net Financing Need for the Year <i>(Borrowing Requirement)</i>	21,014	32,512	24,040
Increase / (Decrease) in CFR <i>(Capital Financing Requirement)</i>	1,861	20,202	60,762
Ratio of Financing Costs to Net Revenue Stream <i>(Proportion of cost of borrowing to Council's net revenue)</i>	3.6%	3.4%	3.5%
External Debt <i>(Borrowing plus PFI and lease liabilities)</i>	552,408	538,274	620,700
Operational Boundary <i>(Limit of which external debt is not expected to exceed)</i>	555,355	558,274	558,274
Authorised Limit <i>(Limit beyond which external debt is prohibited)</i>	634,395	647,532	647,532

	Investment Limit £000	31/03/2024 Actual £000	31/03/2025 Actual £000
<b>Maximum Principal invested &gt; 365 days</b>			
Principal Sums Invested over 365 days	40,000	20,000	15,000

**REPORT TO:** Executive Board

**DATE:** 11 September 2025

**REPORTING OFFICER:** Executive Director of Children's Services

**PORTFOLIO:** Children, Young People & Families

**SUBJECT:** Care experienced as a 'protected characteristic'

**WARD(S)** Borough Wide

## **1.0 PURPOSE OF THE REPORT**

- 1.1 To provide background reasons and a recommendation to recognise children in care and care experienced young people as a locally protected characteristic under the Equalities Act to promote lifelong care and protection for this group of young people.
- 1.2 It is aimed to end the discrimination that young people face when presenting to other services and partnerships, as well as to ensure that all policies ensure consideration for this group of young people under a protected characteristic to prevent discrimination.

## **2.0 RECOMMENDATION: That the Board recommend for Council to recognise 'Care Experienced' as a protected characteristic.**

## **3.0 SUPPORTING INFORMATION**

- 3.1 As a Public Authority Halton Borough Council have a legal obligation under the Equality Act 2010 and the Human Rights Act 1998.
- 3.2 The Public Sector Equality Duty (PSED) states that local authorities and those who deliver services on their behalf must, in the exercise of their functions, have due regard (or take proactive measures) to:
- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
  - Advance equality of opportunity between people who share a protected characteristic and those who do not.
  - Foster good relations between people who share a protected characteristic
- 3.3 If the recommendation is adopted, all future decisions, services and policies by the council will be assessed through Equality Impact

Assessments to determine the impact on its children in care and care experienced young people.

3.4 Care experienced young people refers to young people living in Halton, who are no longer in care but were looked after by Halton Borough Council.

3.5 **Background:**

3.6 Protected Characteristics for Care Experience – (Care Review May 2022);

3.7 The Independent Review of Children’s Social Care published in May 2022 a final report and recommendations included the following:

- “Government should make care experience a protected characteristic” **and** “New legislation should be passed which broadens corporate parenting responsibilities across a wider set of public bodies and organisations.”
- “Many care experienced people face discrimination, stigma, and prejudice in their day to day lives. Public perceptions of care experience centre on the idea that children are irredeemably damaged and that can lead to discrimination and assumptions being made.
- One young person told the review that a teacher had told them “You’re smart - for a kid in care”, another young person said “I don’t want people to point out that I am in care if I don’t want that mentioned. It makes me so cross – that shouldn’t happen.”

3.8 This stigma and discrimination can be explicit and often comes with assumptions about the likely characteristics of children and adults that have care experience. They can also be implicit and are evidenced in the way care experience is discussed in schools, workplaces, and the media.

3.9 At its worst this can lead to care experienced people being refused employment, failing to succeed in education or facing unfair judgements about their ability to parent when they have children and families of their own.

3.10 It is clear that such discrimination can be similar in nature to other groups that have a legally protected characteristic under the Equality Act (2010). So, while there may be ways that society can help reduce stigma and discrimination, including creating greater public consciousness on these issues, just as with other areas of equality, there is a case to go further. Therefore, the government should make care experience a protected characteristic.

3.11 Making care experience a protected characteristic would provide greater authority to employers, businesses, public services, and policy makers to put in place policies and programmes which promote better outcomes for care experienced people.

3.12 Care experienced young people face significant barriers that impact them throughout their lives;

- Despite the resilience of many care experienced young people, society too often does not take their needs into account;
- Care experienced young people often face discrimination and stigma across housing, health, education, relationships employment and in the criminal justice system;
- Care experienced young people often face a postcode lottery of support.
- As corporate parents, councillors have a collective responsibility for providing the best possible care and safeguarding for the children who are cared for by us as an authority;
- All corporate parents should commit to acting as mentors, hearing the voices of children in care and care leavers and to consider their needs in any aspect of council work;
- Councillors should be champions of our children in care and care leavers to challenge the negative attitudes and prejudice that exists in all aspects of society.
- The Public Sector Equality Duty requires public bodies, such as councils, to eliminate unlawful discrimination, harassment, and victimisation of people with protected characteristics

3.13 **Conclusion:**

Since July 2022, 32 local authorities in the UK have enshrined 'Care experienced' as a protected characteristic including Sefton, Wigan, Salford and Manchester to offer care experienced young people greater opportunities and protection that any good parent would promote.

3.14 As a local authority and as corporate parents we want to ensure that our young people are able to lead lives similar to their peers, and not be discriminated against because of their care experience. By doing so, we can build the foundations for them to thrive, feel safe,



achieve and have successful, happy lives; those feelings and desires we would adopt for our own children must be the same hopes we have and endorse for the children in our care.

- 3.15 As part of the protected characteristic, it is important that this means something to the young people and that as a local authority we ensure that this is at the forefront of policy and decision making moving forward. Our young people need to be included in policy processes and that we continue to ensure we listen to their experiences not only to pave better ways for services in the future, but so they know that they are cared for and valued.
- 3.16 By ensuring that 'care experience' is endorsed as a protected characteristic will enable us to start to end the discrimination young people may face, and support better policies and safeguards as cooperate parents to prevent their lives being affected by simply having been in care.

**What impact will this proposal have?**

- 3.17 By including care experience as a protected characteristic, the council demonstrates a commitment to addressing the inequalities and barriers faced by this marginalised group. It ensures that care experienced individuals are afforded the same rights, opportunities, and access to services as other protected groups.
- 3.18 This recognition not only promotes fairness and social justice but also encourages greater inclusivity within the council. It creates a platform for care experienced individuals to have their voices heard, their experiences valued, and to support their needs being met.
- 3.19 Adoption of care experience as a locally protected characteristic will augment the existing statutory Corporate Parenting principles followed by the Council and set out in section 1 of the Social Work Act 2017;
- to act in the best interests, and promote the physical and mental health and wellbeing, of children and young people
  - to encourage children and young people to express their views, wishes and feelings
  - to take into account the views, wishes and feelings of children and young people
  - to help children and young people gain access to, and make the best use of, services provided by the local authority and its relevant partners

- to promote high aspirations, and seek to secure the best outcomes, for children and young people
- for children and young people to be safe, and for stability in their home lives, relationships and education or work; and
- to prepare children and young people for adulthood and independent living.

3.20 The proposal will address the disparity and disproportionality faced by those with care experience in relation to health, education, housing, employment, and criminality amongst other indicators, by ensuring that the views and needs of care experienced people are taken into consideration by Council services when changes to services and policy are made, with the aim of improving the life chances, and thereby the health and wellbeing, of those individuals.

3.21 If agreed services and policies by the council can be assessed through Equality Impact Assessments to determine the impact on its children in care and care experienced young people.

3.22 Halton Borough Council will commit to the following as part of the proposal:

- To formally call upon all other bodies to treat care experience as a protected characteristic until such time as it may be introduced into legislation;
- To commit to continue to proactively seek out and listening to the voices and experiences of care experienced young people when developing policies, based on their views;
- Continue to recognise that care experienced young people are a group that are likely to face discrimination.

3.23 Approval of these recommendations will demonstrate our commitment to the young people who are, and have been, in our care, and our investment in supporting them to have prosperous, healthy, and happy futures.

#### **4.0 POLICY IMPLICATIONS**

4.1 If this approach is adopted policy review will be required to ensure consideration of this group of young people under a protected characteristic to prevent discrimination is embedded across the Council.

#### **5.0 FINANCIAL IMPLICATIONS**

- 5.1 Additional funding may be required to provide enhanced support, training, and resources for care-experienced individuals. There could also be increased demand for services, requiring a review of budgets and potential external funding opportunities.

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

### **6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence**

Care-experienced individuals are at higher risk of poor mental and physical health. Implementing this change would enable more proactive support, ensuring access to healthcare, mental health services, and community-based interventions.

### **6.2 Building a Strong, Sustainable Local Economy**

Supporting care-experienced young people into education, training, and employment contributes to economic growth and reduces long-term dependency on public services.

### **6.3 Supporting Children, Young People and Families**

Ensuring care-experienced individuals have lifelong support will improve their life outcomes, strengthen family stability, and create a fairer system for future generations.

### **6.4 Tackling Inequality and Helping Those Who Are Most In Need**

This recognition would help address systemic barriers faced by care-experienced people, improving access to education, employment, and housing. It would also strengthen the council's commitment to social justice and inclusion.

### **6.5 Working Towards a Greener Future**

**N/A**

### **6.6 Valuing and Appreciating Halton and Our Community**

By formally recognizing care-experienced individuals, the council reinforces its commitment to inclusivity, fostering a sense of belonging and respect within the local community.

## **7.0 Risk Analysis**

- 7.1 The council must ensure compliance with equality legislation and avoid potential legal challenges if protections are not effectively implemented. Policies and procedures would need to be reviewed and updated to reflect this change.

**8.0 EQUALITY AND DIVERSITY ISSUES**

- 8.1 Care-experienced individuals often face lifelong disadvantages similar to those protected under existing equality laws. Recognizing them as a protected group ensures their unique challenges are formally addressed.
- 8.2 Intersectionality: Many care-experienced individuals belong to other marginalized groups (e.g., those with disabilities, from ethnic minorities, or the LGBTQ+ community). A targeted approach would help address multiple layers of inequality.
- 8.3 Embedding Inclusion in Council Services: From recruitment practices to social care policies, the council must ensure care-experienced people have equal access to opportunities and are not further disadvantaged by systemic barriers.
- 8.4 Implementing this protection would demonstrate the council's commitment to fairness, inclusion, and social responsibility, ensuring better outcomes for care-experienced individuals while strengthening the wider community.

**9.0 CLIMATE CHANGE IMPLICATIONS**

- 9.1 **None identified.**

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

**'None under the meaning of the Act.'**

**REPORT TO:** Executive Board

**DATE:** 11<sup>th</sup> September 2025

**REPORTING OFFICER:** Executive Director for Children's Services

**PORTFOLIO:** Children and Young People

**SUBJECT:** Youth Justice Plan (annual update)

**WARD(S)** All

## **1.0 PURPOSE OF THE REPORT**

- 1.1 This report will brief Halton Executive Board on the annual refresh of the Youth Justice Plan for the sub-regional Youth Justice Service. Halton Council are core members of the statutory youth justice partnership along with the three other local authorities within the Cheshire Constabulary footprint. The National Probation Service, the NHS, Cheshire Office of the Police and Crime Commissioner and Cheshire Constabulary are the other statutory partners. The Youth Justice Plan requires formal approval and sign off in compliance with National Youth Justice Board (Ministry of Justice) Guidance and Regulation 4 of the 'Local Authorities (Functions and Responsibilities) (England) Regulations 2000'.
- 1.2 Given there is requirement for all Councils to approve and sign off their local areas Youth Justice Plan this (pan cheshire) plan will also be presented for approval at Cheshire East, Cheshire West and Chester and Warrington Councils during Autumn 2025.
- 1.3 Note the Youth Justice Service produced a three-year (2024-27) strategic plan for the sub-region, but the national guidance and legislation referred to in 1.1 above requires annual plans – or updates on multi-year plans as is the case with Cheshire's - to be approved by Cabinet and published on an annual basis.

## **2.0 RECOMMENDATION: That**

- 1) The Executive Board notes the update on performance and progress made against priority areas during the financial year April 2024 to March 2025 set out in the refreshed and updated Youth Justice Strategic Plan for Cheshire (attached at Appendix 1).**
- 2) Approves the content of the 2025-2026 refreshed and updated Youth Justice Strategic Plan for Cheshire and**

**agrees to it being presented for approval.**

### **3.0 SUPPORTING INFORMATION**

- 3.1 Local authorities have a statutory duty to submit an annual youth justice plan relating to their provision of youth justice services (YJS). Section 40 of the Crime and Disorder Act 1998 sets out the youth justice partnership responsibilities in producing a plan. It states that it is the duty of each local authority, after consultation with the partner agencies, to formulate and implement a youth justice plan, setting out priorities for youth justice services in their area, how they will be provided and funded and how they are performing against a range of national measures.
- 3.2 There is provision within the national guidance for the Chair of the Youth Justice Management Board to be given delegated authority to approve the Youth Justice Plan on behalf of the local authority and for formal approval and sign-off of the Plan to then be sought retrospectively from Full Council. Given the timelines and complexity of doing this within and across four councils this was the approach previously agreed by all four Local Authorities and is recommended for the annual refresh of the Youth Justice Plan again this year.
- 3.3 Halton have a shared service arrangement for Youth Justice Services with the other three Local Authorities in the sub-region and as such the Governance arrangements for Youth Justice are overseen by a pan Cheshire Partnership Management Board. In line with the legislative requirement the Youth Justice Service have updated the comprehensive three-year strategic plan for (for the period 2024-27) with this refreshed and updated 2025-26 version (see Appendix 1). It includes comprehensive performance data updated for the 2024-25 financial year and was produced in partnership with Cheshire Police and other statutory partners following consultation with service users. It was unanimously approved by Cheshire Youth Justice Management Board on the 24<sup>th</sup> of June 2025 and submitted to the national Youth Justice Board on 30<sup>th</sup> June 2025. It now needs to be formally approved by cabinet and then signed off by Halton Council (as is also being done in the other three councils between September and November).

### **4.0 POLICY IMPLICATIONS**

- 4.1 The Plan has been produced in accordance with national Youth Justice Board guidance and follows their prescribed template to include: foreword from the Chair of the Management Board (current chair is Amanda Perraton – Executive Director of Children and Families at Cheshire West Council), Vision and Strategy, Governance, leadership and partnership arrangements, Progress on previous years, Resources and services, Performance against National key performance indicators, Priorities, Information on

Children from groups which are over-represented, Prevention, Diversion, Education, Restorative approaches and victims, Serious violence and exploitation, Detention in police custody, Remands, Use of custody, Standards for children in the justice system, Workforce Development, Evidence-based practice and innovation, Service Development, Challenges, risks and issues.

- 4.2 Performance figures show that Cheshire YJS continue to achieve good levels of performance against the three main performance indicators: First Time Entrants to the criminal justice system (FTEs), Custody rates and re-offending (all detailed within the updated YJ Plan).
- 4.3 In 2024-25 there were only 21 Halton children who became “first time entrants” to the justice system (i.e. were cautioned by police or sentenced by the courts for the first time) which is well below regional and national averages and is in part at least attributable to the successful youth diversion scheme operated by the YJS in partnership with Cheshire Constabulary. A continued partnership commitment to reducing the unnecessary criminalisation of cared for children means very few cared for children or care leavers are prosecuted with most now receiving out of court disposals in recognition their offending behaviour is often symptomatic of vulnerability or exploitation and rarely presents a risk of harm to the general public. Rates of Serious Youth Violence in this sub-region were also well below the national average at 3.4 offences per 10,000 children compared to a Northwest regional average of 7.2 and national average of 6.2.
- 4.4 The priorities for Youth Justice in Halton and the rest of the sub-region over the next 12 months are described fully in the YJ Plan but include; 1) Continuing to develop participation and amplifying the voice and influence of children, families and victims 2) Enhance the offer to victims of youth crime, ensuring the youth justice service partnership is compliant with the new Victim and Prisoners Act and 3) Undertake comprehensive quality assurance audits in the following areas of practice; custody and resettlement, the quality and impact of education, training and employment support to justice involved children and work with children subject to out of court disposals.
- 4.5 The Youth Justice Service have consulted with children, parents, carers, and stakeholders in the development of the plan.
- 4.6 If cabinet approves this updated Youth Justice Plan for publication the next annual refresh will also be presented to cabinet in the Autumn of 2026 in line with national guidance.

## **5.0 FINANCIAL IMPLICATIONS**

- 5.1 There are no financial implications for the production and publication of the Youth Justice Plan.

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

### **6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence**

The Youth Justice Service works collaboratively with both the Integrated Care Board and health providers to support children to get the right help for what are often quite complex needs and avoid unnecessary criminalisation where possible. Children in the justice system are disproportionately impacted by health inequalities and the multi-disciplinary youth justice service includes access to mental health service and speech and language support.

### **6.2 Building a Strong, Sustainable Local Economy**

The service supports young people and encourages them to be part of the local economy, reach their full potential and get the best start in life which aligns with these council priorities.

### **6.3 Supporting Children, Young People and Families**

As above and the service supports children services and police to safeguard children from exploitation.

### **6.4 Tackling Inequality and Helping Those Who Are Most In Need**

Children in and on the cusp of the justice system are among the most vulnerable in Halton. The Youth Justice Service is a multi-disciplinary service that works in a child first, trauma informed and relational way to support this marginalised cohort of children and support them to desist from crime and enjoy a safe transition into adulthood.

### **6.5 Working Towards a Greener Future**

Not applicable.

### **6.6 Valuing and Appreciating Halton and Our Community**

The Youth Justice Service promotes community participation through restorative justice and reparation. Enabling children who have offended to contribute positively in their community while also ensuring any risk they present to vulnerable people in the community is assessed and managed.

## **7.0 Risk Analysis**

- 7.1 There are no risks identified, the Youth Justice Plan has been produced in compliance with national guidance and is submitted for formal approval at council in line with the legislative requirement to produce, approve and then publish a Youth Justice Plan.



**8.0 EQUALITY AND DIVERSITY ISSUES**

- 8.1 The strategic plan provides data relating to the proportion of children in the criminal justice system from different ethnic backgrounds because historically children from ethnic backgrounds are over-represented in the criminal justice system. Note data shows that (unlike most regions) children from Black or dual heritage backgrounds are not over-represented in the criminal justice system. Similarly, the plan provides data relating to the number of cared for children in the justice system and highlights the positive impact of diversionary partnership activity to minimise the criminalisation of cared for children and care leavers.

**9.0 CLIMATE CHANGE IMPLICATIONS**

- 9.1 There are no climate change implications identified.

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

**‘None under the meaning of the Act.’**

# Youth Justice Services

Cheshire East, Cheshire West,  
Halton and Warrington

## Annual Refresh 2025 3-Year Strategic plan 2024-2027



Page 179

**Head of Service:** Tom Dooks

**Chair of the Management Board:** Amanda Perraton

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## List of abbreviations

AYM	Association of Youth Offending Team Managers
CJB	Cheshire Criminal Justice Board
CJS	Criminal Justice System
CWCC	Cheshire West and Chester Council
FTE	First Time Entrant
GRT	Gypsy, Roma and Traveller
HMCTS	HM Courts and Tribunal service
HMIP	HM Inspectorate of Probation
HNA	Health Needs Assessment
ICB	Integrated Care Board
KPI	Key performance indicator
LGA	Local Government Association
MOJ	Ministry of Justice
NPCC	National Police Chiefs' Council
OCD	Out of Court Disposal
OPCC	Office of the Police Crime Commissioner
PACE	Police and Criminal Evidence
PDAT	Prevention and Diversion Assessment Tool
PNC	Police National Computer
SVS	Serious Violence Strategy
SEND	Special Educational Needs and Disabilities
SWAP	Safety Working Together Action Prevention
VCS	Voluntary Community Sector
VPA	Victim and Prisoners' Act
VRU	Violence Reduction Unit
YEF	Youth Endowment Fund
YFPP	Young Futures Prevention Partnership
YJAF	Youth Justice Application Framework
YJB	Youth Justice Board
YJS	Youth Justice Services (Cheshire)

## Foreword

*In my first year as chair, I am delighted to present this comprehensive annual update to our 3-year Youth Justice Strategic Plan for the Cheshire sub-region.*

*It has been agreed by the YJS Partnership Board and provides an overview of the pan-Cheshire Youth Justice Service, sets out details of performance over the past year and outlines our priorities for 2025-2026. It describes how the partnership will meet our ambitions to deliver a high-quality service for children, families, and victims of youth crime. Our plan is both strategic and operational and describes a committed service that has continued to perform strongly, with a low volume of children entering the Criminal Justice System and we are also encouraged to see reoffending rates declining in 2024-2025. The use of youth custody is also at a record low in Cheshire, with a total of only eight children sentenced to custody in the last year. This reflects the strong relationships Cheshire Youth Justice Service has with the courts and high local confidence in effective alternatives to custody.*

*The service has operated extremely well against the backdrop of a significantly challenging back-office infrastructure change programme with Cheshire West and Chester Council now hosting on behalf of the multi-authority partnership. I'm extremely proud of the way the service and wider partners came together to deliver this change with minimal impact on services to children, families and victims, while continuing to achieve such impressively consistent performance. I know Tom and the team work hard to ensure Child First, Trauma Informed and Relational Practice are at the core of all their work and it is genuinely heartwarming to hear about and read examples in here of evidence-based values making such a positive difference for some of Cheshire's most vulnerable people.*

*The YJS Management Board is committed to delivering this plan and will oversee its progress through to approval and publication by all four local councils. We have welcomed some new Board members recently and came together in June for an extended development session. This was to ensure we all fully understand the role and expectation on Board members to embrace Child First principles and set the strategic direction for all things related to Youth Justice across Cheshire, Halton and Warrington.*

*I am strongly committed to this approach and will ensure the guiding principle of recognising the potential of all children is reflected across all the work we do.*

**Amanda Perraton**  
**Chair of YJS Management Board**

## **Executive summary**

This is the 2025-2026 update of the 3-year (2024-2027) Youth Justice Plan for the Cheshire sub-region. While the foreword from our new Chair, the performance data and accompanying narrative and images have all been refreshed, the broad strategic direction of travel for the Youth Justice Partnership and Cheshire Youth Justice Service (YJS) remain unchanged.

It is evident from national research and two recently commissioned local needs analyses (1), that children entering the Criminal Justice System (CJS) experience multiple adversities and trauma. Early childhood exposure to violence, abuse, neglect, poverty, school exclusion and poor health among justice-involved children, are all disproportionate to the general 10-17 year population. This understanding has influenced the strategic direction of travel for YJS across Cheshire. The priorities and content of this plan align with those relating to children and young people from across the four Cheshire places and the public health approach to violence prevention, as articulated in the Serious Violence Strategy (SVS) for the county (2). There has been a significant decrease in the overall number of children entering the justice system over several years, and the historically low levels have been sustained across Cheshire despite the backdrop of the cost-of-living crisis and other societal pressures. Many comparable regions have witnessed an upturn in child entrants to the justice system in the last couple of years, so we are proud to see the sustained impact of our pan-Cheshire youth diversion model. We have worked extensively with the police to ensure national developments, such as the new Child Gravity Matrix have been incorporated into a new out of court disposal (OCD) protocol and a new joint decision-making process, which went live in April 2025.

We have a relatively new senior leadership team, however this is bringing fresh perspectives and the right balance of continuity and change as Cheshire builds on a solid regional and national reputation for strong performance. This is an exciting time for Cheshire to develop the partnership, while modernising the service and embracing the latest national and international evidence on Child First Youth Justice.

This plan outlines the “three pillars” vision for the service (Figure 1), which is rooted in the latest evidence and research on what works. In addition, the new leadership team has been implementing modest service re-design, intended to retain the economies of scale and equity of service at a sub-regional level, while aligning more effectively with local place-based services for children, victims and families.

Cheshire YJS has a very good regional and national reputation for delivering positive outcomes for children, victims and families. In common with all youth justice services across England and Wales, YJS continues to report against 10 key performance indicators (KPIs), in addition to the three main outcome measures First Time Entrants (FTE) to the justice system, reoffending and the use of custody.

For Cheshire YJS, 2024-2025 was a year of substantial infrastructure and organisational change. The previous shared service arrangements for youth justice delivery had evolved across the sub-region over two decades and had been through several iterations as Cheshire County Council, separated into two unitary authorities and youth justice teams merged incrementally. A comprehensive review of governance arrangements commented on the historical legacies of a service that had evolved over time, with a complex mix of cash and 'in-kind' contributions. These were highlighted as a risk to sustainability.

Consequently, a sub-regional review into the structure, financial arrangements and future sustainability of YJS as a pan-Cheshire partnership, recommended the service should be 'fully hosted' by one local authority. This proposal was agreed by all statutory partners and formerly approved by all four councils in the spring of 2024. The period between April 2024 and April 2025 involved significant infrastructure change, with multiple project workstreams (ICT, Finance, HR, Legal and Comms) all overseen by senior representatives of a pan-Cheshire 'Transitions Board' sitting in parallel to the main Youth Justice Partnership Board. Maintaining service continuity, while in transition to a hosted model was flagged as the principal risk for the partnership, but apart from relatively minor disruption related to ICT migration, the service has been very resilient and staff adapted where necessary, ensuring services to children, families and victims were largely unaffected.

## Vision, mission and values

At the Service Development Day in July 2024, the whole service, including volunteers and some Board members, did an exercise to refresh the Vision, Values and Mission of the Service, ensuring they were aligned with national Child First principles and our three strategic pillars. These are shown below:-

### Vision

***‘To deliver high quality services that make a difference to everyone we work alongside. Helping our children and others be the best they can be and feel safe and valued in their communities’***

### Mission

Supporting children, young people, parents, carers and victims to make positive changes through working collaboratively;

- Promoting safer communities and reducing the likelihood of reoffending and harm caused – by tackling the root causes of children’s offending.
- Listening and responding to the voice of the victim and empowering them to become involved.
- Connecting with children, helping them to understand the impact of their behaviour and achieve improved outcomes.

In addition we committed to the following four **Values** Statements:

- ***Our children and victims are at the heart of all that we do, we work with optimism, empathy and tenacity;***
- ***We approach all we do with care, respect, understanding and empathy;***
- ***Connections matter: We build relationships through working creatively, consistently and with integrity;***
- ***We collaborate with and empower those we work alongside by listening and responding to what they have to say.***

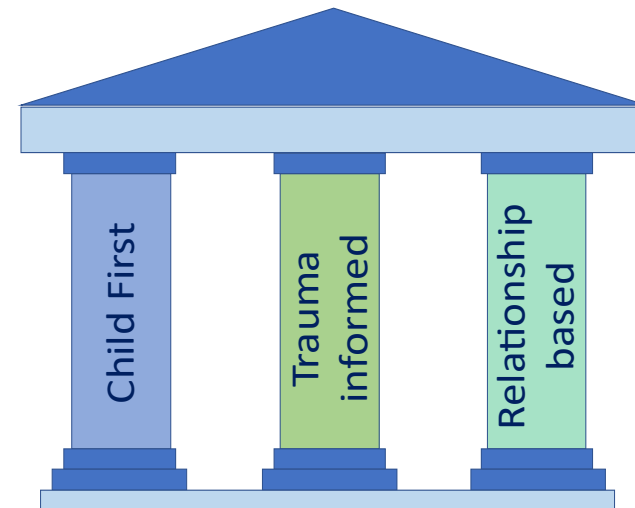
We will continue to value diversity, challenge social inequality and listen to children and victims, while developing trusted relationships that take their views into account. We understand the wider causes of offending behaviour are often rooted in trauma and social inequality, so trauma-informed practice and systemic ideas are at the heart of how we work. We



continue to work in a restorative way and strive to achieve the best possible outcomes for our children. YJS continue to work with partners on diverting children away from the formal CJS and continue to seek to detain a minimal number of children in custody, believing they are best supported to make changes in their lives whilst in the community, for all but the most serious of offences.

The latest research and evidence is clear that services working with children, who cause harm to others, should adhere to Child First principles and be Trauma-Informed and Relationship-Based in the way they are configured and delivered. Cheshire has taken these tenets and adopted them as our three pillars (Figure 1) to inform the Youth Justice strategy from point of arrest, right through to the resettlement of children following release from custody.

We know the majority of victims of children's offending are other children and the majority of children who perpetrate violence have themselves, experienced previous violent victimisation. So applying Child First practice is as much about reducing harm to victims as it is about improving the life chances of children who offend.



**Figure 1. Cheshire YJS Three Pillars Strategic Vision**

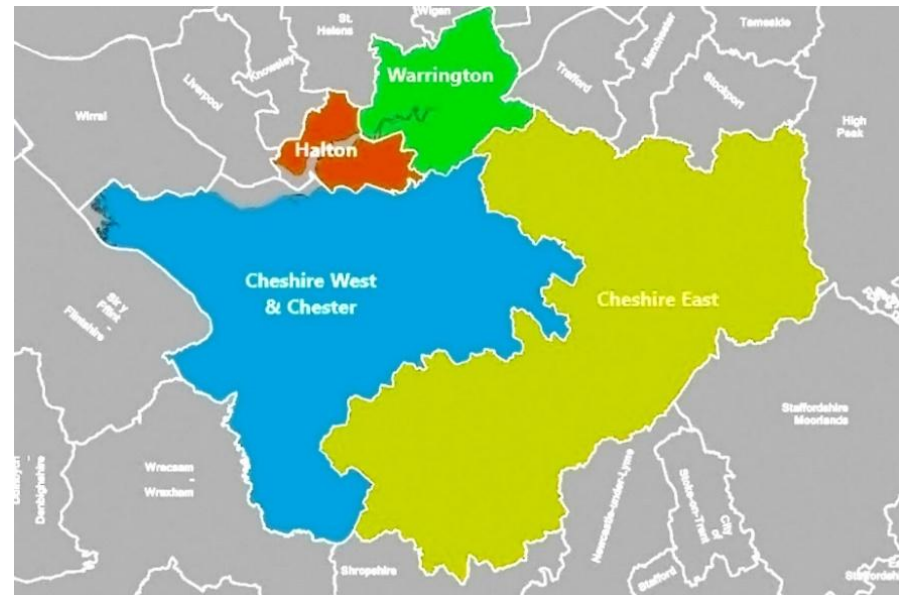
### Regional and local context

The Cheshire footprint covered by YJS comprises the four unitary local authorities of Cheshire East, Cheshire West and Chester (CWCC), Halton and Warrington (Figure 2). Each local authority area has a Children's Safeguarding and Community Safety Partnership and Cheshire is divided into three Probation delivery units (North, West and East) and has nine local policing units. The workforce of Cheshire YJS has staff employed by CWCC and seconded workers from Cheshire Constabulary, the Probation Service, three different NHS Trusts and two private providers. The service also has support in a variety of different roles from 40 volunteers. This provides a strong partnership base to meet the various complexities and challenges faced by the county's children, families and victims. An organisational structure chart of staff is shown in Appendix A and ethnicity and gender of staff is shown in Appendix B.

Around 250,000 Cheshire residents are below the age of 18, with 101,077 aged 10-17. Across the four local authorities, there are over 1,000 cared for children. The large geographical area of 905 square miles does present some logistical challenges for the service, which has offices in Crewe, Winsford and Widnes.

Staff work on a hybrid basis with additional virtual working areas in Macclesfield, Warrington, Chester, Runcorn and Ellesmere Port. The children we work with tend to live in these larger, more urban locations.

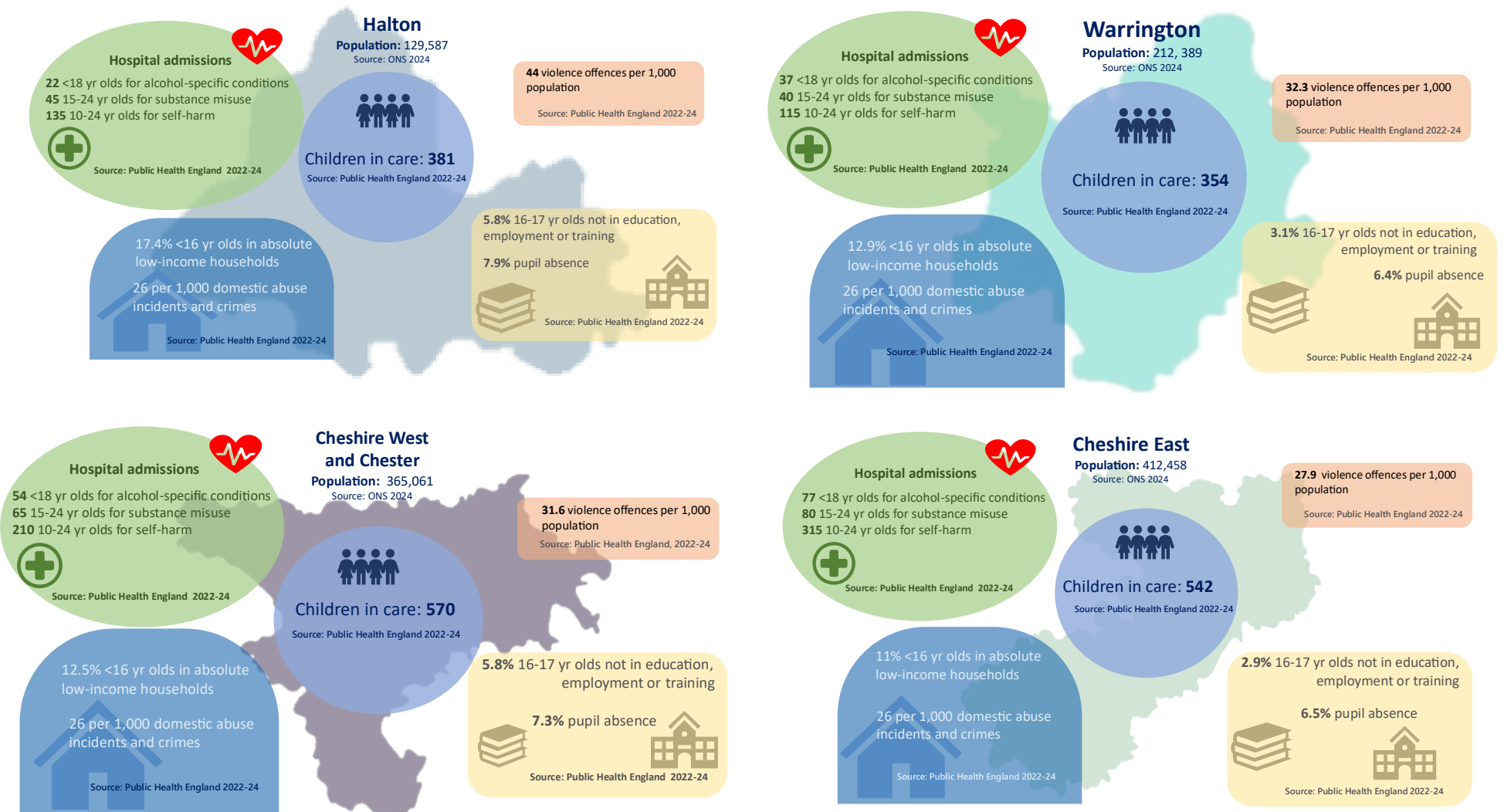
Cheshire can be viewed as an affluent and rural county with pockets of urban deprivation. The volume of children in the justice system fluctuates between local authority areas but is broadly what would be expected based on population size relative to social deprivation.



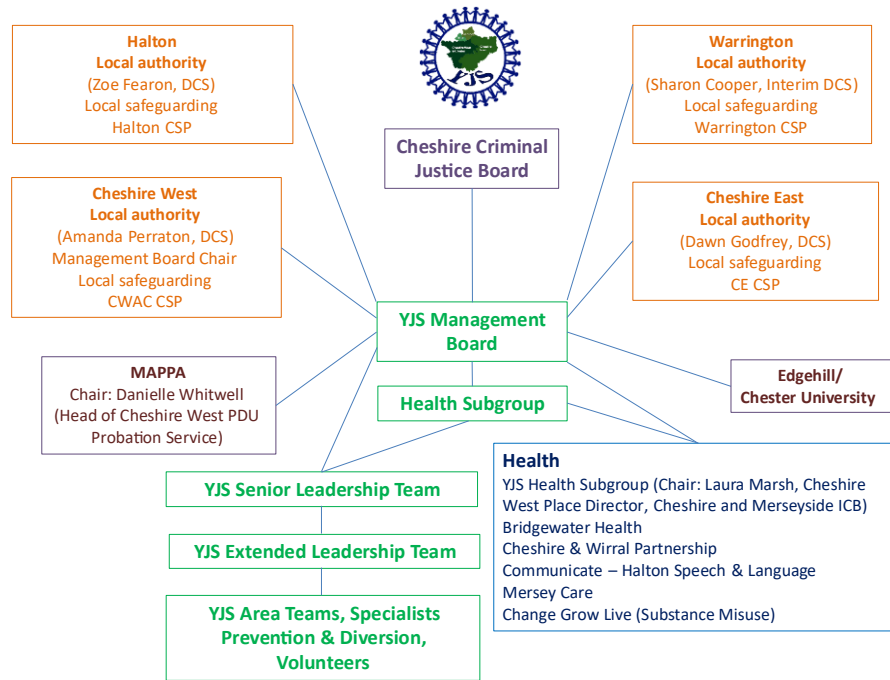
**Figure 2. Cheshire and 15 neighbouring local authorities**

Cheshire East and CWCC have the largest populations and Halton has the smallest population but higher levels of social deprivation. The UK Government indices of deprivation (2019) (3) show out of 317 local authorities, Halton is ranked highest of the four Cheshire authorities at 39, Warrington 175, CWCC 183 and Cheshire East, has the lowest at 228. Although highly diverse in terms of age, the county is not as diverse compared to other areas of England, with around 95% of residents identifying as 'White British'. The Gypsy, Roma, Traveller (GRT) community also has a presence in some areas. Figure 2 shows Cheshire shares borders with 15 other local authority areas and has excellent road and rail links to the three closest cities of Manchester, Liverpool, and Birmingham. Although these provide improved economic and lifestyle experiences, they also enable organised criminal activity such as County Lines and other forms of child exploitation. Cheshire Constabulary's Operation Apollo continues to respond quickly to new lines and regularly closes these down. New supply lines crop up unless demand drops and this is something Cheshire and the National County Lines Coordination Centre engage with partners to try to drive forward. Over the past 12 months, the average number of lines in Cheshire remains at 38 (range: 20-51) but with a lower peak than the previous year, which went as high as 68.

The place-based graphic in Figure 3 show an overview of demographic data for context only.



**Figure 3. Place-based demographics for Halton, Warrington, Cheshire West and Chester and Cheshire East**  
(Data sources: NHS Fingerprint [4] and Office of National Statistics [5])



DCS Director of Children's Services. CSP Children's Safeguarding Partnership, PDU Probation Delivery Unit, ICB Integrated Care Board

**Figure 4. Sub-regional Youth Justice System Strategic Partnership**

## Governance, leadership and partnership arrangements

A strength of Cheshire YJS is the strategic and professional links it has with colleagues at a sub-regional level in the public, private, academic, and voluntary sectors (Figure 4). The YJS Head of Service is a core member of both the pan-Cheshire Criminal Justice Board (CCJB) and Serious Violence Duty Partnership Board with senior youth justice management representation at CCJB sub-groups.

YJS is well placed to influence strategy and decisions at scale despite working in a complex governance landscape comprising four children's safeguarding partnerships, four community safety partnerships and a plethora of other place-based and sub-regional strategic groups, where Cheshire YJS has a duty (or need) to cooperate.

Cheshire YJS is also a core member of the four Children's Safeguarding Partnerships, the Multi-Agency Public Protection Arrangements (MAPPA), and the four Community Safety Partnerships.

These links have been enhanced by the adoption of a more youth justice-focussed role for the police officers, as recommended by the last HMIP inspection of Cheshire. After a policing review of Integrated Offender Management and the latest National Police Chiefs' Council (NPCC) guidance (6) on the role of seconded police officers, Cheshire Constabulary has increased the number of fully seconded and embedded officers in the service from three to four.

Cheshire does not have a Violence Reduction Unit (VRU) so as a sub-region, it does lack some of the investment, infrastructure and collaborative commissioning at scale brought by a VRUs to urban metropolitan areas. Cheshire YJS is an example of how strong governance and leadership can oversee the delivery of an effective multi-agency / multi-disciplinary service across local authority boundaries. However, the move to a single local authority hosted model

reflected the need to simplify the operating environment, solve some of the organisational challenges and improve efficiency, enabling YJS as a whole to focus more time on delivering a quality service.

Online harm, neglect (including educational neglect), domestic abuse, sexual abuse and exploitation all feature disproportionately in the lives of justice-involved children and these are also priority thematic areas in Children's Safeguarding Partnerships across Cheshire. This plan specifically refers to the youth justice system but the strategic vision to improve outcomes for children, victims and communities across Cheshire is shared by the wider pan-Cheshire partnership. Timelines for approval at full council are complicated given the sub-regional arrangement. However, the four Directors of Children's Services are committed to taking this latest Youth Justice Plan (and annual updates) through their respective council governance channels.

### **Board membership and leadership**

The Management Board Chair rotates every 2 years, across the four local authorities. CWCC's Executive Director of Children and Families is the current chair of the Board and also provides line management to the Head of Service. Chairing of the Youth Justice Partnership is due to pass to Warrington in April 2027 so with continuity in mind, Warrington's Director of Children Services has recently been appointed as Vice Chair.

Board membership is fully constituted with membership at a sufficiently senior level from all statutory partners, supplemented by other key members, including a leading academic advisor, an independent safeguarding advisor and a magistrate. An induction process is in place for new Board members and a new, over-arching legal partnership agreement between the four local authorities with CWCC as lead authority, hosting the YJS was agreed in April 2025. The partnership agreement outlines how local authority contributions to the service are made according to a percentage funding formula. This was calculated following a comprehensive zero-based review exercise into service demand and activity.


The Youth Justice Partnership (Board) will also utilise the children's committee of Cheshire and Mersey Integrated Care Board (ICB) to highlight service achievements and risks. Notwithstanding the financial pressures on the ICB, the Board has noted that cash contributions from health to YJS across Cheshire have not increased in line with inflation for several years, and a new funding formula to ensure equitable flow from Cheshire and Merseyside ICB to place has been

proposed. At the time of refresh in May 2025, this had been accepted by three of the four places across Cheshire but a final formula and total NHS cash contributions for 2025-2026 have yet to be signed off.

The YJS Management Health Sub-group was established as the only explicitly sub-group of the Board because of the complexity of Health commissioning and provider arrangements across the sub-region. The Chair of the Health Sub-Group acts as Management Board representative for health, while also ensuring connectivity to Place Directors and Cheshire and Merseyside ICB.

The sub-group commissioned the Public Health Research Institute at Liverpool John Moores University to undertake a comprehensive Health Needs Assessment (HNA) (1). Published in 2023, the HNA was based on in-depth analysis of 70% of the children Cheshire YJS worked with in 2022. This research remains one of the most comprehensive and statistically valid studies in the UK, into the presenting health needs (sometimes undiagnosed, and frequently unmet) of children in/on cusp of the justice system. The terms of reference of the Health Sub-group were reviewed in 2024 and with wider public health representation, the group is now informing the commissioning of services upstream of the justice system (at place level).

The workplan for the Health Sub-group in 2025-2026 includes reviewing financial contributions to YJS from ICBs in each place and a public health consultant is working on a cost avoidance paper, aimed at demonstrating health investment in YJS avoids downstream costs to NHS, Local Government and the CJS. The Health Sub-group have also noted a rise in ketamine use by children and its associated health problems. In response, public health teams across the sub-region have been delivering a series of training and public health awareness campaigns.



*Rea listened to me when I  
needed her. She helped  
me with whatever I  
needed at the time*  
(Child)



Given the multi-authority constitution, elected members are not on the Youth Justice Management Board, but to raise awareness of youth justice, the service held a bespoke open day for elected members in 2024. This was an opportunity for elected members to learn more about the Child First, trauma-informed and relational way our staff, from different professional disciplines, work together across authorities to support children, caregivers and victims. The event was very positively received by elected members, and YJS staff also welcomed the opportunity to share real examples of how they make a positive difference to the lives of some of the county's most vulnerable people.

This 3-year strategic plan (and subsequent annual updates) will progress through formal local channels for scrutiny, oversight and formal sign off by all four councils in accordance with the legislative requirement after it has been approved by the sub-regional management board. This process remains in place even now CWCC are hosting the service because each authority retains the statutory requirement for provision, scrutiny and oversight of youth justice delivery in their area.

Under a new senior leadership team in 2024-2025, YJS has undertaken some re-design to mirror the area delivery units of policing and probation and to align more effectively with place-based services for children, families and victims (see **Section 10.3 Service Development**).

## 1. Update on 2024-2025

### 1.1 Progress on priorities in previous plan

Priority 2024-2025	Progress, what have the outcomes/outputs been?
We will 'ramp-up' participation in creative ways right across the service and facilitate a culture of collaboration where children, volunteers and community groups are enabled to promote prosocial identity and desistance from crime. This will include co-production or co-design of plans, developing projects to support children to desist from crime and reduce harm to victims and communities.	<p>Cheshire YJS' newly created Service Development Hub has been driving participation and application of the Lundy Model (7) of strengthening voice and influence across the service. The organisational re-design and formation of area-based teams is enabling the service to be more outward looking, fostering and nurturing new partnerships with local voluntary community sector (VCS) groups. The YJS Participation Plan has been updated and rebranded as the Participation and Community Development Plan in recognition of the need to connect (or 're-connect') children within their local community. YJS now have designated 'Participation Champions' in each Area Team and managers are influencing local participation strategies. Children supported by the service are now increasingly collaborating on projects with local VCS groups and this will very much continue as a strategic and operational priority, in line with our Child First, Trauma-Informed and Relational principles.</p> <p>The 'My-Plan' document, co-designed with a child, has now been rolled out and is used consistently by professionals and in early 2025, a group of justice-involved children also co-designed an update of the YJS induction booklet. Guides for practitioners on Child First participatory practice have been developed and are being promoted in each area, by our Participation Champions and there have been several excellent examples of co-produced activities (<b>see Section 4</b>). These are designed to help children develop a prosocial identity, sense of achievement and re-integrate them into their local community. The Child First evidence-base is regularly promoted through the monthly 'Power in Participation' feature in the YJS newsletter (YJ News) and our senior practitioners are role-modelling the application of Child First into daily practice. In 2024-2025, Cheshire YJS have introduced the concept of an annual 'impact report' providing evidence of community engagement, voice and influence and social prescribing and have shared this with partners via the Management Board.</p> <p>Embedding Child First practice will remain a priority for the life of this 3-year strategic plan.</p>
We will develop a new comprehensive performance reporting and quality assurance framework, ensuring we are data driven and make full use of the	The new framework was designed and developed as an iterative process throughout 2024 and is now presented in PowerPoint format to the Board each quarter. Several data reporting anomalies came to light and YJS are still working with the software provider (CACI Ltd) and liaising with the Youth Justice Board (YJB) data teams and sector colleagues to refine data sets. As a sub-regional partnership, spanning four local authorities, performance reporting is more complex and

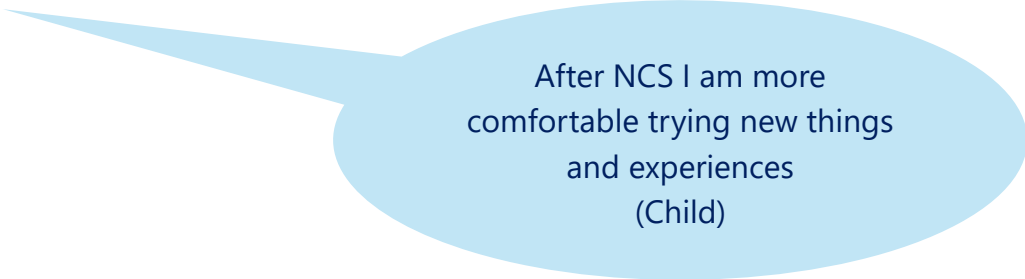


<p>management information system to drive practice development.</p>	<p>nuanced than in most Youth Justice Partnerships because data is sent automatically to the YJB via connectivity and the YJB collate and publish it as a pan-Cheshire figure.</p> <p>Disaggregating data to place level necessitates differentiated recording and coding, which is still under development. Notwithstanding this and some significant staffing gaps throughout 2024, the service now has a new Performance Officer and Business and Performance Manager in post who will work closely with senior management and external partners to explore using Microsoft's Power BI to refine reporting in 2025-2026.</p>
<p>We will refine our internal governance processes to ensure management and back-office functions help facilitate the delivery of high-quality services, including enhanced training monitoring and a training needs assessment to inform the staff training plan.</p>	<p>A major organisational review began in 2024-2025 and will continue into 2025-2026. The transition to CWCC as lead authority has taken priority during the last 6 months of 2024-2025 and the absence of a Business and Performance Manager and other vacancies in Business Support have resulted in the review of business support functions not being finalised. Many internal governance functions have been refined to ensure they align with the service's three pillars and new ways of working: including the shift from High Risk Reviews to Safety Panels and the new triaging process and area-based OOC panels.</p> <p>A staff survey and training needs assessment to inform workforce development was undertaken in 2024 and the service will be commissioning specialist training in a number of areas, based on the findings and priority need. We will also be utilising expertise and experience within the service to deliver more training in-house (see <b>Workforce Development in Section 7</b>).</p>
<p>We will benchmark the YJS support offer to victims against the Victims Code of Practice, new Victims' legislation and HMIPs new inspection criteria (refining the role of Restorative Justice workers in YJS if required) identifying and progressing areas for development</p>	<p>A benchmarking exercise was undertaken and presented at the Management Board in December 2024. In common with most Youth Justice Services, there are some gaps, operationally and strategically, in relation to the responsibilities now enshrined in the Victim and Prisoners' Act (VPA) (8). Some of these are systemic and require updating of information/date exchange between Police and YJS and additional YJS personnel being vetted to access the Police NICHE database.</p> <p>The Board have agreed with a proposal from the service to recruit someone with lived experience who can champion the voice and rights of victims and YJS will be exploring options including replicating the 'lay advisor's role on Strategic MAPPA Boards.</p> <p>The service designed a new victim audit tool, based on the key criteria for supporting victims as outlined in the new HMIP Inspection Framework and undertook an audit of victim casework in early 2025. The audit revealed some areas for improvement and these have been collated and captured within the Youth Justice Service Development Plan for 2025-2026. Cheshire YJS were asked to share this new <u>Victim Audit tool</u> (9) on the national YJS resource hub, as it was considered to be the first of its kind following the VPA.</p>

<p>In partnership with Cheshire Constabulary, we will review the current joint decision-making arrangements for the use of out of court disposals for our children. We will ensure they incorporate the Child Gravity Matrix and children are diverted to the appropriate service according to their level of risk and need.</p>	<p>In 2024, a new joint protocol for youth OOCs was developed in collaboration with Cheshire Constabulary. The Centre for Justice Innovation acted as a 'critical friend' to the partnership by assisting with ensuring the new protocol is supported by the latest evidence and guidance from the sector. The protocol ensures the revised Child Gravity Matrix and latest YJB and NPCC guidance is incorporated. The new triaging process and area-based joint OOC decision making panels were then designed in collaboration with Cheshire Constabulary and went live in April 2025. The panels are chaired by YJS Area Team Managers but with a Police Inspector and/or Police Sergeant also in attendance. The panels have ensured a greater level of defensibility and shared decision making around OOCs. YJS professionals attend panel to present their assessment (using the new YJB Prevention and Diversion Tool) and in line with the new VPA, the victim's voice is sought and considered. These new panels will be refined throughout 2025-2026 and if necessary, adapted in light of Government announcements <i>vis a vis</i> 'Youth Futures Prevention Partnerships' (YFPPs), which for Cheshire are not expected to come on line until April 2027.</p>
<p>We will collaborate with partners to deliver against Priority 1 (Prevention) of Cheshire's 2024-2029 Serious Violence Strategy (2) (SVS) by ensuring funding is targeted appropriately to support children at risk of involvement in serious violence.</p>	<p>The YJS Head of Service continues to be an active member of CCJB and also sits on the Serious Violence Leaders Group that oversees commissioning and the operationalisation of the Serious Violence Duty. Developments in 2024-2025 include a new partnership for Cheshire with the organisation Street Games. YJS have been active and influential in connecting Street Games (who have been awarded Youth Endowment funding [YEF]) into Warrington, where the gap analysis and Serious Youth Violence (SYV) data indicates the need for targeted youth provision is greatest. YJS works closely with the Office of the Police and Crime Commissioner (OPCC) and have also ensured justice-involved children are accessing OPCC-funded provision across the county to provide children at risk of crime, with positive <b>activities, interactions and roles</b> for identity development (Fresh <b>AIR</b> in Child First language). The OPCC's Safety Working together Action Prevention (SWAP) funding comes from depriving organised crime of their assets (Proceeds of Crime Act) and in addition to sporting activities, YJS have developed partnerships with VCS organisations including Culture Warrington, which are providing art and music-based opportunities for children in or on the cusp of the justice system.</p>

Some other notable achievements in 2024-2025 include:-

- Cheshire YJS has been rated consistently within Quadrant 2 (Satisfactory performance) by the YJB's Performance and Oversight Board because of solid and sustained performance across key metrics;
- Our social prescribing model has been cited by the Local Government Association (LGA) (10), YJB and NHS England as innovative practice for supporting children and young people in or on the cusp of the justice system (and has been nominated for a prestigious Children and Young People Now 2025 Award);
- Cheshire Constabulary have refurbished all three custody suites in Cheshire and have adopted trauma-informed and Child First principles through the inclusion of cells designed explicitly with children and neurodiversity in mind;
- YJS ensured justice-involved children participated in the annual 'Big Conversation' with the OPCC and senior police officers, providing their voice and influence on policing priorities across the county;
- The role of volunteering in YJS has expanded with several volunteers being part of our mentoring programme (in line with YEF evidence). Mentors support our children to access other services, to build confidence, learn new skills, and gain employment. One mentor supported a child into employment after helping him with his CV and working on his confidence to approach a local employer directly, who gave him a trial leading to permanent employment;
- Justice-involved children have participated in grass roots VCS community projects, funded by the OPCCs SWAP fund. Examples include the community leaders sports programme at Warrington Youth Zone and DJ workshop delivered by Culture Warrington;
- Justice-involved children participated in the National Citizen Service (NCS) programme in Warrington.



After NCS I am more comfortable trying new things and experiences  
(Child)

## 2. Performance over the previous year

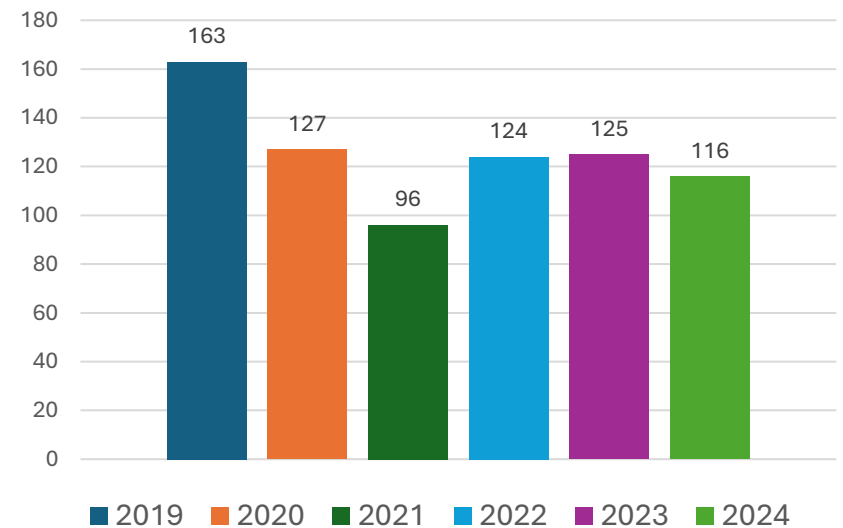
In 2024, Cheshire YJS developed a new comprehensive performance reporting and quality assurance framework so the Management Board, partners and staff can all see areas of strengths and challenge across a wide range of outcomes. We will be data driven, making full use of the management information system to target improvement activity in the areas where it is most needed.

Performance against nationally-measured targets continues to be strong. Since rolling out the Divert scheme in 2017 across all Cheshire local authorities, we have seen fewer children entering the CJS.

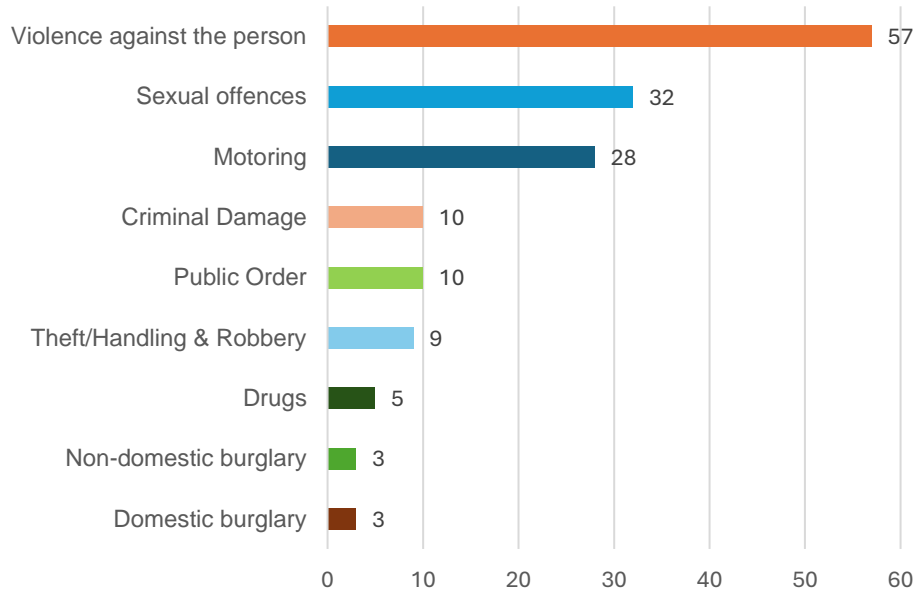
Total volume and rates per 100,000 are significantly below regional and national averages and Section 11.4 contains a longer-term trend of FTE data, disaggregated by local authority. Figure 5 shows initial sharp reductions in FTE, with the low base level being sustained again in 2024.

(NB the lowest level of FTE, in 2021 was due to the impact of covid/lockdowns).

*Jason, working with him has been fantastic. Jason made everything clear and put it in ways I understand*  
(Child)



**Figure 5. FTEs to the CJS in Cheshire (Jan-Dec 2024)**  
(Data source: YJAF)



**Figure 6. FTE main offence type in 2024-2025**  
(Data source: YJS local data)

Figure 6 shows violence and sexually harmful behaviour representing the bulk of those committed by children entering the CJS for the first time. This is what we would expect and is compatible with Child First youth justice principles and an effective youth diversion scheme that ensures children are dealt with according to risk and need.

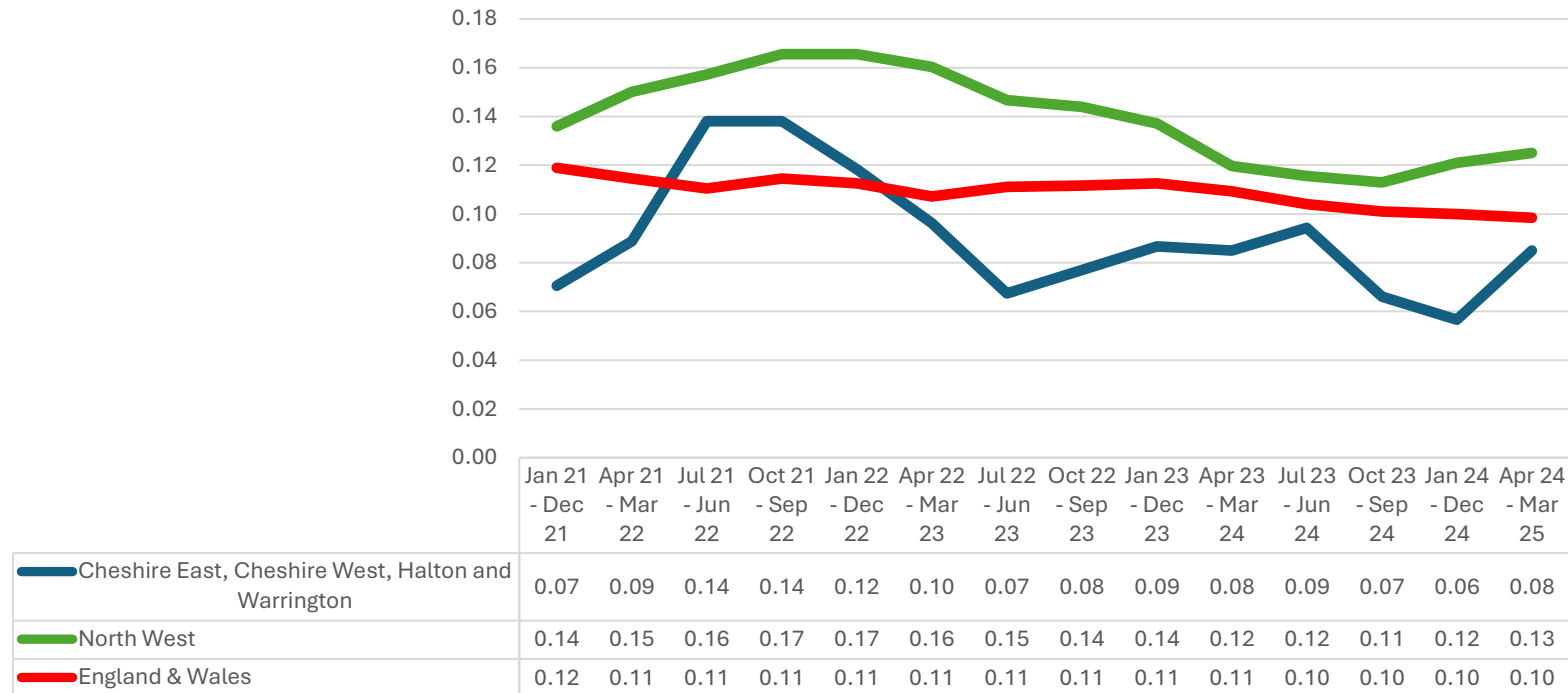
Motoring offences resulting in caution or charge increased slightly in 2024-2025. YJS have developed a partnership with Cheshire Fire and Rescue Service who can deliver an intervention called 'Drive Survive' on our behalf.

Figure 7 shows Cheshire continues to be below the regional and national average for the proportion of sentenced children receiving custody and although the proportion did increase slightly in the 12 months running up to March 2025, it has been trending downwards since 2021.

Cheshire has consistently low numbers of children remanded and sentenced to custody (see Sections 11.9 and 11.10 for place-based detail). Fewer than five children across the whole of Cheshire have been sentenced to custody in any quarterly period going right back to Q2 of 2019.

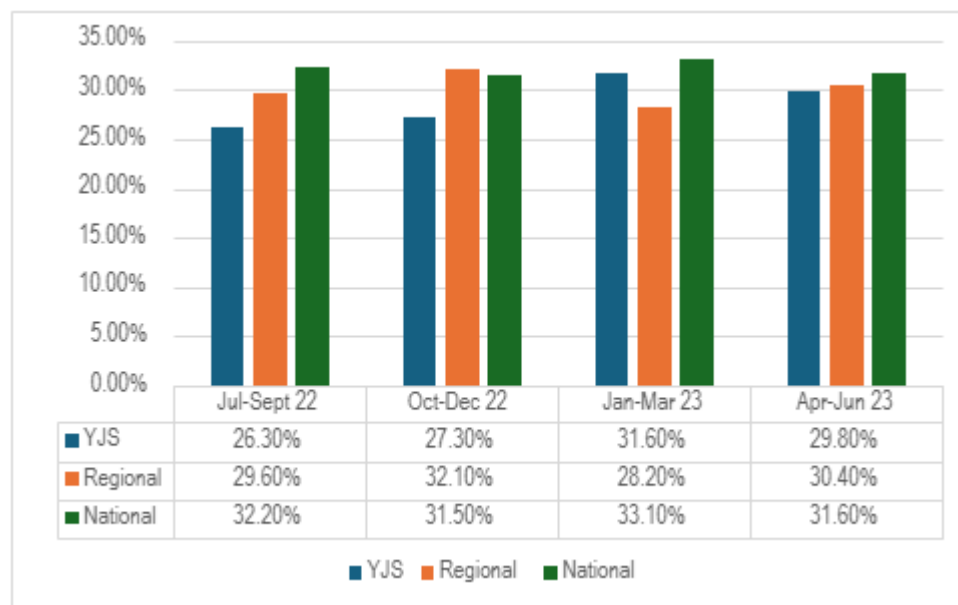
It is rare for there to be more than 10 children from the four places in Cheshire combined, serving custodial sentences at any one time. While reoffending rates of those children in the system are slightly higher than regional averages, this is attributable to the fact children sentenced by the courts tend to be those with whom we have already exhausted all diversionary options. They are the children who are often more entrenched in criminality and exploitation, so require more intensive intervention and support.

We are also seeing consistently reliable results for those children subjected to OOCs, in terms of successful completions and reoffending rates, with fewer than one in ten children diverted away from formal sanctions going on to reoffend.



**Figure 7. Custody Rate per 1,000 for Cheshire 10-17-year-olds with regional and national comparisons**  
(Data source: YJAF)

As a service, we are committed to focusing our efforts on reducing reoffending by our children. However, as we continue to prevent children entering the system and, running parallel, have relatively few children in custody, we recognise reoffending rates are understandably our area of greatest challenge. Figure 8 provides the latest published reoffending data, taken from the Police National Computer (PNC).



**Figure 8. Binary reoffending data for YJS compared with regional and national rates July 2022-June 2023**  
(Data source: YJAF via PNC)

Figure 8 shows Cheshire rates are similar or slightly lower than regional and national rates. Whilst this serves to give us a national picture, it is important to recognise PNC data has limitations. For example, reoffending data is published 2 years behind the current quarter. In addition, the data also includes:-

- reoffending of adults we no longer work with or have never been known to Cheshire YJS;
- reoffending of children from outside areas who offended in Cheshire but have never been open to Cheshire YJS.

Given the limitations in the national data, Cheshire YJS will create a local reoffending cohort from a sample of children and begin tracking any reoffending from this cohort with effect from April 2025.

Desistance from crime for children who experience significant adversity and trauma is not a linear journey. It requires long-term, trusted, relational support from professionals to try and help children achieve a shift toward a more positive self-identity. This is why the vision for the service is underpinned by the three key pillars of Child First, Trauma-Informed and Relational-Based Practice (Figure 1).

*My son has learnt to control himself and his anger more. I have a more focused vision for his future and career*

(Parent)

## Working with girls

National statistics provided by the YJB indicate the number of girls in the youth justice system has tended to be a fraction of the total caseload at around 15%. However, Table 1 shows a review of Cheshire data and since 2023-2024, we have seen a 35% overall increase in the number of girls in the cohort. This is a significant increase in the proportion of girls relative to boys.

**Table 1. Number (and percentage of overall cohort) of girls open to Cheshire YJS in 2023-2024 and 2024-2025**

		2023-24 (%)	2024-25 (%)
Q1	April-June	22 (17)	26 (19)
Q2	July-September	17 (14)	40 (28)
Q3	October-December	21 (16)	35 (26)
Q4	January-March	27 (21)	35 (22)
<b>Total number</b>		<b>87</b>	<b>136</b>

(Data source: YJS local data)

*It's hard ...navigating friendships,  
being online, school. It's non-stop.  
Also feel judged by what you wear.  
Doesn't feel a safe world now  
(YJS Girl's Focus Group)*

We are aware this is a national trend, noted by other youth justice services but we wanted to explore it in more detail and identify areas for development within the service and across the wider partnership.

Several actions were undertaken to shape and influence our future focus:

- A survey was completed with the girls open to YJS so their experiences could be heard directly and we asked how we can best support them in or on the cusp of the justice system;
- In January 2025, Dr Gilly Sharpe (Senior Lecturer in Criminology at Sheffield University) delivered a whole service presentation on her research findings on girls and young women in the CJS;
- Cheshire YJS is now also on the YJB national forum for work with girls so is learning from and sharing good practice.



### Key findings of our review:

- 54% of the offences committed by girls are broadly categorised as violent/harm against a person and research indicates girls can be treated more harshly for certain types of offences, particularly those involving violence.
- Predominantly, girls open to YJS are aged 15-17 years; this is in line with research findings, i.e. girls are likely to offend between the ages of 13 to 16. Early intervention from universal services and targeted services is key to supporting girls with some of the challenges they may be facing, to help reduce them entering the CJS.
- Snapshots indicate for all children in Cheshire, the percentage split across OOC and post court is approximately 70/30%. However, when focussing on girls, this is more evenly split i.e. OOC 22 (54%), compared to court-imposed orders 19 (46%) for girls.

The European Guidelines on Child Friendly Justice recognise girls as a minority whose needs are overlooked. This led to the committee recommending, they are paid special attention through gender sensitive provision (11). As a service, we have explored provision for girls in each of the local authority areas, so girls can have a safe space to attend and receive support and build networks.

In 2025-2026, we will use the evidence found in our Girls' Survey, Dr Gilly Sharpe's Presentation (Girls and Young Women in the Criminal Justice System) and other research to inform the way we work with girls as a service. We will ensure Assessments and Pre-Sentence Reports capture the context of the girl's behaviour (trauma, abuse, exploitation) and ensure girls receive the most proportionate outcome and are not over criminalised. We will also develop our understanding of how gender impacts on identity and ensure interventions are evidence-based and gender-responsive.

Figure 9 shows the Token of Gratitude Certificate awarded to the group who gave their time and voice to help improve how we work with girls.



Figure 9. YJS Token of Gratitude Certificate

## 2.1 National Standards Audit

Submission of a National Standards (NS) audit is a condition of the YJB national grant and the most recent NS audit was undertaken in October 2023, against NS2: Work in Courts. Cheshire YJS received positive feedback from the YJB Regional Oversight Manager on the quality of both the audit process and its findings.

This NS audit was a comprehensive quality assurance audit of the services delivered before, during and after children's appearances before the three magistrate courts and one crown court in Cheshire. Section A looked at Strategy, Section B on Reports and Section C on Process. Sections B and C involved a deep dive practice audit involving 20 cases.

There were nine areas in Section A 'Strategic performance' with four rated **Outstanding** and five rated as **Good**. Cheshire YJS enjoys a strong partnership with HM Court and Tribunal Service (HMCTS), Magistrates, the Police and Crown Prosecution Service. The Head of Service is a member of CCJB and meets quarterly with youth bench magistrates who sit in Cheshire's three youth courts. A former chair of the Cheshire youth bench and a representative from HMCTS are also members of the Management Board.

For sections B (Reports) and C (Process), the audit revealed the overall quality of work was **Good** or **Outstanding**. One criterion required improvement and this related to the adequate referencing of the impact of the child's offence on their victim, by authors of pre-sentence reports. Improvement action has been addressed through local changes to case management and recording guidance, emphasis on managerial oversight and explicitly evidencing the possible impact on victims (even where victim personal statements are unavailable).

## 3. Risks and issues

The main risk to service delivery and the achievement of positive outcomes for children, victims and families, relates to the complexity of the pan-Cheshire shared service arrangements. To a large extent, this risk has now been mitigated through the move to a fully hosted model with CWCC acting as lead authority, albeit the risk and challenge of operating a lean service spanning four local authorities is an inherent one. Cheshire YJS operates in a sub-regional (pan-Cheshire context) so sits somewhere between place and the larger Cheshire and Merseyside ICB footprint. This can be a difficult space to navigate, particularly from a stakeholder management perspective because the commissioning and NHS provider footprints do not align with the local authority, police and YJS footprint, and there is high turnover of senior leaders at both place and regional level. The vast majority of Youth Justice Services are integrated into single local

authority structures with much simpler Governance models – albeit their costs are higher because they have to absorb all management, ICT and back-office costs at place level.

National policy initiatives relevant to the youth justice sector sometimes falsely assume that youth justice is integrated within children services at place, so Cheshire YJS frequently has to adapt or compromise to implement national programmes. This was the case with the Troubled Families and Ministry of Justice (MOJ) Turnaround programme and will also be the case with YFPPs, which the Government expects to be established at place level. The Head of YJS is well networked across all four Cheshire places and the internal service redesign undertaken in 2024-2025 was undertaken with the direction of travel toward place-based YFPPs and Families First in mind.

The other main risk to effective youth justice delivery relates to the precarious financial position all funding partners face. Two of the local authorities in Cheshire have experienced Best Value inspections in the last 12 months and Cheshire and Merseyside ICB is in ‘turnaround’ and making significant spending cuts. With the YJB as the largest single financial contributor to this partnership, also under statutory review, with decisions on multi-year settlements for all departments yet to be made, resourcing remains the biggest single risk to service continuity. Cheshire YJS also has an ageing workforce; there have been several retirements in the last year and a number of experienced staff in front line, managerial and back-office roles are likely to retire within the next few years. Cheshire YJS have recruited younger staff – particularly in front-line practice – and are beginning to explore apprenticeship opportunities with the CWCC organisational development team for workforce planning.

## 4. Building on our strengths: Plan for 2024-2025

### 4.1 Child First

In Cheshire, we are committed to Child First principles. As mentioned earlier, these principles, along with Trauma-Informed and Relationship-Based Practice will inform all practice and development activity. YJS will continue to apply the principle of “*Would this be good enough for my child?*” and prioritise the best interests of children, recognise their needs, capacities, rights, and potential.

As well as being child-focused, our work will be developmentally-informed, acknowledge structural barriers and done with children, rather than done to them. YJS has adopted the Lundy Model (7) (Figure 10) as our frame of reference in developing participation across all aspects of service delivery in 2024-2027. The wider partnership are starting to adopt Child First principles in 2024-2025 with all four local authority Children's Services now referencing and training staff on the Lundy Model.

In 2024, Cheshire Constabulary refurbished their three custody suites to become less intimidating for children and in recognition of the fact many children entering police custody are neurodivergent and experience sensory difficulties. Dimmed lighting and foam footballs have been introduced into cells along with chalkboards and edible chalk allowing children to safely express themselves while detained (Figure 11).

YJS has made great strides in this direction of travel in recent years but recognise there is more to do, particularly in relation to meaningful and active participation of children in the justice system.

This is why **participation** remains a strategic, operational and practice priority flowing from this Strategic plan.

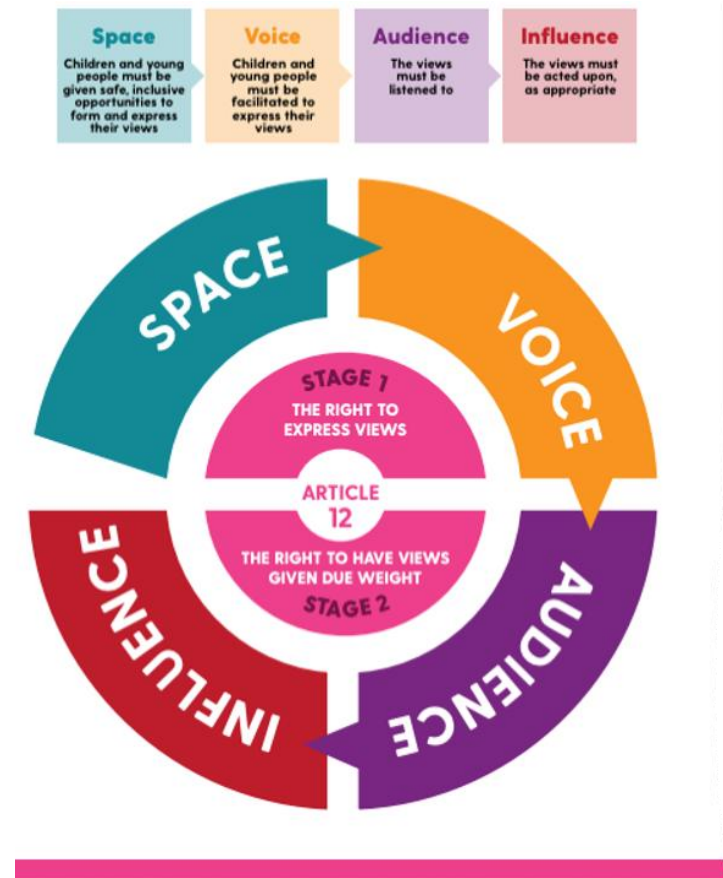


Figure 10. The Lundy Model of Child Participation



Figure 11. Refurbished police custody cell

The new Service Development Hub is the “engine room” to drive forward participation across all areas of YJS. This will not be easy as children sentenced by the courts often feel they have no power and no voice and they have usually experienced significant trauma and adversity. Offending for many children is in part symptomatic of their own childhood abuse or neglect. YJS held a Service Development Day in July 2024, with **participation** as the theme and the leading children’s and social justice charity, Peer Power co-facilitated the day. Through the lived experience of their ‘peer leaders’, Peer Power have helped YJS harness the power and potential of children and young people to be the catalyst for scaling up some of the co-produced (Child First) activity started in 2023-2024 and developed further in 2024-2025.

An example of this involves a child placed in Cheshire under the care of another local authority. A is southeast Asian and Muslim and he participated in a voice and influence project in Warrington and provided feedback on his very personal challenge of moving from an ethnically diverse city to a predominantly white town.

A enthusiastically invited his YJS worker to join him in celebrating his religious festival and sharing food in a lovely, cultural learning exchange. A will be helping YJS to help other children from different cultural and ethnic backgrounds – a textbook example of giving children a voice, influence and then activities and interactions to promote prosocial identity.



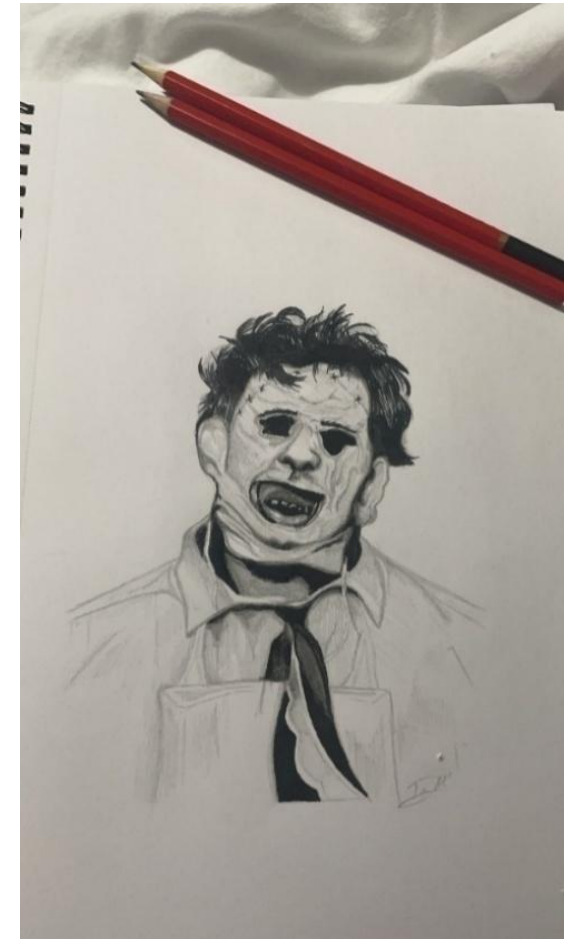


**Figure 12. Mural next to site of Crewe Youth Zone**

Several justice-involved children from the Crewe area worked with other children and a professional artist to create the mural in Figure 12 on the side of a building next to where a new 'Youth Zone' is being built in the town.

In 2025-2026, YJS will also be working with an arts studio in Halton and Culture Warrington to give justice-involved children similar opportunities to positively (and publicly) express themselves through art.

Each year, YJS encourage and support any children with an interest in art to submit their work to the annual Koestler awards.



**Figure 13 “Leatherface”  
Koestler Awards submission**

Figure 13 shows the latest submission and the artist received a highly commended certificate through Koestler’s fast feedback programme.



**Figure 14. Cr8 music project in Macclesfield**

Music is used therapeutically as a tool to engage children who have experienced trauma and encourage them to express themselves while learning new skills. YJS have partnered with a couple of music-based social enterprises to co-produce projects where justice-involved children work alongside musicians to learn new instruments, write lyrics, try DJ mixing and laying tracks on computer.

One child, supported by YJS on the Cr8 project (Figure 14), has developed a real talent on the drums and after a long period out of education has reintegrated back into school. Another child with a real talent for lyric writing, recorded tracks in a studio and released them on Apple music (an excerpt is shown on the right). These are powerful examples of giving children **Activities, Interactions and Roles** to help them develop positive self-identity, as opposed to an offending identity.

*H has really enjoyed the music session he attended this week...which is a massive breakthrough for him to communicate with us. He has isolated himself in the family home, which has impacted on his emotional and mental health due to his traumatic upbringing with his father. His case manager and I have been trying to tap into his interests as a way of encouraging socialisation and supporting his mum too.*

*(Social Worker)*

“Be Successful in this life without regret  
Stop tryna act bad for a cell  
From a young age I been that kid in a court  
Trust me didnt lead me nowhere  
But I bet you these People tryna act bad for a cell  
get chills when they hear a siren pass”

## 5. Resources and services

The YJS operates as a complex shared service arrangement, with pooled funding from four local authorities, statutory partners, Cheshire OPCC and the YJB core grant. Cheshire YJS will pool the YJB core grant with other funding to:

- Ensure we have a well-trained, supported and motivated team of staff, with the specialist skills to engage children, families and victims;
- Continue to contribute towards funding our Relationship-Based Practice model and further developing participatory work with children, families and victims;
- Continue to pool funding to develop social prescribing and other interventions with children to improve self-identity, health and wellbeing and reduce the likelihood of reoffending;
- Continue to develop diversionary and participatory interventions to divert children away from formal sanctions (supported by contributions from the OPCC);
- Ensure YJS can continue to provide robust, intensive supervision to children in the community to maintain public and judicial confidence and minimising the use of custody;
- Further develop our service offer to victims so we are in line with the Victim Code of Practice (12). YJS will hold a wellbeing day in the summer of 2025 for victims of youth crime across Cheshire. This will also be an opportunity for victims to contribute their views and ideas and we hope to recruit a Victims' Ambassador to be their voice on the Management Board.



## 6. Board development

The YJS Management Board will hold an extended Board Development session in June 2025. This is being independently facilitated by Child First Consultant, Michael O'Connor. There are a number of new Board members and this will be a timely opportunity to come together as a group of system leaders, from across the sub-regional partnership, to learn about the evidence base behind Child First Youth Justice. The Board will continue to meet quarterly and receive reports from YJS and partners to facilitate scrutiny and discussion around key service delivery and performance areas. The Board's key purposes are:

- To determine strategic direction of YJS, ensuring all statutory partners are fully engaged;
- To oversee and monitor the operational work of YJS;
- To ensure YJS is adequately resourced to carry out its statutory function of preventing offending by children and young people.

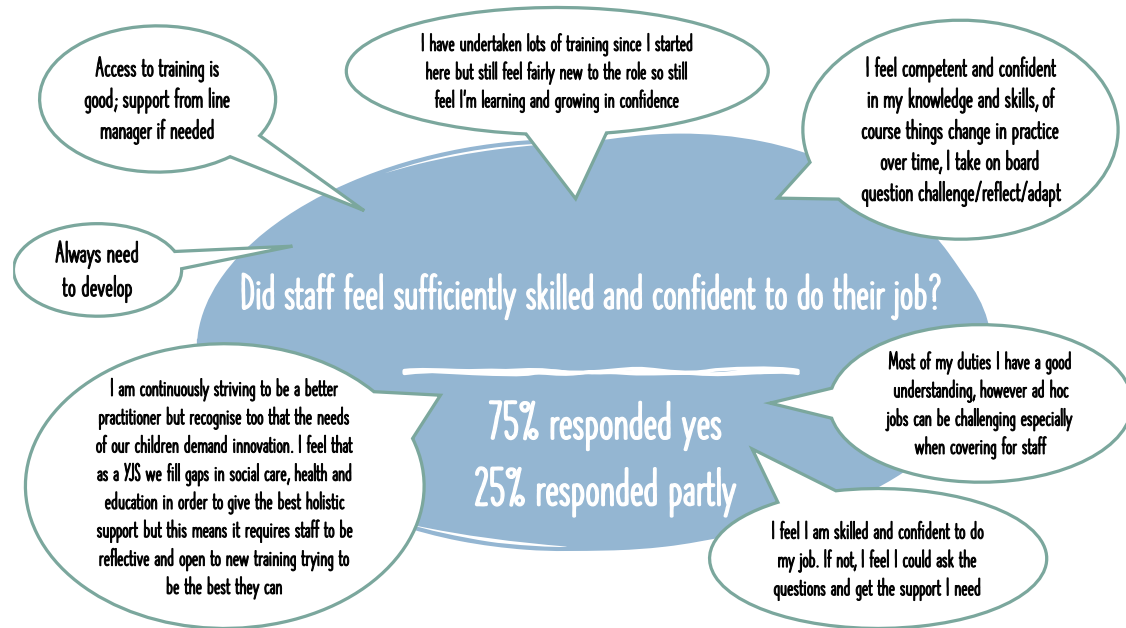
The leadership, composition and role of the Management Board are critical to the effective delivery of local youth justice services and Cheshire has senior representation from all statutory partners. The YJS Management Board also has long standing representation from HMCTS, the Magistracy, children's safeguarding, and academia.

As mentioned in section 5, we will be exploring the recruitment of a Victim Ambassador to champion the voice of victims and be a critical friend to the youth justice management team and our partners.

## 7. Workforce development

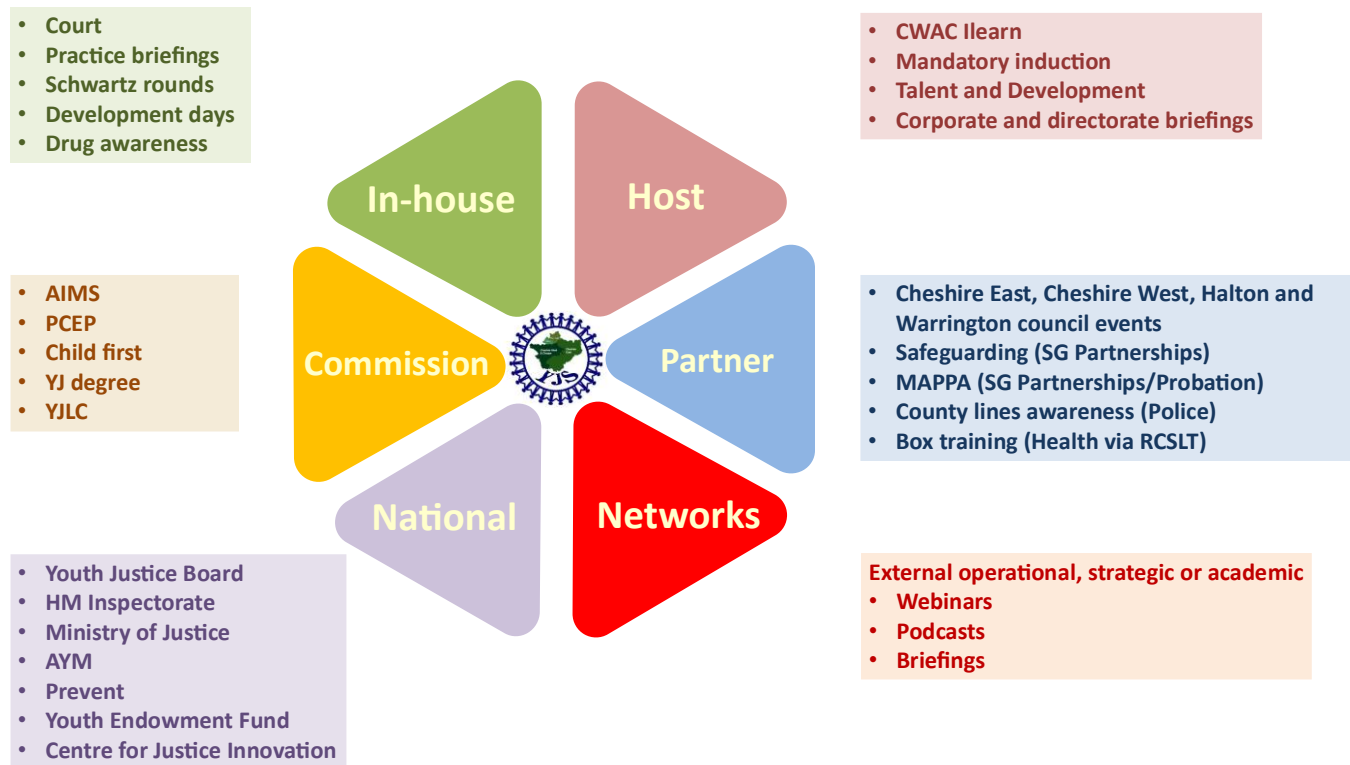
In line with our three pillars vision, we are committed to learning and development. It is vital all staff have the appropriate skills and knowledge, are effective in their roles and equipped to deliver high-quality services to everyone they work with.

We encourage staff to identify gaps in knowledge and suggest learning opportunities, across the team and within supervision. In the latter months of 2024, all staff were invited to give their view on our training offer by taking part in a Training Needs Analysis.



**Figure 15. Findings and staff feedback from training needs analysis**

Figure 15 gives a flavour of the findings and staff comments.. The analysis revealed the majority of staff were satisfied with the variety and quality of training the service had to offer. The Merseyside and Cheshire training consortium (which commissioned specialist training for the five Merseyside Youth Justice Services and Cheshire) formally ended in March 2025. This is because the move to a fully hosted model in CWCC meant Cheshire YJS was no longer able to hold the purse on behalf of the five other services and none of the Merseyside local authorities were in a position to take over as lead. The dissolution of the training consortium means YJS will need to commission training for staff so this prompted the need for a “stock take” of all current sources of training. A training overview was therefore carried out in spring 2025 and Figure 16 shows a summary of sources with examples.



**Figure 16. YJS training sources and examples**

Occasionally, there are TV and Radio broadcasts pertinent to Youth Justice of interest to staff. Some can spark widespread media and public interest and an example of this in 2024-2025 was the Netflix drama, *Adolescence* (13). In addition, the BBC Radio 4 Reith Lectures (14) this year entitled *Four Questions about Violence*, are of relevance to our work.

In addition to rolling safeguarding refresher training, training undertaken by YJS staff during the last 12 months is summarised in Table 2.

**Table 2. Summary of key work force development activities in 2024-2025**

Title	Course Type	Overview
Working with girls in the justice system by Dr Gilly Sharpe Senior Lecturer in Criminology, University of Sheffield	Academic Guest Speaker (Over Teams)	One of our senior practitioners approached Dr Gilly Sharpe after hearing her speak at a seminar. We were both delighted and fortunate that Dr Sharpe agreed to speak exclusively to our team. This event was attended by 55 staff and recorded for those who could not make it. It prompted the piece of work to review numbers of girls open to Cheshire and develop an action plan to include girls' voices and establish best practice to help girls be the best they can.
All Service Development Day on Participation	Themed All Service Day (In person)	At this event, we revisited our mission and values and also kick started our work on participation, building on the work of Laura Lundy and Louise Forde (speakers from the previous year). The day was facilitated by Peer Power, the leading children's and social justice charity.
Porn Briefing by Axxess Sexual Health Education Team	Guest speaker from Axxess at Practitioners Meeting (In person)	This session aimed at educating Practitioners on how best to support children about developing healthy and consenting relationships and to keep them safe from harm. Practitioners found the training very useful, especially when working with children who have entered the CJS for harmful sexual behaviour.
Court training	Delivered by YJS staff and court staff (In person in court)	Full service training took place over two days in May last year at Chester Magistrates' Court. Staff, panel members, magistrates and legal advisers attended and participated in this interactive session.
Schwartz Rounds	In house open session for staff (In person)	These theme-based sessions were introduced as part of our trauma informed service development. They are a supportive space for any staff to express views and share their feelings and are facilitated by one of our in-house CAMHS workers and a YJS Practitioner trained in counselling. The theme in 2024-2025 was loss of a young person, prompted as a number of children previously known to the service, have sadly lost their lives.
OOCD panels	In house briefing (In person)	This was a briefing on the introduction of OOCD panels and how they will operate.

PDAT Tool	In house briefing	This briefing was to introduce staff to the new Prevention and Diversion assessment Tool (PDAT).
AIMS training	Commissioned	AIM3 training in assessment and intervention took place to increase the pool of AIM-trained staff in response to the increase in harmful sexual behaviour. The majority of YJS Practitioners are now AIM-trained.
Child First Certificate	Commissioned	Two members of staff completed the Child First module in 2024-2025.
Certificate of Effective Practice	Commissioned	Four members of staff have completed or started the certificate in 2024-2025.
Equality and Diversity training	Commissioned (In person)	The last cohort of staff attended the Wipers training in May 2024. This mandatory training for all staff began in 2023 and was commissioned by the training consortium. It was tailored for youth justice professionals to improve cultural competency and awareness of disproportionality in the justice system.

From April 2025, YJS staff have direct access to CWCC training resources and a raft of Ilearn modules. Ilearn as a training and development platform is being replaced in September 2025, however our commitment to the workforce will continue into 2025-2026, as we will seek to further strengthen workforce development through the following:

- Ensuring all staff are up to date with CWCC mandatory corporate training, DBS checks and service specific mandatory training;
- Developing a more centralised approach to identifying training needs across the service;
- Developing an enhanced training monitoring system and connecting with CWCC Learning and Development Team;
- Revising the Training Plan to be relevant, achievable, and accessible to the whole workforce;
- Continued membership of the Youth Justice Legal Centre, which brings timely and specialist legal advice for professionals and managers and access to a range of in-person training events and remote learning.

Having considered the local data analysis and in support of service priorities, the following workforce development opportunities currently planned for 2025-2026 are shown in Table 3. More opportunities will be added in response to the dynamic nature of working in youth justice.

**Table 3. Summary of planned work force development activities in 2025-2026**

Theme	Provider	Overview
Online Harmful Sexual Behaviour	Commissioned through the AIM project	To include online sexual abuse, surface, deep and dark web, apps and platforms, hentai and AI and considerations for assessment and intervention. These areas were specifically requested through the Training Needs Analysis.
AIM Restorative Practice and Harmful Sexual Behaviour	Commissioned through the AIM Project (In person)	A 2-day course to enable participants to have a clear understanding of restorative practices and their use in sensitive and complex cases involving harmful sexual behaviour.
IT Canva / forms	In house (Over Teams)	'Learn with us' sessions on how to use these applications.
Acronym training	In house (Over Teams)	New Child First method of recording contacts.
Prevent (online extremism)	Department of Education London (Online)	This session includes incel awareness and takes a deep dive into multiple on-line platforms seen in Prevent referrals on children who've become radicalised on-line.
Professional Certificate in Effective Practice	UNITAS	An on-line modular course covering essential theory underpinning work with children in the justice system – 2-3 cohorts per year.
Child First Module	UNITAS	A shorter on-line course explicitly covering the latest Child First evidence base.

EDI - Gypsy, Roma and Traveller Awareness (2 modules) History Challenges	University of Worcester and Worcestershire County Council (e-learning)	Traveller community have a presence across Cheshire and the aim of this training is to help staff develop cultural competence in this community.
EDI - Gypsy, Roma and Traveller Awareness	Friends, Family & Travellers (In person)	Aimed at practitioners, the charity Friends, Family and Travellers to give a briefing at the Practitioners' meeting.
Teen to Parent Abuse briefing	Warrington Early Help (Over Teams)	Training has been organised via the Warrington Domestic Abuse Hub.
Transgender Awareness by Axess Sexual Health Education Team	Axess (In person)	This free training aims to increase confidence, knowledge, skills and respect when working with Trans and gender variant people.
Knife Crime Awareness	Ben Kinsella Trust	Exploring the real lived experience of people affected by knife crime and youth violence. Briefing content will be explored in the Practitioners' meeting for staff who could not attend the original session.
Schwartz Round	In House	The theme for 2025 is 'Covid: 5 years on'.
Custody Suite visits	Cheshire Police	Staff are invited to view refurbishments aimed to be more appropriate for children and people with neurodiversity.
Volunteer training	In house (In person)	Delivered over 2 days in the autumn.
Restorative Justice training for new starters	In house (In person)	Delivered with volunteer training in the autumn.



## 8. Evidence-based practice and innovation

YJS will continue to root all intervention and support with children on the evidence base, but Cheshire will also explore new and innovative ways of connecting with children who find it difficult to access mainstream services. Our approach was described recently by an NHS England lead as the best application of social prescribing in a justice context that she had come across. It was also cited by the LGA as one of their *'innovation in local government'* case studies (10).

Social prescribing in YJS emerged from the recognition that justice-involved children often arrive with previously unmet health needs and after traditional/clinical models of care had failed to reach them. An example being the socially prescribing of fishing as a mindfulness activity in partnership with the Canal and River Trust's 'Let's Go Fishing' programme. In August 2024, five children took part in this session, led by a YJS health worker and one child loved it so much, he stayed all day (Figure 17).



**Figure 17. A successful catch with Let's Go Fishing**

Adopting a psychosocial therapeutic approach, health workers in YJS are socially prescribing creative and flexible activities to help children improve their health and wellbeing. This has proven particularly effective for males who have experienced intra and/or extra familial violence and are often in a state of hyper-vigilance or hyper-arousal. Cognitive Behavioural Therapy is often ineffective with this increasingly large sub-set of our children, so the service has tailored the health offer to become far more psychosocial and adaptable to the needs (and interests) of the children we work with. Our health offer is also supportive towards addressing the impact of trauma.





**Figure 18. L's greenhouse and safe haven**

L was a vulnerable child awaiting an ADHD and Autistic Spectrum Condition diagnosis and lived in a busy house with five siblings. He found the home environment quite stressful because of the auditory sensory impact and this had caused some intra-familial conflict and police involvement. YJS socially prescribed gardening as a therapeutic activity for L and he has thrived with the responsibility of creating flower beds and growing fruit and vegetables in a new greenhouse, which is now his peaceful safe haven (Figures 18 and 19). L was given fresh **AIR** through **Activity, Interaction** and a new **Role** as a producer of fresh fruit and vegetables for his family.



**Figure 19. L's strawberry plants**

Cheshire YJS has a well-developed “*Research in Practice*” working group that was recognised by HMIP in 2021 as an exemplar of collaboration between academia and the youth justice sector. YJS is in a knowledge-transfer partnership arrangement with two local universities (Chester and Edge Hill University) and two senior lecturers in criminology, with a national profile for research on youth justice, now co-chair the Research Group. This collaboration ensures Cheshire YJS retains a national reputation for evidence-based practice and stays at the leading edge of innovation in the sector.

The Research Group has been able to secure several key academics to speak directly to the service about their research. YJS were fortunate to have Professor Laura Lundy, author of The Lundy Model (7) (see Figure 10) speak exclusively to our staff on how best to implement her model. YJS has been fortunate to have a number of key speakers talking to staff about the research behind participation, however the Service Development Day in July 2024 was the catalyst for the development of a participatory model across the service, with Peer Power Youth facilitating the session.

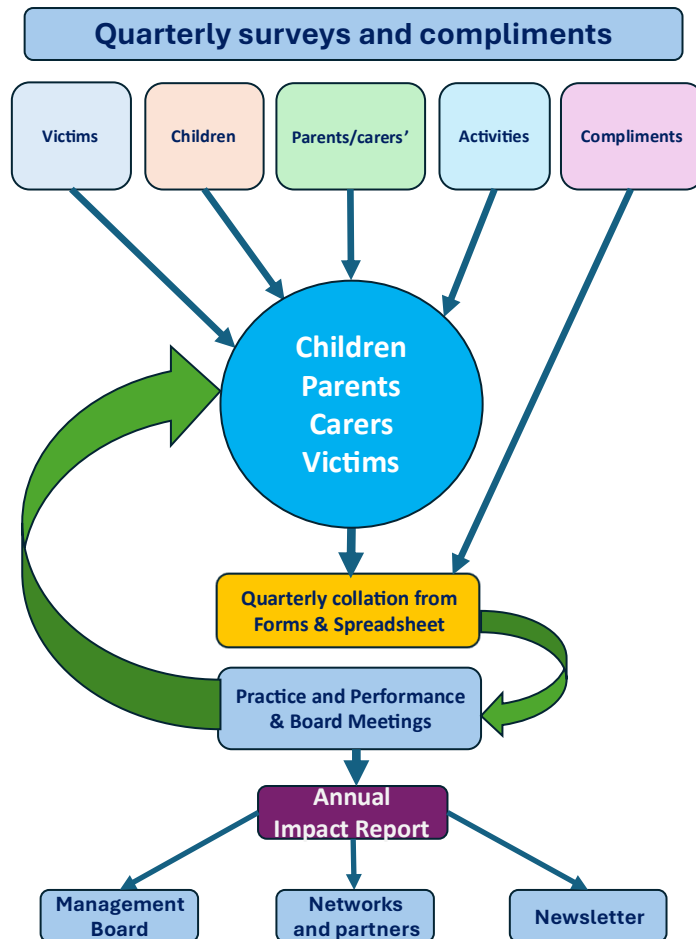


Figure 20. YJS voice and influence flowchart

Figure 20 illustrates how Cheshire YJS has adopted the Lundy Model (7) as a basis to give voice and influence to all our service users (not just children but families and victims too).

We will be using an appreciative inquiry approach in our work and using 1-1 and group-based activities with service users as a virtuous feedback loop to develop and refine our intervention and support. Collaboration with children not only empowers them with a feeling of agency, it helps to develop skills and develop prosocial identity.

In 2025-2026, Cheshire YJS will continue to partner with national not-for-profits including Leaders Unlocked and local VCS groups such as Culture Warrington on bespoke collaborative projects that amplify the voice and influence of justice-involved children.

Ideas in the pipeline for the next 12 months include “Life through our Lens” where children from different areas of Cheshire will co-produce a film reflecting what living in Cheshire is like for them. YJS are also partnering with an arts studio and professional artist to give children further opportunities to express themselves through street art. These are creative and practical examples of applying Child First principles – Activities, Interactions and Roles (Fresh **AIR**) for developing prosocial identity.

## 9. Evaluation

The Health Sub-group of the management Board commissioned the Public Health Research Institute at Liverpool John Moores University to evaluate and validate the trauma-informed and relationship-based practice approach adopted by YJS. The passage below is taken directly from their full technical report (1), based on a statistically valid research sample of 70% of the children YJS were working with at the time:

*“The (Cheshire YJS) offer now provides that key link into mental health, substance use and Speech Language Therapy support, through an equitable healthcare assessment available to all young people entering the YJS. This provided a key opportunity to assess and identify any unmet health needs in these three areas (and wider health and safeguarding needs), which may not have otherwise been identified, and for many was the first time they had access to such healthcare screening. This multi-agency approach not only allowed for quicker identification during the healthcare screening, but it also meant more timely specialist support for families who would have otherwise had long waiting lists to see specialists from CAMHS and SLT. This was identified as an effective way to open the door to this pathway of wider support, recognising that these health needs were associated to the offending behaviour and need to be addressed to prevent further reoffending .....The Cheshire YJS model also provides an opportunity for multi-agency working, not only to provide that overarching multi-disciplinary offer for children and young people, but also in terms of how services work together across Cheshire....The HNA highlights the key work from YJS and wider services across Cheshire in support of families to reduce inequalities, improve wellbeing, and reduce offending. This required skilled, experienced staff working in a trauma-informed way, using a child-focused approach.”*

## 10. Priorities for the coming year

Building on what we have achieved in the previous year, a service development plan outlining management activity, sits underneath this higher-level Strategic Youth Justice Plan and in 2025-2026 will be used to deliver against the following priorities:

We will continue the priority focus on developing participation and amplifying the voice and influence of children, families and victims and embedding this in all areas of the service. We will facilitate a culture of collaboration where children, volunteers and community groups are enabled to promote prosocial identity and desistance from crime. This will include children co-producing a “Life Through Our Lens” film where they will be encouraged to express what their part of Cheshire means to them. We will also be involving children in the co-design of an induction booklet for new entrants to the service, with explicit focus on making our documentation feel more inclusive for children, families and victims of different culture, ethnicity or faith. We will also be accrediting participatory activities (via AQA) so children without prior qualifications receive a nationally recognised certificate for learning new skills.

We will continue to build on the new comprehensive performance reporting and quality assurance framework, ensuring we are data driven and make full use of the management information system to drive practice development. We will be building two reoffending cohorts; one for children receiving OOCs and one for children sentenced by the court. We will also explore the use of Power BI to further enhance our performance reporting capability and liaise with the OPCC and Cheshire Constabulary on the potential of ARC software to generate a bespoke Serious Youth Violence dashboard.

We will refine our internal governance processes to ensure management and back-office functions help facilitate the delivery of high-quality services including enhanced training monitoring and a training needs assessment to inform the staff training plan.

The new Business and Performance Manager in YJS will be reviewing methods of internal communication following the transition into CWCC including use of Teams channels.



We will continue to enhance our offer to victims to ensure all victims, including child victims, are considered in all circumstances, and are delivered well. We are planning to hold a wellbeing day in partnership with Cheshire Cares for victims of youth crime. It will include offers of therapeutic support and enable victims to give honest feedback on their experience of the justice system in Cheshire and influence how YJS work with victims and other agencies.

YJS will also seek to recruit a lay member who has lived experience as a victim to act as critical friend to the Board and service – in a similar way to the lay member role on MAPPA Boards. They will also represent victims of youth crime on a new lived experience Victims' Panel to be established by the OPCC as a sub-group to the CCJB.

We will undertake comprehensive audits and report findings to Board in the following thematic areas; custody and resettlement, the quality and impact of Education and Training support offers and the effectiveness of work with children on OOCDS.

We will also undertake a comprehensive deep dive into a sample of children to look at the quality of assessment, planning and intervention to support the safety and wellbeing of children and those they may harm.

We will successfully support 60 children through the Turnaround project in 2025-2026 by developing an area-based delivery model.

We will establish a Diversity and Inclusion Working Group, ensuring the services provided are inclusive to all, whether under-represented or over-represented.

For 2025-2026, this will have a particular focus on the experiences and needs of girls because they are an increasing proportion of justice-involved children in Cheshire and children from different ethnic, faith or cultural background – because they represent a very small cohort in Cheshire and we need to be inclusive and responsive to the very different lived experience of all children.

## 10.1 Standards for children

Cheshire YJS has developed a “conversational audit” methodology to undertake practice audits where managers visit or speak to children, families and (where appropriate) victims too. This is now a ‘business as usual’ audit methodology for the service and has been adopted by some of our partners in children’s social care. Direct quotes from children, caregivers or partner agency professionals obtained through conversational audit are illustrative of the kind of trauma-informed, relational practice Cheshire YJS is striving to provide to the children we work with.

The new participatory model also aims to gather the views and ideas of our children.

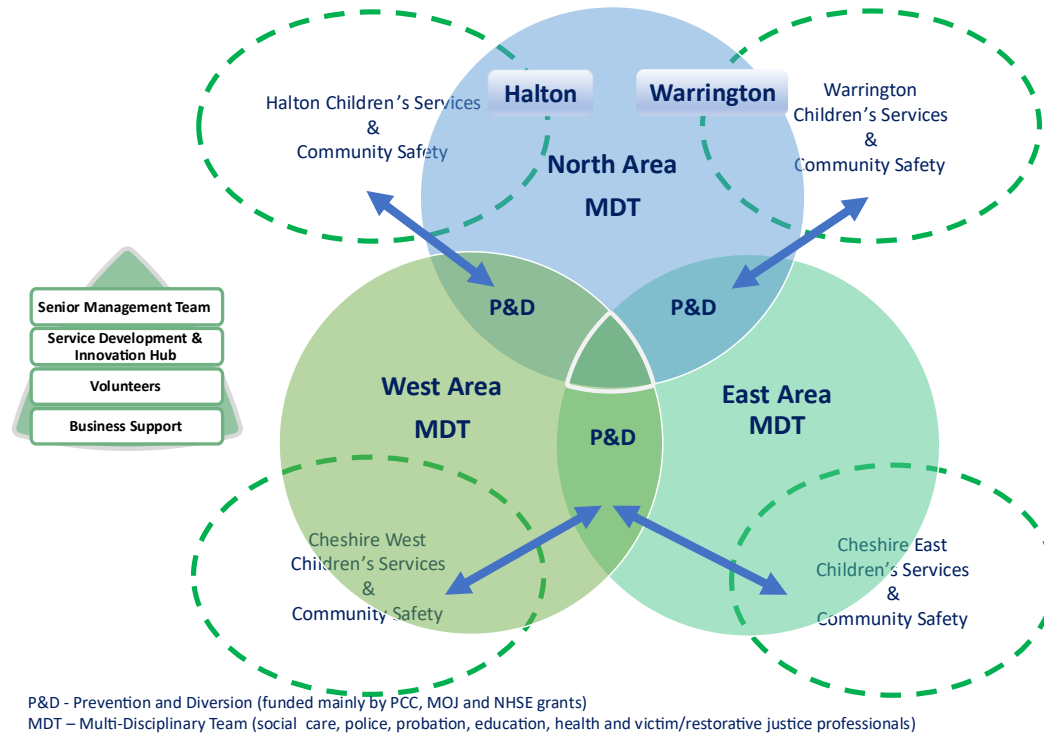
*You’re nice and you talk calmly to me  
and you’re not quick to tell me off. We  
do doodling in sessions while we talk  
which gives me something to focus on  
rather than having to talk face-to-face  
because I’m not good with looking  
people in the eye when I talk.*

(YJS Girls Focus Group)

## 10.2 New performance framework

Striking the right balance between local place-based and pan-Cheshire performance reporting is a challenge for YJS and disaggregating Cheshire-wide data to place often renders the data invalid because the volumes are so low. YJS now have a new performance management framework, using a mix of the recently introduced 10 national KPIs alongside better use of our case management system, Child View. The new performance report has been well received by the Management Board and enabled them to better understand the risk, needs and complexity of our children. A new Business and Performance Manager started with YJS in April 2025 and with the help of CWCC Insights and Intelligence team will explore the use of Power Bi to enhance the way the service and wider partnership use data to inform service delivery and commissioning.

### 10.3 Service development



**Figure 21. New Area-Based Service Design Model for YJS (from April 2024)**

It is critical for a sub-regional youth justice partnership to work closely with statutory agencies and community organisations at a local level, to properly support children in their own communities. To better facilitate this, YJS implemented a modest service redesign in 2024-2025, enabling front-line professionals to work more closely and effectively with place-based partners. Figure 21 shows how YJS remains co-terminus with both police and probation footprints, while aligning closely to the four children's services and community safety partnerships. The Staff Structure in Appendix A also shows how our Area Teams align with place.

*Sometimes feel safe -  
sometimes not as there are  
people in the community who  
are risky/commit offences. I  
have lots of family around who  
keep me safe*  
(YJS Girl's focus group)

The service redesign aligns with the shift toward restorative and participatory approaches and the importance of supporting children to connect (or reconnect) with their local community. Our new structure aims to empower front-line professionals and locality (area-based) operational managers to develop creative partnerships with the voluntary sector. By harnessing previously untapped human and social capital within communities (such as recruiting more local volunteers and establishing mutually beneficial partnerships with small local charities) we will be better able to help children, and some victims to move on positively beyond an offender (or victim) identity.

The Service Development Hub is functioning well as the central “engine room” for innovation within the service and the new leadership team will ensure quality of practice at a pan-Cheshire level, while empowering (through a distributed leadership model) creative area-based partnerships in the places where children, caregivers and victims live.

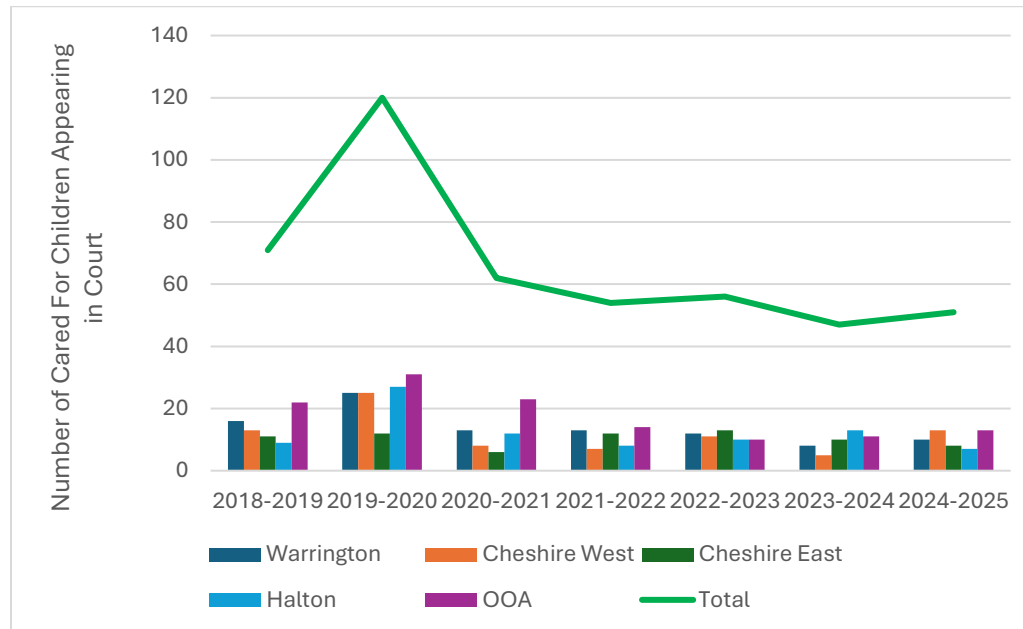
In 2025-2026, Cheshire YJS will refine some of our internal governance processes to ensure we are as productive as possible, with a lean service spanning a large geography and complex network of partners. The transition into CWCC was a major undertaking and the next 12 months will be a transitional period while the service beds in.

The new Business and Performance Manager will be reviewing multiple methods of internal communications to ensure key messages are getting through to dispersed teams in the simplest and most effective way.



## 11. National priority areas

### 11.1 Children from over-represented groups



**Figure 22. Number of cared for children appearing in Cheshire courts by local authority between April 2018-March 2025**

(Data source: Local YJS data)

The data above also includes children placed in Cheshire under the care of local authorities outside the county (out of area [OOA]) who receive the same diversionary options.

Sustained lower volumes since the protocol was produced in early 2020 is good evidence of what can be achieved through collective commitment at scale across YJS and Children's Services.

The high prevalence of our children struggling with health or neurodevelopmental difficulties prompted the Health Sub-group of the YJS Management Board to commission the Public Health Research Institute at Liverpool John Moore University to look at the health needs of children open to YJS (see section Board Membership and Leadership).

An over-represented group of children in the justice system are cared for children and care leavers. The YJS Management Board's response to data revealing disproportionality in this group was to agree a pan-Cheshire protocol. This aims to minimise the criminalisation of cared for children and care leavers and details a '3D' police and partnership response of *"Discretion, Delay and Diversion"*.

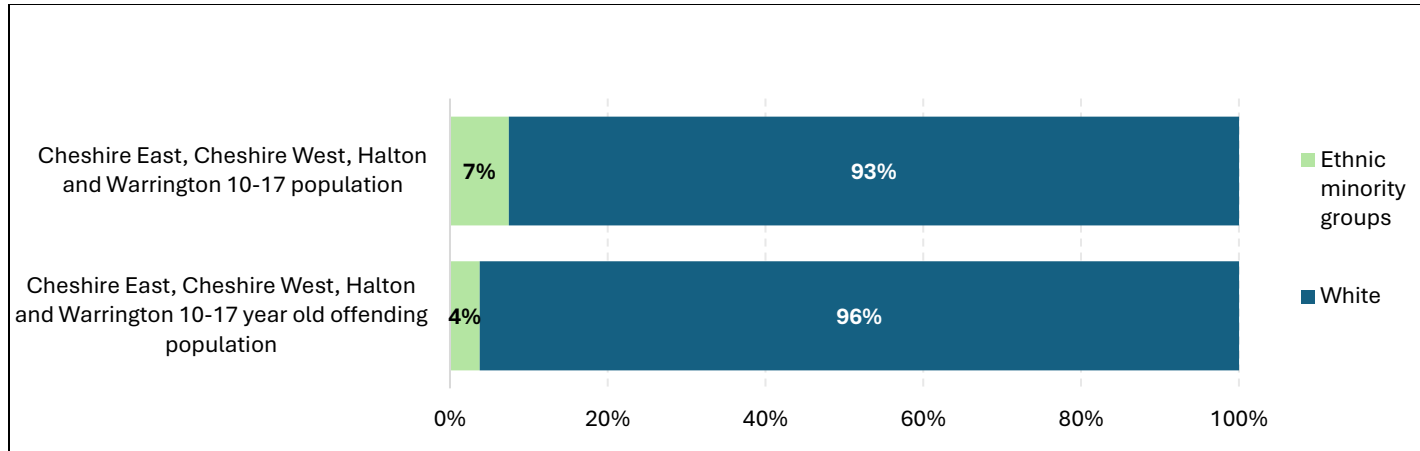
Since the protocol was launched, there has been a clear downward trend of cared for children appearing in court (Figure 22). This shows the impact from a high point in 2019. The numbers of cared for children appearing in court in 2024-2025 has risen very slightly but this is because of a recent change in the counting rules. Children who only became cared for following the offence they had committed have been included in the 2024-2025 figures.

The HNA (1) revealed a stark over-representation of neurodiversity in our children and a direct correlation between four or more adverse childhood experiences, school exclusion and entry to the justice system. Public health consultants on the Health Sub-group have used this analysis in both place-based Joint Strategic Needs Assessments and Special Educational Needs and Disabilities (SEND) specific Strategic Needs Analyses. The HNA revealed there is a correlated trajectory for children who ‘camouflage’ their SEND through disruptive behaviour, experience fixed-term or permanent exclusion and then enter the CJS some time thereafter. In 2025-2026, the Head of Service for YJS will continue to raise awareness at local Health and Wellbeing Boards and be a strong advocate for improved upstream identification and support for children with SEND.

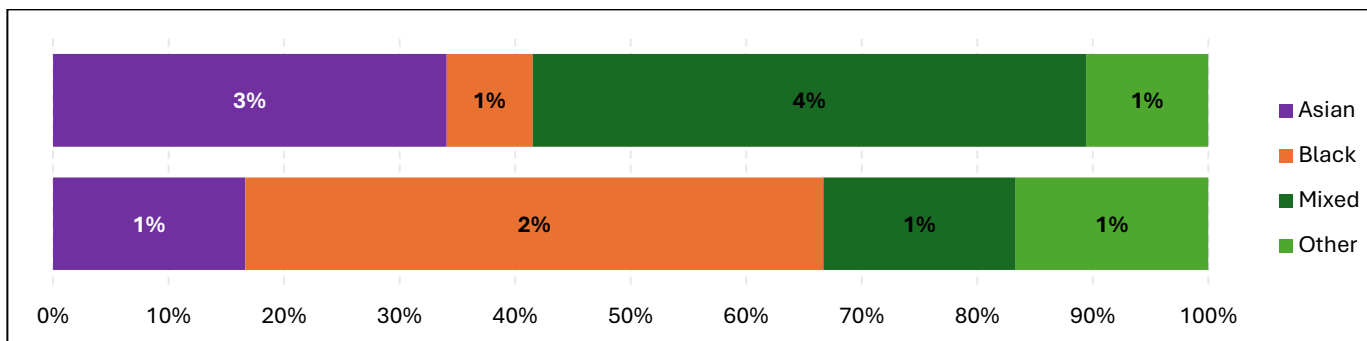
*Karen understands C's SEND. The team have been really understanding and flexible around C's appointments and Karen worked hard to earn his trust. She was approachable and down to earth, and I appreciate the work she is doing with my son*  
(Parent)

The alarming racial disparities in the youth justice system nationally are not replicated in Cheshire. Figures 23 and 24 show the most current data available (offences committed in the year ending March 2024 and drawing from 2021 census data).

Comparing the youth offending population with Cheshire's 10-17-year-old population as a whole, reveals that unlike most areas in the UK, it is actually white children who are very slightly overrepresented and ethnic minority groups slightly underrepresented. However, when separating ethnic minority groups into Black, Asian and Dual Heritage (Figure 24), we see Black children only represent 1% of children in Cheshire but 2% of the offending population. The volumes are too low to be statistically significant but YJS will continue to carefully monitor ethnic disproportionality.



**Figure 23. Ethnic minority groups vs white in the 10-17 population and offending population in Cheshire**  
(Data Source: YJAF)



**Figure 24. Ethnic group proportions in Cheshire in the 10-17 population and offending population in Cheshire**  
(Data source: YJAF)

One potential area of *'invisible over-representation'* in Cheshire that YJS has raised with partners at the CJB's Disproportionality Sub-group, relates to children (or adults) from GRT communities. Anecdotal (and student) research suggests children from these communities are sometimes recorded on police and other criminal justice databases as White British, White Irish or White European.

There is a GRT self-identity classification, but some individuals choose not to identify themselves because of a cultural mistrust of authorities. Therefore, CJS data on arrest, detention, and sentencing in respect of GRT children may not be accurate. The cultural competence of staff is the key aspect here and Cheshire YJS do have an in-service GRT 'champion' who is well linked with specialist advocacy and support services. As well as planned staff training in GRT awareness for 2025-2026, we will ensure our data is as accurate as possible by hearing directly from the child about their identity.

*Jess and Kevin were respectful of our culture (travellers) and that matters*  
(Caregiver)

## 11.2 Policing

A newly appointed Chief Superintendent, with the portfolio of protecting vulnerable people, sits on the Management Board and all four Children's Safeguarding Partnerships. This valuable connectivity provides useful constructive challenge and support, for example, renewed focus on detention of children overnight in police custody (Section 11.8).

Cheshire Constabulary delivered on the recommendations made by HMIP to place fully seconded police officers into YJS and have provided a fourth seconded police officer in 2025, so the service has one officer for each place as part of the multi-disciplinary team. They have participated in both police- and YJS-led training and have improved both the flow and response to intelligence in respect of harm to or from children.

The NPCC guidance on the role of police officers within youth justice was recently updated (6) and YJS and Cheshire Constabulary have reviewed the job descriptions of seconded officers to strengthen the focus on victims and prevention and diversion activity.

Cheshire Constabulary have recently restructured with changes in the Criminal Justice Outcomes Assurance Team and the previous Complex-Youths scheme is no longer operating but police continue to be very active in the local contextual safeguarding response to criminal and sexual exploitation. YJS seconded police officers and place-based police officers routinely share intelligence to help safeguard children and disrupt criminal groups. YJS and Cheshire Constabulary will continue to work closely together to refine and where necessary adapt the new OOCJ joint decision making model to ensure the partnership remains firmly 'Child-First' in both principles and practices.

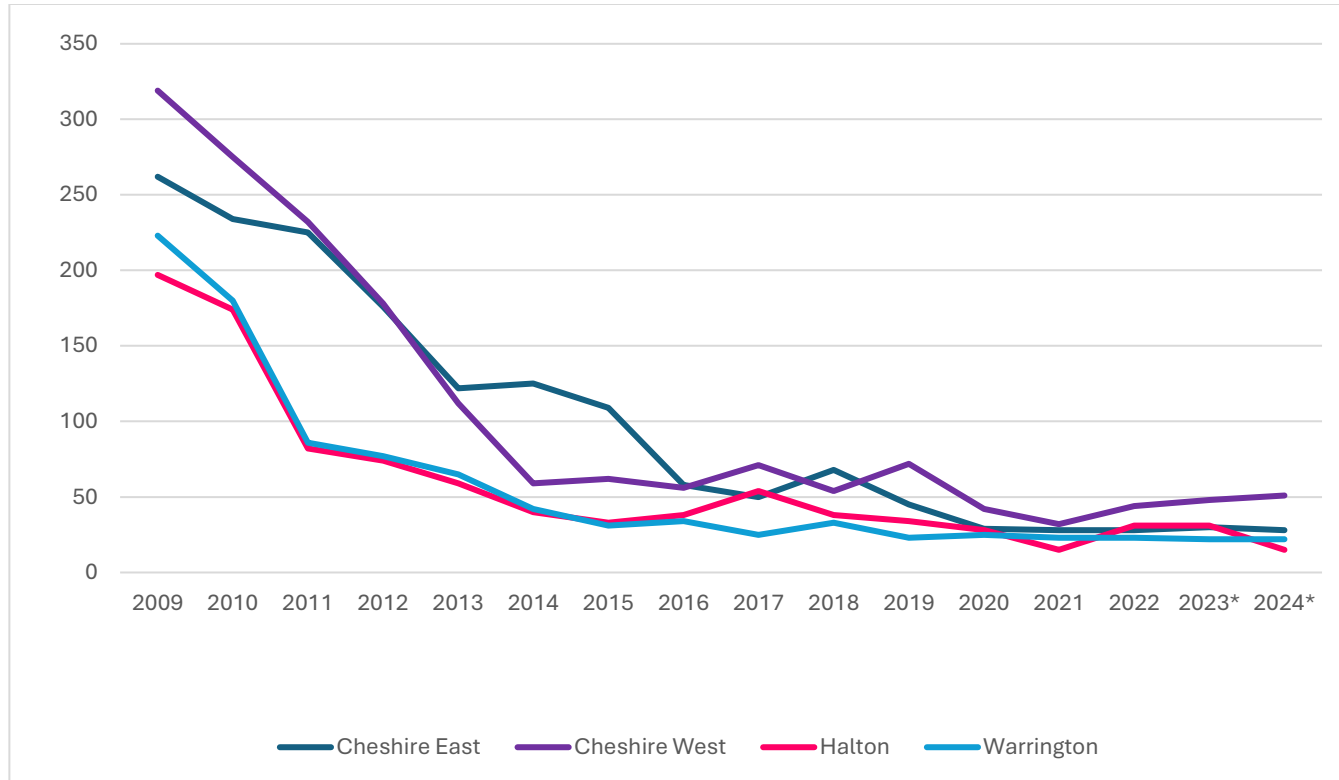
### 11.3 Prevention

Unlike many single local authority youth justice teams, YJS is not part of a wider adolescent and family support service providing a broader prevention offer. The funding and delivery model spanning four authorities means we are more of a purist youth justice service only working with children *after* they have been arrested. Prevention and targeted youth support form part of each local authority's early help offer with some sub-regional services, commissioned by Cheshire OPCC. YJS will seek to align our diversionary work to continue to divert **away from** formal criminal sanctions when it is safe and appropriate to do so and **into prevention** projects entirely outside the CJS. The principles of avoiding 'net widening' and the unintended consequences of 'labelling' or entrenching a criminal self-identity for a child are critically important and are evidenced principles underpinning this strategy and continue to apply across Cheshire.

### 11.4 Diversion

The Head of Service for YJS holds the national portfolio on Diversion for the Association of YOT Managers (AYM) and engages with ministers, national charities and think tanks, such as Centre for Justice Innovation, in roundtables on best diversionary practice. Cheshire will continue an evidence-based approach to diversion that avoids criminalising children for behaviours symptomatic of trauma, abuse, and unmet need. This not only provides better outcomes and improved prospects for children but because children diverted away from receiving formal sanctions are less likely to re-offend, it also results in fewer victims.

Figure 25 shows significant reductions in FTEs since the incremental introduction of Divert across Cheshire. The current operating model began in 2010 in Halton and Warrington and expanded into CWCC and Cheshire East in 2013 and 2015 respectively. FTE numbers have remained consistently low and below regional and national averages since 2016 when Cheshire became a pan-Cheshire shared service, covering the entire policing footprint. This contrasts with many of our geographical and statistical neighbours who, in recent years, have begun to see an increase in FTEs.



**Figure 25. Trends in FTEs in Cheshire by local authority 2009-2024**  
(Data source: PNC except for \*local YJS data)

The helpful 4-year grant investment from the MOJ (Turnaround Programme) ends in March 2026. This investment has enabled YJS to get a little further upstream, while also enabling us to support children and families who needed longer or more intensive support. We will ensure individual children have transition plans in place where continued support beyond the end of the Turnaround programme is necessary and will be working with local authorities to prepare for the implementation of YFPPs, which for Cheshire local authorities will be from April 2027. As part of the serious violence duty, we will work with the OPCC to ensure VCS providers (Remedi and Queensberry Alternative Provision) are targeting help and support to the right children, in the right ways, at the right time.

## 11.5 Education

Our HNA chimes with national research in showing a correlation between educational exclusion and subsequent entry to the CJS. Children who are excluded from school tend to have lived experience of childhood trauma. There is a concerning trajectory (nationally not just in Cheshire) of early childhood exposure to violence and SEND being camouflaged as conduct issues, leading to educational exclusion (for some children). A sub-set of these excluded children then go on to use illicit drugs to self-medicate their trauma and criminal exploitation and criminality follows.

Audits and learning reviews show the powerful protective effect education can have on children who have suffered trauma. Positive self-identity and belonging are critical to helping children achieve desistance from offending, and the significant role education and training providers play in reducing risk through promoting prosocial identity cannot be overstated. Inclusive, trauma-informed-values-led-educational establishments not only manage risk well within their own environment, but also contribute hugely to reducing risk of harm in their communities.

Most children receiving YJS support are beyond school age, so the emphasis is more on helping them into post-16 training or employment, with flexible and bespoke support offers being most suitable for those children who have typically experienced considerable educational disruption. YJS has dedicated Education, Training and Employment specialists for each local authority area to support children directly or indirectly by brokering tailored support in partnership with the respective local offer. As an inclusive-employment lead for post-16, the educational representative on the Board is a good advocate for justice-involved children and provides both challenge and support to managers in the service.

*Amazing help getting O back into education. Allowing O to see that his offence did not have to define him, which has helped him to move forward and start making better choices*  
(Parent)

In 2025-2026, YJS will be registering for the Unit Awards Scheme (15), through the nationally recognised organisation, AQA. Many justice-involved children have struggled in mainstream education and left without qualifications. This scheme will enable YJS practitioners to work collaboratively with children to meaningfully engage and support them in demonstrating skills, experience and knowledge in a wide range of subjects. The Unit Awards Scheme allows students to engage with learning and have their achievements formally recognised with a certificate each time they successfully complete a unit of learning. They can build up a portfolio of certificates to evidence their skills, knowledge and experience. The scheme promotes close collaborative working with children, boosts confidence, increases engagement and improves motivation,

helping them to make progress on their lifelong learning journey, which can be sustained following the end of their involvement with YJS.

For a partnership covering four local authorities, with over 100 high schools and post-16 colleges, the majority of which are academies, YJS and even Directors of Children's Services have limited influence on admissions or exclusions. Promoting inclusion and supporting trauma-informed practice in educational settings is something Children's Trusts have pushed and YJS will continue to advocate for the needs of children. The Head of Service will continue to provide data to inform local joint strategic need analyses and deliver presentations to forums of educational leaders. Education as a protective factor is a stated priority for 2025-2026 in local safeguarding children partnerships.

## 11.6 Restorative approaches and victims

Reviewing victim processes and ensuring the support offer from Cheshire YJS is in line with the new Victims and Prisoners Act is a priority for 2024-2025.

Cheshire YJS will continue to work with victims and deliver the full range of restorative support:

- **Restorative Justice Conferencing** – a structured meeting between the victim and the child
- **Direct Reparation** – repairing any damage caused by the child
- **Shuttle Mediation** – similar to the conferencing model but where both parties do not meet but have someone as the go-between
- **Letter of Apology/explanation** – child is supported to write to the victim
- **Indirect reparation** – work done within the community on placements.

*Janet was very empathetic and excellent to deal with*  
(Victim)

Figure 26 shows our children repainting a Family Centre in Cheshire. The activity repaired damage caused in the local community while also introducing a group of children (and their families) to this centre so they could access the supportive programmes and activities on offer.





Figure 26. Repainting at a family centre in Cheshire

*I am really grateful for the time and patience my worker had for me and really understood me*

(Victim)

### 11.7 Serious violence, exploitation, and contextual safeguarding

This plan draws from and is closely aligned with the Cheshire SVS, which covers a 5-year period from 2024-2029, with annual reviews to reflect on progress against planned outcomes and update delivery plans against emerging trends (2).

YJS contributed data and insights to the production of a Strategic Needs Analysis, to inform the SVS and the Head of Service is a core member of the SV Duty Leadership Group. Cheshire has relatively low levels of SV so does not have the infrastructure of a VRU. Lifting an approach from a large metropolitan city would be unlikely to deliver the same successes here so we have had to think differently about our approach. The Strategic Needs Analysis highlighted Domestic Abuse and Youth Intervention as two clear priority areas for reducing serious violence in Cheshire and revealed the extent to which serious violence affects children and young people. Amongst all forms of serious violence explored, children under 18 appear prominent amongst the victim and offender cohorts for possession of weapon

offences and knife crime incidents. As part of the workforce development plan, YJS Senior Practitioners will be approaching the Ben Kinsella Trust to deliver a session on knife crime awareness to practitioners in 2025-2026.

Understandably, public concern about serious violence increases when people witness or experience it themselves – or when tragic events bring considerable media attention to it. Fear of knife crime and serious youth violence are also amplified by social media, with children being exposed to violent content that can distort their perceptions of safety in public spaces.

Table 4 below shows in 2024, 36 serious violent offences were committed in Cheshire by children (convicted by the courts). This is a slight increase on 2023 but the rate of serious youth violence in Cheshire is 3.4 (per 10,000 children) which is down from the peak of 4.5 in 2022 and is well below the rate for England and Wales as a whole. In fact only the South West of England has had a lower rate of serious youth violence in the last 2 years.

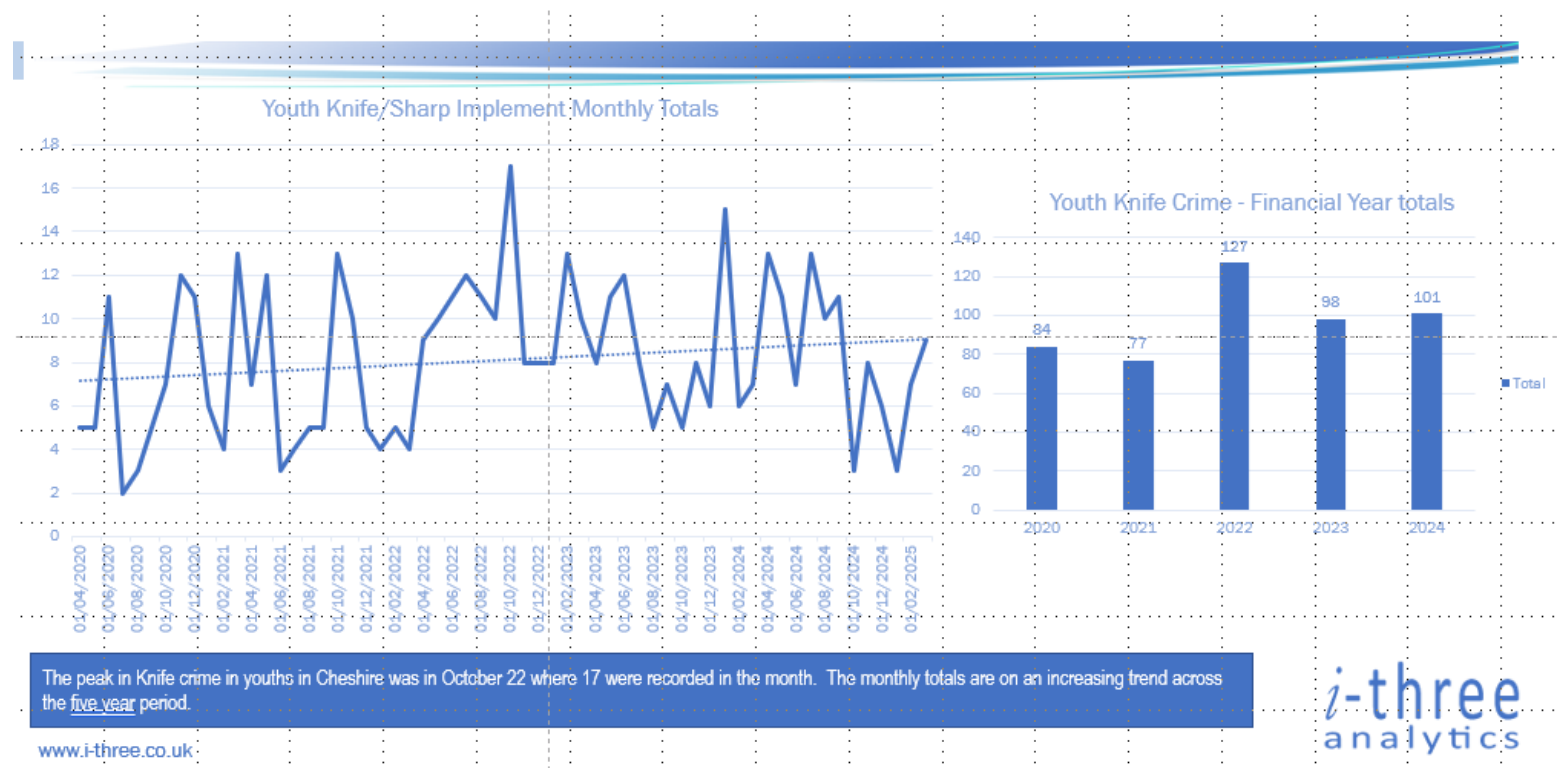
**Table 4. Serious violence offences committed by children in Cheshire compared regionally and nationally**

YJS region	2021		2022		2023		2024	
	Number of SVO	Rate of SVO	Number of SVO	Rate of SVO	Number of SVO	Rate of SVO	Number of SVO	Rate of SVO
<b>Cheshire East, Cheshire West, Halton and Warrington</b>	<b>32</b>	<b>3.2</b>	<b>47</b>	<b>4.5</b>	<b>27</b>	<b>2.6</b>	<b>36</b>	<b>3.4</b>
<b>North West</b>	<b>291</b>	<b>4.1</b>	<b>302</b>	<b>4.2</b>	<b>328</b>	<b>4.5</b>	<b>512</b>	<b>7.2</b>
East Midlands	207	4.6	193	4.2	195	4.1	202	4.2
Eastern	348	5.8	316	5.2	371	5.9	394	6.2
London	1,030	12.4	868	10.4	822	10.0	917	10.8
North East	32	1.3	88	3.6	106	4.2	111	4.8
South East	307	3.8	283	3.6	312	3.9	386	4.8
South West	102	2.0	143	2.8	169	3.3	169	3.3
Wales	60	2.1	64	2.2	94	3.2	104	3.6
West Midlands	315	5.4	386	6.5	322	5.3	382	6.6
Yorkshire	250	4.8	263	5.0	248	4.7	318	5.9
England and Wales	2,942	3.9	2,906	5.2	2,967	5.3	3,495	6.2

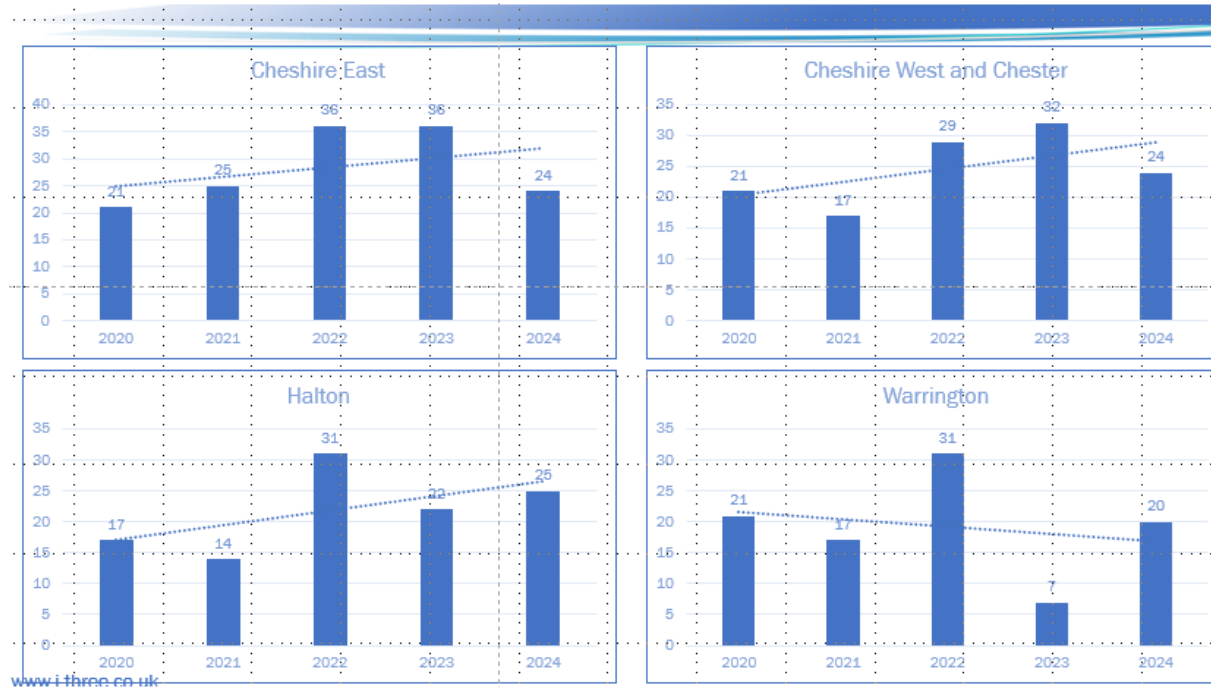
(Data source: SV toolkit in YJAF)

The data in Figure 27 relates to the number of arrests for knife crime across Cheshire and Figure 28 shows this by local authority. It confirms the number of children arrested for carrying or using knives increased slightly in 2022, yet reduced in 2023 and has remained at broadly low levels for the last 5 years.

Apart from two profoundly serious events with tragic outcomes in recent years, Cheshire has not seen the significant and sustained increase in knife crime experienced elsewhere in the country. It should also be noted that given the data starts in 2020 when the UK went into lockdown all recorded offences were artificially low for both 2020 and 2021, so if 2022 was taken as the starting point, then knife crime offences would be trending downwards in all areas of Cheshire and not just Warrington (Figure 28).



**Figure 27. Youth knife/sharp implement crime trend for Cheshire 2020 - 2025**  
(Data source: Arc i-three analytics [Cheshire OPCC])



**Figure 28. Youth knife/sharp implement crime trend for Cheshire by local authority 2020 – 2025**  
(Data source: Arc i-three analytics [Cheshire OPCC])

Contextual safeguarding partnerships are established at place and the YJS is an integral partner of these arrangements in all four areas. Good partnership and intelligence sharing with police (including cross border with Merseyside in particular, which is the major ‘exporter’ of county lines into Cheshire) ensures the National Referral Mechanism is applied appropriately. There have been several cross-force-operational examples of sensitively managed police investigations to tackle organised crime and protect Cheshire children, who have been exploited to supply drugs for high tier Merseyside organised crime groups.

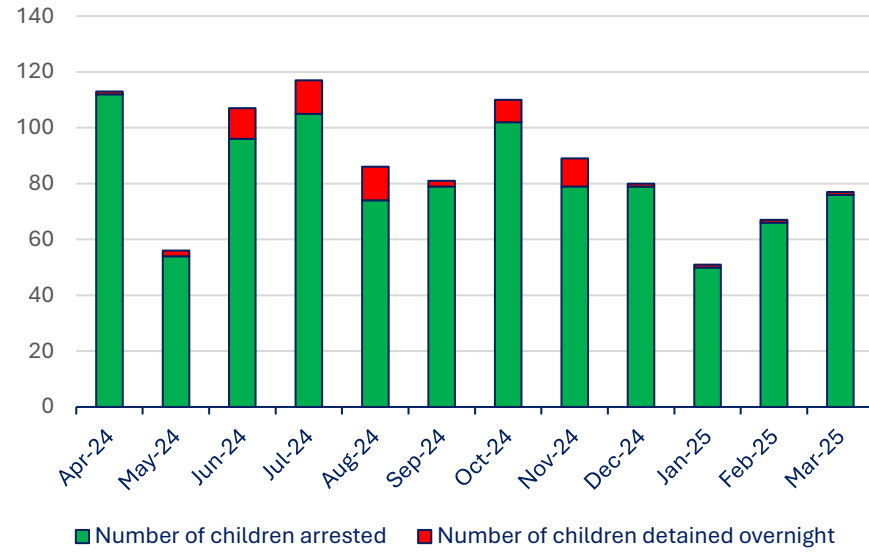
YJS managers will continue to contribute to the design and delivery of multi-agency, contextual safeguarding training at place, particularly in relation to child criminal exploitation. YJS also participates in safeguarding audits, rapid reviews, and independently-chaired learning reviews, when necessary.

The comprehensive needs analysis that informed the Cheshire SVS (2) showed 73% of youth justice children had convictions for violent offences, but also revealed a similar proportion of these children had themselves experienced violent victimisation *prior* to the onset of their own offending. Violence breeds violence and needs to be ‘treated’ in a similar way to transmittable diseases, which is why the Cheshire SVS has adopted a public health approach.

## 11.8 Detention in police custody

Figure 29 shows the number of children detained overnight in Cheshire, is extremely low and equates to five children on average per month across the three custody suites or 6% of the total number of children arrested by Cheshire police over a 12 month period.

The low and unpredictable demand on local authorities for emergency Police and Criminal Evidence (PACE) beds means they have not always been available when required, so occasionally children are detained in police custody as a last resort. Overnight detentions in custody continues to be a standing agenda item for scrutiny at the YJS Management Board and as a partnership, we are taking decisive action.



**Figure 29. Numbers of children detained overnight in Cheshire compared to number of arrests from April 2024-March 2025**  
(Data source: Cheshire Constabulary)

From 2024, Directors of Children's Services have received a notification every time a child from their area is detained overnight due to an alternative PACE bed not being available. The police representative on the YJS Management Board is also the senior accountable officer for police on all four Children's Safeguarding Partnerships and has formally raised the paucity of PACE beds at executive partnership Boards. Cheshire and Merseyside Commissioners have been exploring shared PACE beds as part of the Commissioning Workstreams for both fostering and residential as there is a lack of sufficiency in both areas. Consideration is being given to residential and other safe spaces, but foster care is the preferred option. A collective solution could be viable due to the low numbers of children detained for each individual local authority. A commissioning manager in St Helens Council is leading this workstream on behalf of the Directors of Children's Services across Cheshire and Merseyside.

## 11.9 Remands

In 2024-2025, there were only six children in total across Cheshire remanded to Youth Detention Accommodation (Figure 30). All remands were for serious offences, where a community alternative to remand was not viable, due either to the seriousness of the offence and/or where the local authority were unable to source alternative accommodation on the day.



**Figure 30. Children remanded into youth detention by local authority in 2024-2025 (right) compared to 2023-2024 (left)**  
(Data source: Local YJS)

Cheshire YJS retains the confidence of the courts by ensuring children are assessed promptly for robust packages of bail support as an alternative to remand. We have a proactive partnership with local children's social care and policing regarding remands into local authority care, but, as mentioned in Section 11.8, options are constrained by the paucity of safe, suitable accommodation where risk (to victim or wider public) and the child's own complex needs can be adequately managed. Placement sufficiency for local authorities is a national issue that the Association of Directors of Children's Services and others are very vocal on because accommodation for children facing serious criminal charges is an added complexity (and cost).

Through the current national framework for remands, the MOJ provides local authorities with a small financial contribution toward the costs of remands (Table 5) with the allocation based on historical bed night data. A consultation on the funding of remands to youth detention accommodation was published in early 2024 and Cheshire YJS responded on behalf of the partnership, highlighting Cheshire's low remand number. Table 4 shows the uncontrollable costs incurred by Cheshire local authorities (particularly for Halton in 2024) because local authorities have no control over length of time from initial charge through to conclusion of trial. A fundamental review and fairer funding formula for remands is still being worked on by the MOJ consultation with stakeholders such as the Association of Directors of Children's Services and AYM.

**Table 5. Remand allocation from the MoJ for Cheshire East, Cheshire West, Halton and Warrington 2024-2025**

Local Authority RIC	2024/25 Budget	2024/25 Actual Spend	2024/25 Remaining/Deficit
Cheshire East	£121,297	£55,272	£66,025
Cheshire West	£42,123	£0	£42,123
Halton	£1,883	£124,880	-£122,997
Warrington	£0	£0	£0
<b>Total for YJS</b>	<b>£165,303</b>	<b>£195,038</b>	<b>-£14,849</b>

(Data source: Local YJS)

Table 6 shows the number of bed nights of children remanded into youth detention accommodation.

**Table 6. Number of custody bed nights 2024/2025**

Local Authority	2024/25 Bed Nights
Cheshire East	168
Cheshire West	0
Halton	159
Warrington	0
<b>Total Cheshire wide for YJS</b>	<b>327</b>

(Data source: YJS local data)

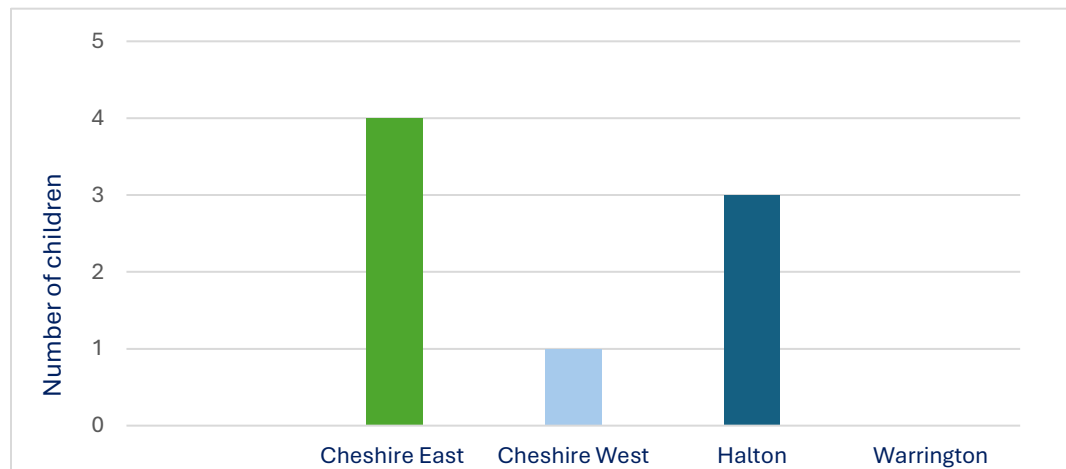


### 11.10 Use of custody and constructive resettlement

The number of children in Cheshire who receive a custodial sentence is low, with typically fewer than 10 children across the whole of the county serving custodial sentences at any one time. Use of custody is rightly reserved for those children who have committed serious crimes, usually for serious violent or sexual offences.

Figure 31 shows custodial sentences were imposed on eight children from Cheshire in 2024, comprising four Cheshire East children, three Halton children and one CWCC child. In 2024-2025, no Warrington children were sentenced to custody.

All children released from custody before reaching aged 18 years have individual resettlement plans in line with the principles of constructive resettlement. The low number in Cheshire means we do not have a specialist resettlement team but our children do benefit from the continuity of multi-disciplinary support (YJS worker plus health and education professionals) that follows them from court, through their time in custody and after release. Custody and resettlement will be one of the thematic audits undertaken in 2025-2026 and because the volume is low, it means YJS will actually be doing a deep dive into the casework of every child sentenced to custody in Cheshire in the last 2 years.



**Figure 31. Number of children given custodial sentences in 2024-2025 by local authority**  
(Data source: Local YJS)



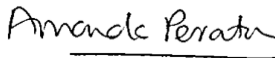

### 11.11 Working with families

YJS will be working with partners at place as the Families First programme is embedded. Frontline practitioners are encouraged to adopt a whole family approach in their work. YJS professionals work collaboratively with Early Help, Social Care and other locality-based services to ensure that families have access to help and support where this is needed.

As a service, we are committed to promoting this approach within practice and welcome the new Families First initiative and the opportunities to strengthen integrated services for children and families in the coming years.

Parents and Caregivers are also a key strand in our work to develop participation.

*You really understood my son's challenges. Desire to help improve the behaviours for my son to provide a better home life balance and to influence positive changes*  
(Parent)

Sign off, submission and approval		
<b>Amanda Perraton</b> Chair of YJS Board Executive Director for Children and Families Cheshire West and Chester Council		<b>27 June 2025</b>
<b>Tom Dooks</b> YJS Head of Service		<b>27 June 2025</b>

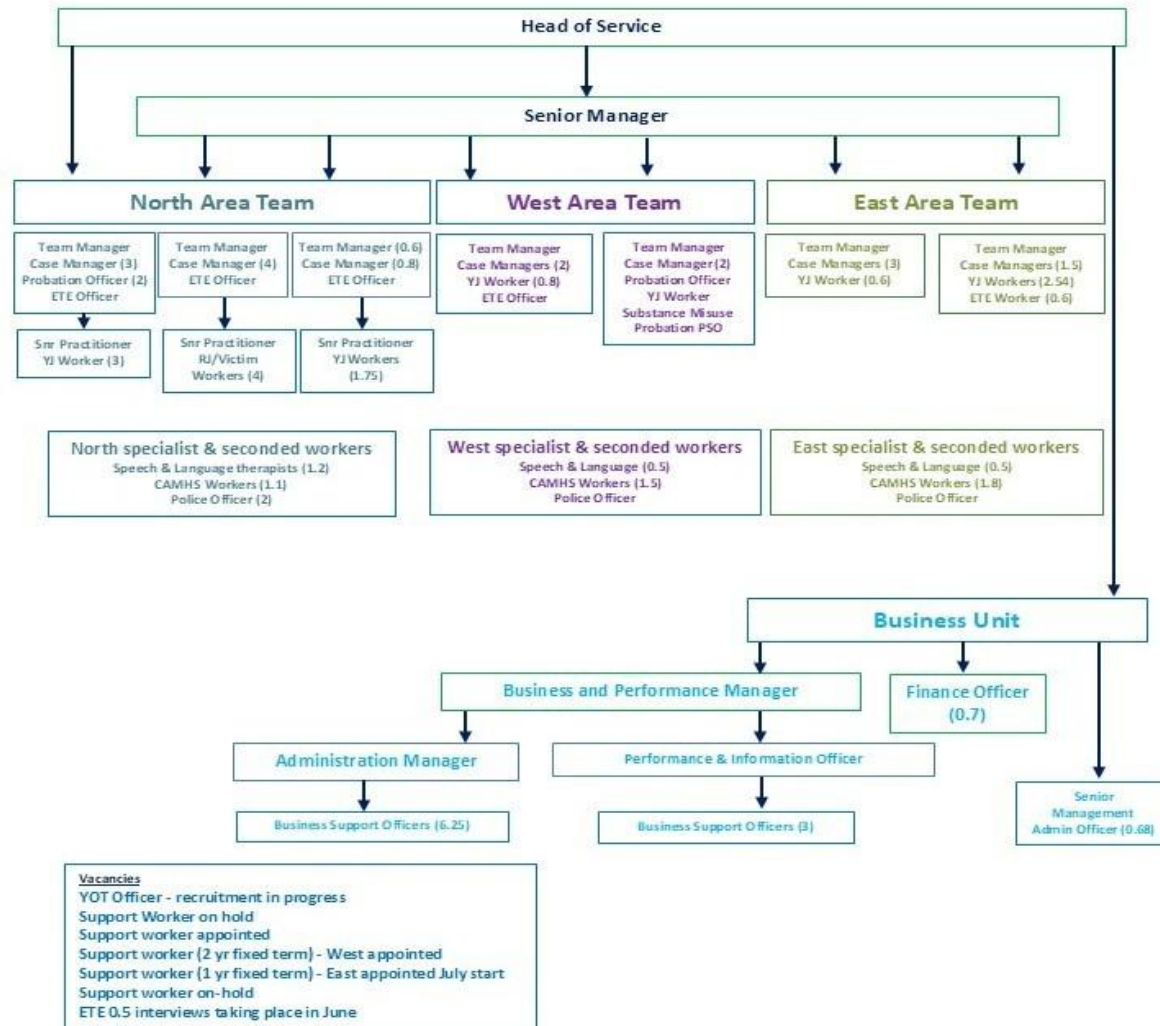
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## Appendices

### Appendix A. YJS organisational structure



Appendix B: Staffing of the YJS by sex and ethnicity; No. of individual people

Ethnicity	Managers Strategic		Managers Operational		Practitioners		Administrative		Referral Order Panel Volunteer		Total	
	M	F	M	F	M	F	M	F	M	F	M	F
Asian											0	0
Black						1					0	1
Mixed								1			0	1
White	1	1	1	6	9	44		15	9	32	20	98
Any other ethnic group											0	0
Not known											0	0
Total	1	1	1	6	9	45	0	16	9	32	20	100





**Cheshire  
Constabulary**



**Dan Price**  
Police & Crime  
Commissioner  
for Cheshire

**Probation  
Service**



**Cheshire and Merseyside**



**Cheshire West  
and Chester**



**WARRINGTON**  
Borough Council

**REPORT TO:** Executive Board

**DATE:** 11 September 2025

**REPORTING OFFICER:** Executive Director, Adults

**PORTFOLIO:** Adult Social Care

**SUBJECT:** Halton Borough Council Adult Social Care - Care Quality Commission (CQC) Assessment Outcome

**WARD(S):** Borough-wide

### 1.0 PURPOSE OF THE REPORT

- 1.1 To provide the Board with details of the outcome of Halton Borough Council's Adult Social Care CQC Assessment.

### 2.0 RECOMMENDATION: That the Board:-

- i) **note the contents of the report and associated appendices and presentation.**

### 3.0 SUPPORTING INFORMATION

- 3.1 Halton's CQC Assessment process officially began back in October 2024 when CQC informed us of the initiation of the assurance process, which involved the submission of our Self-Assessment and Information Return. This assessment process culminated in an onsite CQC visit, which took place 17th – 19th March 2025.
- 3.2 This onsite visit consisted of individual interviews with a number of officers and Members, along with group discussions with representatives from Adult Social Care Teams, staff and manager drop-in sessions and a number of individuals with lived experience. Outside of the onsite visit, CQC also had discussions with our partners and undertook a review of a number of case files and spoke to individuals in receipt of services.
- 3.3 The final report was published on 4<sup>th</sup> July 2025 (**Appendix 1**) and Halton's Adult Social Care Services have been rated overall as **Good**. This rating has been informed by judgements made from across a number of themes and quality statements, such as working with people and providing support.
- 3.4 As with any assessment, there will be areas where we need to make improvements and these will be addressed, if they haven't already been and details can be found in the Improvement Plan that has been developed (**Appendix 2**), however having been rated as 'Good' is an achievement we should all be very proud of and is testament to the hard work and dedication of our staff and partners in delivering the best outcomes for the people of Halton.

#### **4.0 POLICY IMPLICATIONS**

- 4.1 There are no policy implications arising directly from the CQC Assessment. Any policy implications arising from issues included within the Assessment and associated Improvement Plan will have been/will be identified and addressed via the relevant reporting process.

#### **5.0 OTHER/FINANCIAL IMPLICATIONS**

- 5.1 As with the policy implications, there are no other implications arising directly from the assessment. Any finance implications arising from issues included within the Assessment and associated Improvement Plan will have been/will be identified and addressed via the relevant reporting process.

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

##### **6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence**

The CQC Assessment and associated Improvement Plan is directly linked to this priority.

##### **6.2 Building a Strong, Sustainable Local Economy**

Not Applicable.

##### **6.3 Supporting Children, Young People and Families**

Not Applicable.

##### **6.4 Tackling Inequality and Helping Those Who Are Most In Need**

Not Applicable.

##### **6.5 Working Towards a Greener Future**

Not Applicable.

##### **6.6 Valuing and Appreciating Halton and Our Community**

Not Applicable.

#### **7.0 RISK ANALYSIS**

- 7.1 None associated with this report.

#### **8.0 EQUALITY AND DIVERSITY ISSUES**

- 8.1 None associated with this report.

#### **9.0 CLIMATE CHANGE IMPLICATIONS**

- 9.1 There are no environmental or climate implications as a result of this report.

#### **10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

- 10.1 None under the meaning of the Act.



# Halton Borough Council: local authority assessment

[How we assess local authorities](#)

Assessment published: 4 July 2025

## About Halton Borough Council

### Demographics

Halton is a unitary authority in the county of Cheshire. Since 2014 Halton has been one of the six local authorities that make up the Liverpool City Region Combined Authority. Halton straddles the river Mersey and is made up of the twin towns of Widnes and Runcorn together with the villages of Hale, Moore, Daresbury and Preston Brook.

Halton is home to nearly 129,000 residents and the population size has increased by 2%, from around 125,700 in 2011 to 128,200 in 2021. This is lower than the overall increase for England (6.6%). The wider trend shows that the population is ageing, as the number of residents who are 65 years and over has increased by 38.5% since 2011.

Less than 5% of Halton's population is ethnically diverse, with the majority being White (96.50%) and smaller communities identifying as Mixed or multiple ethnicities (1.39%), Asian or Asian British (1.12%), Black, Black British, Caribbean, or African (0.40%), and other ethnicities (0.59%). Halton has an Index of Multiple Deprivation (IMD) score of 8, placing it in decile 8. A local authority with a decile of 1 means it is in the least deprived group (lowest 10%), while a local authority with a decile of 10 means it is in the most deprived group (highest 10%).

Halton is part of the Cheshire and Merseyside Integrated Care System (ICS), which includes Liverpool, Wirral, Knowsley, Sefton, Warrington, Cheshire East, St Helens and Cheshire West, essentially encompassing the wider Merseyside region.

Halton Borough Council has had a Labour majority since its creation in 1974 with 50 of the 54 councillors representing the Labour party.

### Financial facts

- The local authority estimated that in 2023/24, its total budget would be **£233,004,000**. Its actual spend for that year was **£333,991,000**, which was **£100,987,000** more than estimated.
- The local authority estimated that it would spend **£63,036,000** of its total budget on adult social care in 2023/24. Its actual spend for that year was **£68,980,000**, which was **£5,944,000** more than estimated.
- In 2023/2024, **20.65%** of the budget was spent on adult social care.
- The local authority has raised the full adult social care precept for 2023/24, with a value of **2%**. Please note that the amount raised through adult social care precept varies from local authority to local authority.

- Approximately **2710** people were accessing long-term ASC support, and approximately **450** people were accessing short-term adult social care support in 2023/24. Local Authorities spend money on a range of adult social care services, including supporting individuals. No two care packages are the same and vary significantly in their intensity, duration, and cost.

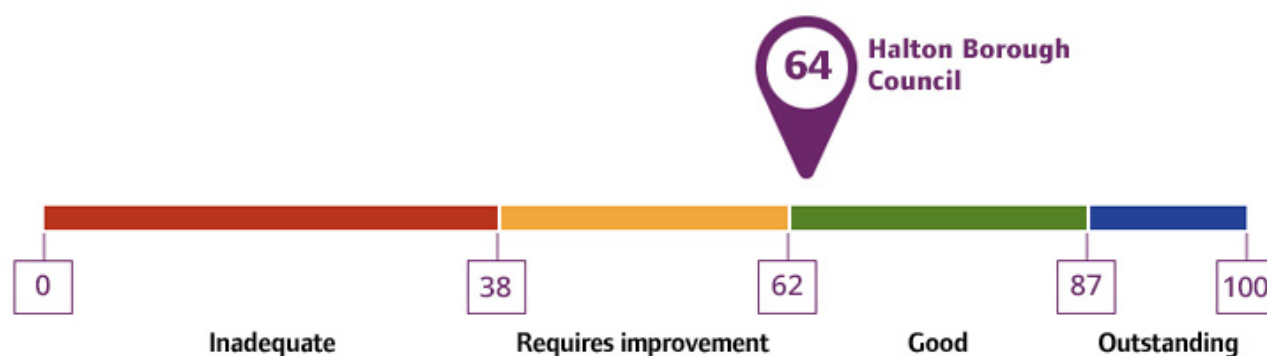
This data is reproduced at the request of the Department of Health and Social Care. It has not been factored into our assessment and is presented for information purposes only.

# Overall summary

## Local authority rating and score

### Halton Borough Council

Good



## Quality statement scores

### Assessing needs

Score: 2

### Supporting people to lead healthier lives

Score: 3

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## Equity in experience and outcomes

Score: 3

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## Care provision, integration and continuity

Score: 2

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## Partnerships and communities

Score: 2

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## Safe pathways, systems and transitions

Score: 3

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## Safeguarding

Score: 3

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## Governance, management and sustainability

Score: 2

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## Learning, improvement and innovation

Score: 3

---

## Summary of people's experiences

People received assessments from teams trained in how to meet their needs and waiting times for assessment had reduced over the previous year. People sometimes had to wait for an assessment or review of their needs, but staff took a risk-based approach and people with urgent needs were responded to promptly. People told us examples of how staff had supported them to achieve their outcomes and they found staff to be knowledgeable and compassionate. However, some people also told us about changes in staff which led to them having to tell their story multiple times.

In relation to home care services, people had a limited choice of service provider due to there being only one main home care provider contracted by the local authority. At the time of our assessment, the local authority was putting a new contractual framework in place which included more home care providers and increased people's options. National data from the Adult Social Care Survey (2023-2024) showed 57.02% people felt they had a choice over services which was significantly worse than the England average (70.28%).

People had positive experiences when interacting with the Prevention and Wellbeing service at the local authority's 'front door' and although there were waiting list for occupational therapy assessments, when people received this, they were supported to maintain their independence. The local authority had completed recruitment to occupational therapist posts and the waiting list for assessment had reduced over the previous 18 months.

People told us their experience of transitioning from children's to adults services was mostly positive however a partner told us some families did not know how to access the transitions service when they were not automatically referred, and they did not feel information was readily available outside of the transitions team.

Feedback from unpaid carers was mostly positive, with carers telling us they had received assessments from the local authority and were updated regularly with information which could support them in their caring role such as caring groups. Carers told us they knew who to contact in the local authority if they needed to do so. However, some unpaid carers also told us they did not have emergency plans in place should they be unable to continue in their caring role.

People told us work on co-production was in its infancy, with some people having been consulted for strategies such as the Carer's Strategy, and other people telling us they had not been made aware of any consultations or co-production work.

## Summary of strengths, areas for development and next steps

We saw good support for adult social care at all levels in the local authority in the context of challenging financial conditions and increasing demand for adult social care. There was strong leadership from the Chief Executive and Executive Director for Adult Services and a split between the children and adult directorate had increased the prominence of adult social care at senior leadership level. The local authority was moving from a culture of providing high support for people towards a strengths-based model and there was more to do to fully embed this across all services. Some leaders told us they needed to move on to a prevention-based focus at all levels and move on from a culture of wanting to over support people to eliminate risks in their lives

The local authority had redesigned their 'front door' to adult social care to create the Prevention and Wellbeing Service which was supporting a co-ordinated service from referral through to the completion of an appropriate level of assessment. There were clear pathways in place for care assessments which were undertaken by the teams who also undertook longer-term work with people, such as the Complex Care teams, the mental health team and the transitions team.

Staff were completing assessments in a strengths-based way and the local authority had verified this through a series of case and practice audits. There was a corporate Transformation Programme in place which had elements of work for adult social care which had a specific team and plan to deliver this. The transformation in adult social care was focussed on working with people with a learning disability to redesign services to function in a more strengths-based way such as moving on from long-term day services. This was in progress and there was limited feedback as to the programme's effectiveness and the wider impact for people at the time of our assessment.

Safeguarding processes ensured people's ongoing safety and there had been a multi-agency risk approach introduced to support people where concerns about risks present did not meet the threshold of a safeguarding enquiry. The local authority had completed work to ensure staff were making safeguarding personal, as per national guidance.

There were mixed processes in place for people moving from children's to adult services with some people having an assessment from aged 14, and others transitioning at 18 where they had mental health needs. This meant some people did not receive a planned transition in line with best practice and were assessed only once they had reached adulthood. There was a dedicated transitions team in place who worked with people from the age of 16 where they had a learning disability.

The local authority had limited care provision within the area although there were steps being taken to increase the choice of home care provision for people with a new commissioning framework due to commence after our assessment. Staff told us people often had to move out of the area for specialist residential care such as dementia plus care, although there was good availability of general residential and nursing care homes within the local authority area. People did not usually have to wait for care as staff had good links with care homes in neighbouring authorities to ensure the timeliness of care. The local authority was working with its care providers to improve the quality of care people received with a robust quality assurance process in place.

The local authority had processes in place to support people being discharged from hospital. Partners told us there was currently an average of 22% of patients within hospitals who have no criteria to reside, however there was a partnership approach to working with the local authority to address any delays to a person's discharge. There were new processes being trailed during our assessment, such as daily board rounds to see if these led to improvements. The local authority had worked with health partners to set up a jointly funded intermediate care and reablement service and staff told us this was supporting people to regain their independence after a period of hospital admission. Short and Long Term Support (2023-2024) national data said 96.43% people aged 65+ remained at home 91 days after discharge from hospital into reablement or rehab which was better than the England average (83.70%).

The local authority had undertaken some work to hear the voices of seldom heard people within the community. They had liaison officers in place who were building relationships with the Gypsy, Traveller and Roma community and providing support such as benefits and housing advice. The local authority acknowledged there was more work to do to ensure equity in outcomes for all people in the borough.

The local authority used feedback from people's experiences to identify and address areas for improvement. For example, a Care Home Development Group was looking at ways to improve the quality of provision and the experiences of people in residential care settings; and there was an Occupational Therapy workplan focussed on improving the amount of feedback received from people to further enable development of the service.

The local authority had a strong culture of learning and development and using research to inform their decision making. Staff were enthusiastic about their work and passionate about providing good care and support for people in Halton. Staff told us they were well-supported and there was a 'grow your own' approach which was clearly embedded throughout the local authority. There were clear career pathways and development opportunities in place.

## Theme 1: How Halton Borough Council works with people

This theme includes these quality statements:

- Assessing needs
- Supporting people to live healthier lives
- Equity in experience and outcomes

We may not always review all quality statements during every assessment.



# Assessing needs

## Score: 2

2 - Evidence shows some shortfalls

### What people expect

I have care and support that is coordinated, and everyone works well together and with me.

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

### The local authority commitment

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

### Key findings for this quality statement

#### Assessment, care planning and review arrangements

The local authority provided routes for people to access care and support services with self-referral options by phone, online or through a professional referral. Referrals were received into the 'front door' which had been redesigned into a new Prevention and Wellbeing Service (PWS). The PWS had been in place for a year at the time of our assessment and local authority data told us there had been a 47% reduction in people contacting the front door going on to need long-term services following the introduction of the PWS. This was a multi-disciplinary team consisting of social workers, community care workers, occupational therapists and wellbeing officers.

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There was a separate referral process to refer into the mental health social work team, although referrals were also accepted through the PWS and transferred to the mental health team where a person had a mental health diagnosis. Professionals could also refer directly to the Halton Intermediate Care and Frailty Service (HICaFS) by phone or by email and partners told us this was effective.

Initial Care Act assessments were completed by the PWS who triaged referrals and held twice-daily huddles to discuss work and ensure fast and effective referrals to the appropriate service. Interim care planning arrangements were made for people within the PWS including a first review of this support after 6-8 weeks. If people required longer-term support, they had a review or reassessment from the Complex Case Teams. There were processes to transfer work between internal local authority teams with any disputes about the responsible team being discussed by managers.

People also received Care Act assessments from mental health social workers who were co-located with secondary mental health teams. There was a dedicated Transitions team who worked with young people from the age of 16 to 25 to support them in transitioning from children's to adult services using a named worker approach where a person maintained the same allocated worker to the age of 25. The Complex Care team and mental health teams did not use a named worker approach, and some people told us they could have multiple social workers which resulted in them telling their story numerous times.

Staff told us they were well trained and were able to carry out Care Act assessments for people with varying needs and care plans we reviewed evidenced this. Where staff had specialist knowledge they worked with people with those needs, despite the Complex Care teams being generic in nature. People told us their social workers were knowledgeable and skilled within their roles.

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There were Visual Impairment Rehabilitation Workers who held specialist qualifications and were based within the Complex Care teams. The rehabilitation workers worked with people with sight loss to support them to maintain their independence. There was a Positive Behaviour Service who worked with people with learning disabilities and autistic people where their placement may be at risk of breakdown. This was a dedicated team of behaviour analysts and practitioners who specialised in understanding communication and behaviour, with additional training to effectively support people in this area. Staff told us the Positive Behaviour Service assess a person's communication and needs and work with them on a long-term basis to enable people to live more fulfilling lives. We heard examples of where people had restrictions on them removed following the team's assessment and support.

People told us their assessment was person-centred, focusing on their wellbeing, although some people also told us they felt staff were rushed and ran out of time when speaking to them, which meant their experiences may not be fully understood. Staff described to us how they worked in a person-centred way to enable a person to make their needs and wishes clear through their Care Act assessment and support planning. Strengths based practice had been a focus for the local authority, and they had arranged a programme of training from an external provider for staff to support their knowledge. A leader told us they had been undertaking targeted reviews of care plans, and these evidenced the strength-based culture within the local authority had been well-embedded. We reviewed care plans and assessments which were person-centred and highlighted a person's desired outcomes.

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People's needs were reviewed to check they continued to be met. Staff in frontline teams completed first and annual reviews with people, and a reviewing team had been set up to provide additional support in completing annual reviews due to the local authority identifying they were not successfully completing all reviews annually with the current staff resource. This had made a significant impact on the local authority's ability to complete a review of people's care plans at least annually and data from Long and Short Term Support 2023-24 (SALTS) showed 94.88% people had received a review of their support which was significantly better than the England average (57.77%). Where people's needs had changed, staff carried out a reassessment and made changes to their care plans. Data from the Adult Social Care Survey (2023-2024) showed 64.60% people were satisfied with their care and support which was similar to the England average (62.72%).

## Timeliness of assessments, care planning and reviews

The local authority provided data which showed 25 people were waiting for a Care Act assessment in February 2025. This was a reduction from 53 people who were waiting in October 2024. There were 282 people waiting for an annual review as of February 2025 according to data provided by the local authority. The local authority told us the maximum waiting time for a review had reduced from 602 days in October 2024 to 138 days in February 2025.

The local authority had adopted a 'waiting well' framework to ensure waiting lists were prioritised and allocated effectively. People waiting for assessment or review were RAG (red, amber, green) rated to inform the urgency of allocation. There were dedicated duty workers in place daily within the teams who gathered information to inform priority. Staff told us wellbeing packs were sent to people waiting for an assessment to give them information and contact numbers. Staff also told us people were contacted regularly to see if anything had changed and to monitor risk.

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Providers and partners told us when a person had an allocated worker from the local authority, they received a timely response, however they could find people had a long wait for a re-assessment or review of their needs. Providers told us they understood people were allocated to a worker based on the urgency of their need and where a person's needs had changed significantly providers told us a person received a quicker response from the local authority.

There were no waits for an assessment for hospital discharge and the average time between allocation to a worker and discharge taking place was 7 days according to data provided by the local authority (February 2025). The local authority told us the 7 days from allocation to discharge could include where a person required further medical intervention, engagement with families for best interest decisions and sourcing placements for discharge. Staff told us Care Act assessments for people in hospital started within 24 hours of receiving a referral from the hospital ward and they would begin to collate information and meet with the person and their family. This process was mirrored for people in mental health hospitals where social workers were informed about admissions and attended the initial assessment meeting on the ward, they would then attend multi-disciplinary meetings to understand a person's readiness for discharge and commence assessment if required.

Local authority data showed access to occupational therapy assessment was improving and waiting lists had reduced from 409 in July 2023 to 122 in February 2025. The local authority attributed this to the set-up of the Prevention and Wellbeing Service (PWS) and the appointment of a Principal Occupational Therapist to oversee this. The PWS had implemented a screening process via dedicated duty workers to determine the priority of a referral and staff told us this had meant people were seen more quickly and risk identified sooner. There were twice daily huddles to discuss referrals and ensure a person was seen by the appropriate discipline within PWS. We saw plans which were in progress to continue the improvement in reducing waiting times for people for Occupational Therapy assessments through new services such as GP drop-in assessment spaces.

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## Assessment and care planning for unpaid carers, child's carers and child carers

The needs of unpaid carers were recognised as distinct from the person with care needs. Staff told us they would discuss a carer's assessment with unpaid carers and undertake this if the carer consented, they would also undertake annual reviews of carers assessments if this was due according to the recording system. There were also dedicated carer's assessors within the Prevention and Wellbeing Service (PWS) who completed a carers assessment if there was not an allocated social worker. Staff told us carers had the option for their assessment to be completed by the allocated worker or by an independent assessor if this was a person's preference.

People gave us mixed feedback on the effectiveness of carer's assessments as they felt the carer's assessment had a positive impact on their health and wellbeing, but people also told us they did not have a contingency plan in case of being unable to continue in their caring role. Data from the Survey of Adult Carers (2023-2024) in England showed 44.00% carers were satisfied with social services which was better than the England average of 36.83%.

Local authority data showed 6 people were waiting for a carer's assessment with a maximum wait time of 8 days from contact to allocation (February 2025). The median wait time for a carer's assessment was 0 days. Unpaid carers told us they did not necessarily have an allocated worker at the local authority however they knew how to contact the local authority and would do so if needed. Partners told us carers had fed back they could wait a long time on the phone to the local authority to request a carer's assessment and the local authority had implemented a drop-in at the partner offices so carers could access help from the local authority directly during these sessions.

## Help for people to meet their non-eligible care and support needs

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People were given help, advice and information about how to access services, facilities and other agencies for help with non-eligible care and support needs. The Prevention and Wellbeing Service provided advice and signposting to broader wellbeing services before they needed statutory care. Staff told us they used a person-centred approach to identify services a person could access, such as reablement and Voluntary, Community and Faith Sector Enterprises (VCFSE), without requiring a Care Act assessment.

The local authority had commissioned services from partners to support people with their non-eligible needs when accessing assistance would support them to maintain their independence at home, such as social prescribing, community connectors and welfare and benefits advice. There was a Prevention Panel where staff could discuss with colleagues and management to identify ways to support people with their non-eligible needs and staff told us this was a useful resource in learning about services to support people staff may not have known about. Staff also told us the online recording system prompted referrals which could be made within the system to services to support people with their non-eligible needs.

## Eligibility decisions for care and support

The local authority's framework for eligibility for care and support was transparent, clear and consistently applied. The local authority had the Care Act eligibility criteria clearly displayed on their website for people to read. We saw processes and guidance which were clear for staff to follow when applying eligibility criteria. The local authority had not had any appeals against eligibility decisions made within the previous 12 months (February 2025). We reviewed people's assessments completed by the local authority and found people's eligible needs were clearly documented.

## Financial assessment and charging policy for care and support

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The local authority's framework for assessing and charging adults for care and support was clear, transparent and consistently applied. There was guidance in place with amounts which were charged and the key principles for determining if a person should contribute to the cost of their care. There was an appeal process in place should a person be dissatisfied with the outcome of their financial assessment which was overseen by elected members and the reviewing team. People told us when they had spoken to the financial assessment team they received clear guidance in a timely manner.

The local authority had wait times for completion of financial assessments although they told us some of this was due to waiting for applications or evidence to be returned from people to enable the assessment to be completed. The local authority told us the completion of financial assessments could be delayed where supporting evidence was not received from people or people were awaiting financial Deputies to be appointed by the Court of Protection. There were 55 financial assessments awaiting completion with a median wait time of 30 days across residential and home care assessments, with a maximum wait time of 305 days for residential assessments and 298 days for home care assessments (February 2025). This demonstrated progress in the timescales for completion of financial assessments from October 2024 where the median wait time was 43 days and there were 100 financial assessments awaiting completion.

The local authority had amended their financial assessment process to offer a person a telephone assessment within 2 working days of a referral and the person would be provided with a provisional charge during the call to ensure people were able to plan for likely financial costs of care. The final assessed charge would be provided in writing once any required evidence had been received. The local authority had plans to introduce an online calculator to allow people to obtain an estimated charge prior to services being put into place.

## Provision of independent advocacy

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Timely, independent advocacy support was available to help people participate fully in care assessments and care planning processes. The local authority had an Advocacy Hub which was accessible via the Healthwatch Halton website. There was information on what advocacy was, including the different types such as Independent NHS Complaints Advocacy (ICAS) and Independent Mental Health Advocacy (IMHA), and how to get in touch to access it.

Partners told us they were able to deliver advocacy services in a timely manner. Staff told us about good relationships with advocacy providers and this supported positive outcomes for people. An example was provided where a person was re-referred for advocacy and an advocate was allocated who they had previously worked with, which prevented them having to tell their story again.

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# Supporting people to live healthier lives

## Score: 3

3 - Evidence shows a good standard

## What people expect

I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally.

I am supported to plan ahead for important changes in my life that I can anticipate.

## The local authority commitment

We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.

## Key findings for this quality statement

### Arrangements to prevent, delay or reduce needs for care and support

The local authority worked with people, partners and the local community to make available a range of services, facilities, resources and other measures to promote independence, and to prevent, delay or reduce the need for care and support. The Prevention and Wellbeing Service (PWS) contained Wellbeing Officers who worked with people to identify where they could be supported by Voluntary, Community and Faith Sector Enterprises (VCFSE) as opposed to accessing formal services and support. The triage process within the PWS involved managing referrals and signposting people to appropriate services such as community meals, moving and handling support and welfare and benefits advice to reduce the need for formal care and support unless it was necessary.

Leaders told us there was more to do in promoting this preventative, strength-based culture within Halton, as the prevailing one was underpinned by an expectation that the local authority would look after people through the provision of services and other formal support. The PWS had been formed as the new 'front door' to adult social care. The local authority's own data showed a 47% reduction in the number of people contacting adult social care and going on to receive a Care Act assessment and longer-term support since the PWS had commenced in February 2024.

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The local authority had a range of preventative services for unpaid carers including activities arranged through VCFSE providers. Carers gave us mixed feedback about access to preventative services, with some attending groups for unpaid carers and finding these useful, and others telling us they were unable to attend groups due to their caring role. Staff told us the Carer's assessor within the PWS was working to address this by holding community drop-ins for carers to discuss their needs. Data from the Survey of Adult Carers in England (2023-2024) showed carers accessing support groups or someone to talk to in confidence was somewhat better than the England average at 41.67% against the England average of 32.98%.

Staff told us the mental health team had a focus on preventative measures to support people and to prevent crisis. Mental health social workers worked closely with the mental health outreach team, the PWS, housing, and drug and alcohol services to support a person holistically. Staff also told us about providing 'professional support' to give a flexible response to people, guiding them and supporting their independence outside of formal care services. We reviewed people's care plans which demonstrated the effectiveness of this approach in supporting them to achieve positive outcomes.

The local authority provided a Vision Rehabilitation Service which supported people with a visual impairment in the community to maintain their independence, reduce isolation and prevent harm or risk of injury by providing suitable equipment to meet their needs. The local authority had also commissioned an Integrated Sensory Support Service to provide specialist support for people with sensory loss which included information and advice, rehabilitation, training and equipment to support independence.

Staff gave examples of working with people to regain their independence following a diagnosis of visual impairment, supporting a person holistically to reduce their needs. The rehabilitation officers also supported people with welfare benefit maximisation and help to access social groups and events to prevent or reduce loneliness. There was a follow up service provided by a partner organisation to continue working with people following involvement from the local authority rehabilitation officers and the service undertook a joint review with the local authority after 12 weeks of support.

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The local authority had a prevention strategy in place and had committed to looking at tackling health inequalities and barriers to a good life. The local authority had worked with Think Local Act Personal's national personalisation experts to co-produce strategies around this looking at increasing independence and improved wellbeing for people. Partners told us about a health improvement team who were working as part of this to promote healthy lives to reduce a person's future need for social care support.

As a wider preventative measure in response to increased poverty in the area, the local authority had funded two additional posts to support people who had accumulated debt for unpaid care charges. The service supported people to check they had accurately identified all their disability related expenses, maximised their welfare benefit entitlements and helped them to create a payment plan for their outstanding care charges. The local authority told us they had received positive feedback from people who had used the service, saying it had alleviated their worries about debt and helped them to better manage their finances.

The local authority was exploring the expansion of technology enabled care and was undertaking a pilot scheme jointly with Cheshire and Mersey Integrated Care Board to look at trialling technology, initially within supported living schemes, to provide people with greater independence. The pilot was ongoing at the time of our assessment, but staff told us it would be a positive step to supporting people to live more independently. The local authority had an existing provision of care alarms which supported people to access help in an emergency which was widely available. Staff told us they had worked with partners to look at new and emerging technology which could reduce a person's need for formal support such as medication dispensers.

## Provision and impact of intermediate care and reablement services

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The local authority worked with partners to deliver intermediate care and reablement services that enabled people to return to their optimal independence. The local authority had worked with health partners and used Better Care Funding (BCF) to set up the Halton Intermediate Care and Frailty Service (HICaFS) which provided reablement, intermediate care, and urgent community response services. HICaFS was a multi-disciplinary team which included physiotherapists, Occupational Therapists, reablement workers, social workers and community care workers to enable holistic assessment of a person either in their home or at the intermediate care facility. Partners told us this had streamlined the approach to intermediate care and brought together teams who were previously working in silos to provide better outcomes for people.

Referrals into HICaFS were received into the single point of access and triaged to determine the level of risk and which members of the multi-disciplinary team were most appropriate to respond. Staff told us there was a prioritisation system in place to triage referrals and respond within 2 hours or up to 72 hours dependent on a person's need. Staff told us the service was focused on preventing, reducing on delaying needs and setting personalised goals for people to maintain their independence.

Adult Social Care Outcomes Framework (ASCOF) data showed 3.18% people aged 65+ received reablement or rehabilitation services after discharge from hospital which was similar to the England average of 3%. Staff told us they considered reablement as a first service when supporting a person on discharge from hospital to ensure a person could be supported at home to regain their independence. Short and Long Term Support (2023-2024) national data said 96.43% aged 65+ remained at home 91 days after discharge from hospital into reablement or rehab which was better than the England average (83.70%).

## Access to equipment and home adaptations

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People were able to access equipment and minor home adaptations to maintain their independence and continue living in their own homes. The local authority Occupational Therapy team were placed within the Prevention and Wellbeing Service (PWS) at the 'front door' of adult social care. This meant when referrals were received to adult social care they were screened and allocated during the daily huddle for an equipment assessment if this was indicated which enabled a quicker response to be provided. The local authority provided data which showed 98% equipment was delivered and 100% of minor adaptations were completed within 7 days of a referral being received by the Prevention and Wellbeing Service (PWS). The local authority had no waiting lists for assessment or equipment provided by specialist Visual Impairment Rehabilitation Officers.

The local authority had waiting lists for a full assessment by an occupational therapist which was for more specialist equipment and home adaptations. However, since the implementation of the PWS and recruitment to occupational therapist posts the waiting list had reduced from 409 in July 2023 to 122 at the time of our assessment (February 2025). The local authority told us they had had trouble in occupational therapist recruitment, but this had been resolved and there had been a steady reduction in waiting lists demonstrated over the previous 18 months. We reviewed documents which evidenced the local authority had a policy and process in place to support people to apply for funding for adaptations such as Disabled Facilities Grants. Data provided by the local authority showed a median wait time for equipment to be delivered of 14 days with a maximum wait of 355 days for home adaptations (October 2024).

## Provision of accessible information and advice

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People could access information and advice on their rights under the Care Act and ways to meet their care and support needs, including for unpaid carers and people who funded or arranged their own care and support. Staff told us the local authority commissioned care and support for people who self-funded their care if they wanted the local authority to do so, including care home placements where this was appropriate to meet a person's needs. Staff told us they would share information packs with people or direct them online to access information if they had the means to do so. However, partners told us the local authority website could be frustrating to people who couldn't find what they needed but there was ongoing work to improve this through joint working around digital inclusion outreach by local authority staff providing face to face contact at a partner office. The local authority had created a 'Living Well in Halton' guide which was available for staff to share electronically or in print for people who did not have internet access.

Partners told us there was a 'useful information' booklet which was given to unpaid carers to direct them towards Voluntary, Community and Faith Sector Enterprise (VCFSE) partners as well as containing information about carers assessments and what to expect. People told us they felt the information provided by the local authority was good and they received regular updates to ensure information was up to date. National data from the Adult Social Care Survey showed 72.22% people who used services found it easy to find information about support which was somewhat better than the England average (67.12%). The Survey of Adult Carers in England said 85.42% of unpaid carers in Halton found information and advice helpful which was similar to the England average (85.22%).

## Direct payments

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There was good uptake of direct payments, and they were being used to improve people's control over how their care and support needs were met. The Adult Social Care Outcomes Framework (ASCOF) shows 40.95% people who used services received direct payments which was significantly better than the England average (25.48%). Local authority data demonstrated the number of people receiving direct payments had increased steadily each month from October 2023 to October 2024. Unpaid carers told us they had received a one-off direct payment which they had used to arrange breaks from their caring role.

The local authority had clear policies in place to provide guidance for staff and people on the use of direct payments. Leaders told us the direct payment policy was broad which enabled people to have choice and control over which services they accessed. Staff told us people may choose to use direct payments to personalise their support and gave examples of people using direct payments to access different day services of their choice. Staff also told us people used direct payments to access home care agencies of their choosing outside of the local authority's primary provider of home care which allowed people to have increased personalisation of their care however staff told us there were limited agencies who accepted the local authority rates and therefore people may have to 'top-up' their care by funding the difference.

The local authority had identified issues with the recruitment and retention of Personal Assistants (PAs) for people to employ using Direct Payments. There was a workplan in place to address this through the Direct Payments Forum which had recently been set up and also looked at practices in neighbouring local authorities to inform decision making. The Forum workplan was co-produced with people who used Direct Payments who also participated in the Forum meetings. The local authority was also completing outreach with education providers to give information on a career as a PA so that people leaving education were aware of this as an occupation as well as advertising PA vacancies on their website for visibility. Staff gave examples of people they had supported to employ PAs to give people flexibility in their support.

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# Equity in experience and outcomes

Score: 3

3 - Evidence shows a good standard

## What people expect

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

## The local authority commitment

We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this.

## Key findings for this quality statement

Understanding and reducing barriers to care and support and reducing inequalities

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The local authority had an understanding of its local population profile and demographics. It analysed equality data on people accessing social care and staff told us their collection of data on Equality, Diversity and Inclusion (EDI) had improved recently and this was providing a better picture of who was accessing local authority services and their outcomes. The local authority considered people's protected characteristics when completing case file audits to ensure people's outcomes were equitable. The local authority had signed up to the Social Care Workforce Race Equality Standard (SC-WRES) and leaders told us this was a long-term project and their workplan was being developed.

The local authority had identified some seldom heard groups in the area including carers, members of the Gypsy, Roma and Traveller community and refugees and people seeking asylum. There was an EDI work plan in place and partners told us the local authority was keen to improve links with people from seldom heard communities as part of this. The local authority's EDI strategic group met monthly and had, as part of their work, commissioned training for all staff on EDI. The local authority had used data on seldom heard groups who may access services to provide guidance for staff on tailored support available for people including people who identify as LGBT+, people who require information in different formats, and people who are homeless.

There was a liaison officer within the local authority who was working with members of the Gypsy, Roma and Traveller communities, and we saw there were plans in place to include the liaison officer within wider strategic planning to look at improving links with members of these communities. Staff told us by increasing visibility within the Gypsy, Roma and Traveller community they would be able to provide improved outcomes for people by having a better understanding of their specific needs.

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There was a hotel in the area which was providing temporary accommodation for people seeking asylum and partners told us work was ongoing to create links with people who were residing there. Staff told us they had worked with people seeking asylum and had worked alongside representatives from the Refugee service to support people during their Care Act assessment. There was a multi-agency forum in place which met quarterly to discuss issues facing people who were placed by the Home Office in the hotel and local authority funding had been provided to Voluntary, Community and Faith Sector Enterprises (VCFSE) to support people seeking asylum. Staff told us there were plans to position a wellbeing officer from the local authority in the hotel to promote independence, although this was not in place at the time of our assessment. The local authority had a resettlement officer who worked within the hotel for the purpose of supporting people with access to services and empowerment.

The local authority used the Joint Strategic Needs Assessment (JSNA) and information from partners to identify seldom heard groups within the community and wider inequalities. The local authority was working with partners to reduce health inequalities through measures such as Halton Health Hub at Runcorn Shopping City which was supporting people to have health appointments in a more accessible way in response to feedback from people which stated they were often unable to attend appointments during standard business hours. Partners told us there was shared data on health inequalities through the Health and Wellbeing Board and there was joint problem solving to identify solutions such as through the Halton Health Hub and a mobile cancer screening clinic to improve early screening attendance rates.

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The Health and Wellbeing Board as part of the wider Cheshire and Mersey Integrated Care System had been identified as a Marmot Community working with the Institute for Health Equity to address differences in health outcomes for people across Halton. There were Beacon Indicators in place to enable the local authority to monitor progress towards this. The Beacon Indicators were a set of locally agreed data measurements covering each of the Marmot themes which when reviewed annually would demonstrate if there had been reductions in inequalities. The life expectancy between people in Halton varied between 11 years for men and 9 years for women depending on where a person resided within the local authority. Partners told us there were plans to introduce neighbourhood teams to enable health and local authority teams to work more closely with communities and understand their specific needs, but these were not in place at the time of our assessment

The local authority had regard to its Public Sector Equality Duty (Equality Act 2010) in the way it delivered its Care Act functions. There were processes in place to ensure Equality Impact Assessments were undertaken when strategic policies were being designed or reviewed. The local authority had included two additional protected characteristics in its Equality Impact Assessments; carers and social-economic disadvantage, to ensure vulnerable groups specific to the area were considered in strategic planning.

Local authority staff involved in carrying out Care Act duties had a good understanding of cultural diversity within the area and how to engage with people appropriately. Staff and leaders told us reverse mentoring had been set up to ensure cultural competence at all levels within the local authority and we heard a great example of how this was working in practice and the impact it was having. Leaders told us they were using evidenced based practice from other local authorities to learn how to embed and improve EDI in Halton as well as supporting within wider Northwest networks to improve awareness of EDI across the region. Staff also told us staff network groups had been established to develop and share understanding of LGBTQ+, Disability and Neurodiversity, Race and Religion although it was noted staff participation was low in some groups.

## Inclusion and accessibility arrangements

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There were appropriate inclusion and accessibility arrangements in place to enable people to engage with the local authority in ways that worked for them. The local authority had undertaken assessment of their website to ensure it was accessible and issues which had been identified were being addressed. The local authority had also translated their website into non-English languages to ensure it was accessible to people who spoke other languages. A partner told us they had provided deaf awareness training to local authority staff, so they were better able to understand the inclusion requirements of people who are deaf or have hearing impairments. The partner also told us there was good access to British Sign Language interpreters to support people accessing local authority services.

Staff told us they worked with people who don't speak English as a first language and used interpreters to support communication as well as providing paperwork such as support plans to people in their own language. Staff had access to telephone interpretation and in person translation to ensure people could engage with the local authority. Staff in specialist teams told us they had training in Makaton and talking mats to engage with people who can't use words to communicate.

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## Theme 2: Providing support

This theme includes these quality statements:

- Care provision, integration and continuity
- Partnerships and communities

We may not always review all quality statements during every assessment.

# Care provision, integration and continuity

Score: 2

2 - Evidence shows some shortfalls

## What people expect

I have care and support that is coordinated, and everyone works well together and with me.

## The local authority commitment

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

## Key findings for this quality statement

### Understanding local needs for care and support

The local authority worked with local people and stakeholders to use available data, for example the Joint Strategic Needs Assessment (JNSA), to understand the care and support needs of people and communities. The JNSA provided an overview of health and social care needs of the people in Halton and underpinned the One Halton Health and Wellbeing Strategy 2022-2027 and commissioning plans for the local authority. The local authority monitored demographic changes to understand the changing needs of their community and anticipated future demands on services.

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The local authority, in addition to data analysis, gathered insight through community engagement with partners, residents, carers, and people who use services to gather qualitative evidence about lived experiences. People's voice was incorporated into planning and service evaluation to provide a broader understanding beyond statistical indicators. For example, the local authority had undertaken the 'Big Conversation', a public consultation, which had enabled people to say what mattered the most to them to inform the local authority's service planning.

The local authority used information from partner organisations such as the NHS, Public Health teams and Voluntary, Community and Faith Sector Enterprises (VSFSE) to further understand emerging and ongoing needs. Data on hospital admissions, GP registrations, long term health conditions and safeguarding alerts were monitored as part of the local authority's broader care planning process. The One Halton Health and Well-being Strategy 2022 - 2027 outlined priorities to ensure services were more accessible, efficient, and responsive to the community. The local authority worked as partners of One Halton to align some services with health partners which enabled information sharing across services to address key challenges to improve health and well-being across Halton.

The Adult Social Care Vision was to improve the health and wellbeing of people so that people lived longer, healthier and happy lives. To evidence progress towards this, the local authority gathered and used information on social determinants of health such as housing, employment, education, and income. These wider factors were considered when assessing the circumstances which may influence the support needs of people and communities.

## Market shaping and commissioning to meet local needs

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People had access to local support options that were effective, affordable, and good quality to meet their care and support needs. There was limited choice of home care providers for people whose care was arranged by the local authority. This was because the local authority contracted with only one principal home care provider which operated across the borough although there was an additional provider sub-contracted. The local authority had recognised the limited choice and capacity risks with this arrangement, and they were moving to a new multi-provider framework which was coming into effect shortly after our assessment.

Staff told us people had the option to use direct payments to arrange their support with alternative home care providers if they wished to do so. However, this did not always support individual choice as some home care providers charged a rate that was above the direct payment rate, meaning that people had to 'top up' the fees to be able to use their provider of choice. Data indicated that people who used services in Halton who felt they have choice over services was 57.03% which was significantly worse than the England average of 70.28% (Adult Social Care Survey 2024). The local authority told us only a small number of people were paying to top up their direct payment to access a home care provider of their choice.

The local authority had a well-distributed geographical spread of residential and nursing home provision and sufficient capacity to meet current demand for non-specialist services. Staff told us people requiring more specialist care often had to seek residential care services outside the borough, particularly for people with mental health needs and more complex support requirements. Halton Borough Council was part of the Liverpool City Region Combined Authority which enabled them to access the Liverpool City region Flexible Purchasing System (FPS) to procure services for people with a range of needs and commission services from providers which were not available within Halton. This supported people who were placed out of borough to, in many cases, access placements which were within a 10 mile radius of Halton.

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Commissioning strategies were aligned with the strategic objectives of partner agencies. The local authority had worked with partners to better understand market challenges to influence long-term planning and improve service delivery. Partners told us they had a very good relationship with the local authority, and they felt the local authority was responsive and personable. A local Co-production Charter was developed with people with lived experience along with commissioned research to explore the needs of the local population through a series of workshops and engagement sessions and surveys alongside feedback from complaints, and compliments enabled to shape the future of services. The local authority had used this to inform their commissioning of the upcoming home care provider framework.

The local authority had used the Market Position Statement 2023-2025 to identify market shaping measures which would need to take place to ensure they could meet the future needs of their population. The Market Position Statement identified to meet future demand due to the projected increase in population aged over 65 in the next 10 years, the current capacity within home care and residential and nursing homes will need to expand but leaders told us limited planning had taken place around this. The local authority had anticipated the increase in home care demand and factored this into their decision making to implement a wider home care provider framework which was due to commence after our assessment.

The local authority had commissioned and in-house services such as shared lives, day services and supported employment services to provide people with a range of support options. The services supported people with a wide variety of needs including adults with learning disabilities, people with physical and sensory disabilities and people with dementia. The local authority recognised that some of the commissioned models of care and support were not in line with best practice, such as building based day services, and were looking to make changes to provision where appropriate to ensure they were proportionate to a person's level of need. While some day services were based in micro-enterprises such as a brewery and a hair salon and some people had been supported to move into paid employment, we also heard about people who had been long-term attendees at the day centres.

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The local authority had a transformation project in progress to improve support for adults with learning disabilities, aiming to enhance independence and optimise service efficiency. The local authority had identified key priority areas which were Supported living, Day Services, Respite Care, Residential and Nursing Care. To shape the future delivery of services, the local authority engaged with people who used services and their families to gather their insights. The local authority had commissioned research on provisions for people with a learning disability which was nearing completion at the time of our assessment. The local authority aimed to use the research to inform decision making on developing a more efficient and responsive service model.

The local authority had used their internal data from their housing panel to identify a rise in referrals for supported living provision where people can have their 'own front door'. Staff told us the local authority had identified their current housing stock for supported living was outdated and there were properties due to be decommissioned as the local authority updated their provision. The local authority was exploring options to build more single tenancy properties and had included this in their future housing strategy. While this was in progress and to support independence within existing provision, technology pilot programs were introduced, testing a blended model of care which integrated digital solutions, including computer tablets and sensors, to enhance flexibility and independence. The local authority highlighted in their Market Position Statement they wanted to explore the use of Individual Service Funds (ISF) to enable people to have more choice and control over their support.

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The local authority had conducted research into the approaches taken by other local authorities to develop their Adult Social Care Commissioning Strategy for Care and Support 2023-2026. One focus of the strategy was on developing the support available from Voluntary, Community, and Faith Sector Enterprises (VCSFE) through grant funding. The local authority invested in a range of VCSFE, but partners told us they felt financial challenges had limited the growth of the sector. Partners told us they had noted improvements in recent months, expressing their input was valued in discussions about future service delivery. Partners told us they felt their voices were heard and welcomed in board meetings, recognising their role as key stakeholders aligned with the local authority's strategic goals.

The local authority demonstrated work with stakeholders to review and expand integrated immediate care services within the community to reduce the reliance on long term services. There were examples of commissioning to support a preventative approach including the use of block-booked residential care home beds to support short term health needs to prevent hospital admissions. In addition, there was also a commissioned 'step up- step down' service working in partnership with stakeholders to facilitate hospital discharges and prevent hospital admissions to enable people greater opportunities to regain a level of independence. Partners told us this was an effective integrated team who worked together to respond to people who were unwell at home and give clinical support to prevent hospital admission.

## Ensuring sufficient capacity in local services to meet demand

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There was sufficient capacity to meet demand for people who required home care, and the local authority told us people did not have to wait for services to start. The local authority had good availability within extra care provision, where older adults can live independently with onsite support. Vacancy levels for non-specialist residential and nursing homes fluctuated based on demand however, generally had remained stable, with sufficient capacity to meet current needs. The local authority told us people could have some waits for residential and nursing home placements; however, these could be for a variety of reasons such as not being ready for discharge from hospital, or waiting for a placement of their choice, rather than lack of capacity.

There was some need for people to use services or support in places outside of their local area due to lack of local provision. Local authority data told us that as of October 2024, 141 people were placed in care homes outside of Halton. The local authority told us the reasons for such placements were due to the lack of specialist care home support within Halton, people's own choice and the timeliness of transfers such as to progress a person's discharge from hospital. Staff told us they had a focus on supporting individuals to return to their communities, when this was a person's choice, and their needs could be met within the area. Staff gave an example of a person who had been placed in an out-of-borough care home but was able to return to the local area when a nearby care home recruited additional staff to enable them to meet their needs. Staff told us there was an emphasis to keep the person within their community, however there were times the person's needs outweighed this.

The local authority had recognised the importance of unpaid carers and partners told us there was a good relationship with the unpaid carers network. Feedback from unpaid carers was actively sought by the local authority through consultation events on the theme of 'what carers feel is working or not in Halton'. This feedback was then incorporated into the One Halton Carers strategy 2024-2027.

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We had mixed feedback about whether there was sufficient capacity for unpaid carers to have access to replacement care for the person they care for, in both planned and unplanned situations. Unpaid carers told us mixed feedback as some told us they had not heard of respite opportunities; however, others told us they had regular access to short breaks to enable them to continue in their caring role. The local authority had commissioned a respite service which was delivered within people's homes to enable carers to take a break where this was pre-booked. Data from the Survey of Adult Carers in England (SACE 2024) showed 15.00% of carers in Halton were accessing support services to take a break from caring for 1-24 hours, this was somewhat worse than the England average of 21.73%.

The local authority had identified through their consultation with unpaid carers there was no pre-bookable residential respite for older adults within the area, and they were evaluating their current respite provision and commissioning opportunities. The data for unpaid carers accessing support or services allowing them to take a break from caring for more than 24 hours was 20.00% which was similar to the England average of 16.14% (SACE 2024). There was provision of pre-bookable respite for people with a learning disability within the borough and staff told us this was reflected in people's care plans. Staff told us respite for unpaid carers of older adults provided within a residential home may mean the person moving to a care home out of the local authority area due to lack of availability in the borough when respite may be requested, which made it difficult for family and carers to visit.

The local authority had developed a data management system which provided information on the numbers of people who used support, broken down by service and primary support reasons which meant they knew what the market was providing, when and where people were receiving care, and they could track a person's journey across different care provisions over time. This data was used to identify people who were out of the borough and target the work of the specific teams to identify where people could move back to the area should they wish to.

## Ensuring quality of local services

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The local authority had clear arrangements to monitor the quality and impact of the care and support services being commissioned for people and it supported improvements where needed. The local authority had an established dedicated adult social care quality assurance team responsible for monitoring, reviewing and supporting commissioned care services. The quality assurance team played a crucial role in assessing the performance of commissioned services to ensure compliance with the established standards. Their responsibilities included evaluating provider performance against the expectations set out in contracts and service specifications in conjunction with the local authority's overall strategic priorities. Senior management within the local authority provided strategic oversight of the quality assurance process.

The quality assurance process for the local authority's internal care home provision was separate to their quality assurance framework for commissioned providers. There were improvement plans in place for all internal care home services as 1 was rated Good by CQC and 4 were rated Requires Improvement. At the time of our assessment, the Head of Service for Internal Care Homes was vacant. Given this was a critical role in the quality assurance process, an interim leadership arrangement was in place. The local authority had seconded additional staff into the Care Home division to ensure there was effective strategic oversight of quality. Partners told us work was ongoing and continuing to improve the quality of care within local authority owned care homes and they were seeing improvements through the reduction in quality-of-care concerns raised.

There were 41 registered adult social care services in Halton, including those managed by the local authority, at the time of our assessment, which were rated as 65.85% Good, 19.51% requires improvement and 2.44% inadequate by Care Quality Commission (CQC) with the remaining services unrated. National Data from the Adult Social Care Survey (2024) showed 79.13% of people who use services say those services have made them feel safe and secure which was lower than the England average (87.82%).

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People told us they had concerns about the quality of care in care homes in Halton. The local authority was addressing safety and quality concerns in commissioned care provision and had undertaken comprehensive assessments through structured tools such as the Provider Assessment and Market Management Solution tool (PAMMS). PAMMS was a framework to assess the quality and compliance of care providers and partners told us they had undertaken these assessments and worked with the local authority collaboratively on any improvements which were required. The PAMMS process ensured the local authority were assured about the performance of providers through detailed analysis enabling identification of areas for improvement.

Where it was identified external providers required improvements to be made to the service, the local authority had put measures in place to continue monitoring and supporting the service. The local authority worked with a multi-disciplinary team through the Care Home Development Group which included key partners such as medication management teams, GPs, infection control teams, district nurses, and the local authority's care management team. The local authority was taking a collaborative approach to improving the quality of care however did place sanctions such as preventing new admissions to care homes when this was necessary. Partners told us they felt this work was showing improvements in the quality of care provided within care homes which they triangulated with information received from services working alongside providers.

The local authority quality assurance team carried out routine annual safe and well visits to commissioned services outside of core business hours which were unannounced. There was a focus on health and safety, observations of care and support, environmental factors and consultation with residents and staff. The local authority had 'keeping in touch' (KIT) days which were scheduled monthly with care home providers to establish and build relationships. Contract meetings were scheduled with Supported living and Domiciliary care providers on a quarterly basis. Providers told us they had strong relationships with the local authority and felt there was an open dialogue about any quality concerns to work together on improvements and an example was given of a recent issue with pharmacies where the local authority acted as an intermediary to resolve issues and ensure prescriptions were delivered in a timely manner.

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The local authority's quality assurance framework included home care providers. Leaders told us work had been undertaken to ensure the quality assurance team had capacity to monitor the additional providers due to be added to the new provider framework.

Through the quality assurance process, people who were using direct payments to purchase care with alternate care providers were given information on the quality of their chosen provider to enable them to make an informed decision about their care.

The local authority had processes in place should there be a service disruption, such as a provider failure to ensure the continuity of care, safety and wellbeing of all people using services. The local authority had a specific and comprehensive process for managing care home closures. A 'lessons learned' approach was undertaken upon reviewing the circumstances of failure to inform improvement measures and to prevent further recurrence.

Providers informed us the monthly 'information sharing group' meeting, facilitated by the local authority enabled external providers to come together to share trends, patterns and risks or emerging issues which may impact service delivery.

## Ensuring local services are sustainable

We heard mixed feedback about how the local authority collaborated with care providers to ensure that the cost of care was transparent and fair. Partners told us the local authority had not yet confirmed funding rates for the new financial year at the time of our assessment. The rates were expected to be announced close to the start of the financial year which providers told us would create significant financial challenges as they would be unable to budget and forecast for the year ahead. The local authority told us they had undertaken consultation with providers and were expecting to notify providers about their funding rates shortly after our assessment.

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In the past 12 months, no contracts had been handed back to the local authority by care providers across home care, supported living, or residential services. There was a stable and collaborative relationship between the local authority and the domiciliary care providers. Leaders told us a national care home provider had withdrawn from the market however, had waited for a purchaser rather than closing the homes which had enabled the care homes to remain open.

The local authority used performance and financial data to evaluate the current impact and value of care services and used this to target key areas of spend where improvements could be made to ensure the overall financial sustainability of care services within Halton. Leaders told us rather than cutting services to reduce costs, the focus was on remodelling to improve outcomes and reduce reliance and demand for services by increasing people's independence. For example, the provision of services for adults with learning disabilities had been identified as a high-cost area which was currently under review through the transformation programme to determine whether they could be provided in more efficient and effective ways while still providing good outcomes for people.

The transformation programme had commenced in 2023 and was due for initial completion in 2026. The local authority had carried out engagement seeking the views of people who used the services and their families to gain a better understanding of the service delivery. Additionally, this project focused on finding ways to sustain services more effectively and align them with the broader goals of the Adult Social Care Prevention Strategy 2023-2027. The key priorities included creating more employment opportunities for people with Learning Disabilities and increasing the focus on independence in service design.

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The local authority had identified an increase in demand for services for older adults with projections indicating this will continue to rise over the next 10 years. Leaders were clear on the critical need to continue the work to prevent, reduce and delay care needs to manage future demands on services. The local authority had undertaken financial modelling to plan for the impact of meeting the potential future needs of their population.

The local authority understood its current and future social care workforce needs. It worked with care providers, including personal assistants and other agencies, to maintain and support capacity and capability as the high use of agency staff within home care and care homes presented significant challenges to the quality and consistency of care provided. The local authority's Adult Social Care Risk Assurance Framework 2024/25 identified recruitment and retention challenges, and an Adult social care workforce strategy was being developed.

Partners told us the local authority had been supportive of their efforts to recruit more staff and had assisted by advertising their vacancies on the local authority website for visibility. The local authority had made positive steps in recruiting a permanent workforce for their internal care homes, with just one having below 50% permanent staff at the time of our assessment and the other care homes nearly fully recruited. The local authority identified in their Market Sustainability Plan that a permanent workforce would provide better outcomes for people and better meet their needs and leaders were pleased with the progress they had made in the recruitment of permanent staff for their in-house services.

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The local authority was working in partnership with the Liverpool City Region on a pilot programme, bringing together Direct Payment leads to explore ways to promote the role of personal assistants within adult social care. According to data shared by the local authority 645 people were currently receiving direct payments, however approximately half of these were using their direct payment to pay for a home care provider, rather than using the one offered by the local authority. The remaining people receiving a direct payment were using this to hire personal assistants. As part of the pilot actions were being taken to address this issue including the creation of job vacancies for those interested in pursuing a career as a personal assistant. The goal was to encourage more people to consider personal assistant as a viable and sustainable option for care thereby expanding the use of direct payments and more flexible in person centred way.

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# Partnerships and communities

## Score: 2

2 - Evidence shows some shortfalls

## What people expect

I have care and support that is coordinated, and everyone works well together and with me.

## The local authority commitment

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.

## Key findings for this quality statement

## Partnership working to deliver shared local and national objectives

The local authority worked collaboratively with partners to agree and align strategic priorities, plans and responsibilities for people in the area and to address shared concerns. The local authority had established the One Halton partnership where agencies agreed strategic plans and priorities which were laid out in the One Halton Health and Wellbeing Strategy for 2022-2027. One Halton was a partnership between the local authority, NHS organisations, GP Practices, Fire, Police and Voluntary organisations. Partners told us the One Halton Partnership was developed as a system-wide approach to address and reduce health inequalities within the area and there was a shared understanding of what the partnership was aiming to achieve. Partners told us One Halton was demonstrating small but incremental changes such as an increase in cancer screenings, which would potentially prevent, reduce or delay the future need for social and health care. A mid-point review of the One Halton Strategy was in planning stages at the time of our assessment to understand the impact the strategy had made on people's outcomes so far.

An example of collaborative work within the One Halton partnership had been the focus on falls prevention, specifically targeting older adults. Within this population, falls were of significant concern, leading to serious injuries, prolonged stays in hospitals or care settings, and reduced quality of life. The local authority had analysed data and worked closely with stakeholders including Public Health and healthcare providers to understand key issues. Prevention strategies had been developed to reduce key risk factors such as frailty, mobility and environmental hazards with initiatives to raise awareness and to educate older adults and their carers on prevention such as safe moving techniques and balance exercise programmes. The collaborative approach was delivered through the Intermediate Care and Frailty Service (HICaFS) where older adults received assessments and interventions designed to reduce the risk of falls. The One Halton partnership had focused on improving outcomes for older adults and ultimately reducing the future demand on healthcare and social care services.

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The local authority had close links with educational establishments to support training of their workforce and had established The Research and Practice Development Care Partnership (RPDCP) which was a joint venture between the local authority, the University of Chester, Age UK Mid-Mersey, and the Caja Group. The local authority told us the partnership aimed to improve experiences of care by forging closer links between social care professionals and researchers. A recent piece of research had identified factors that were important in care services for older adults to maintain their wellbeing, such as the location of care in communities close to people where they could still access the same GP and community centres. The local authority was using these findings to inform their future planning of care provision, and this was being undertaken at the time of our assessment.

The local authority had worked closely with health partners to set up the Halton Health Hub. This was an outpatient clinic led by Warrington and Halton Teaching Hospitals NHS Foundation Trust, however, was developed jointly with the local authority and the local authority had accessed central government New Town funding to support this. Partners told us the local authority had been instrumental in joint planning for the Hub including public consultation to identify how people felt they would most benefit from the Hub. The Hub was supporting people to positive health outcomes for people to reduce their future need for social care. Partners told us there were plans for a joint health and education centre where local authority services will also be on site.

The local authority had integrated aspects of its care and support functions with partner agencies where this was best practice, and when it showed evidence of improved outcomes for people. The local authority worked closely with health partners to determine effective and appropriate ways to address shared issues such as people with no criteria to reside in hospital. The hospital discharge team and the mental health teams were both co-located with their health partners to ensure effective information sharing. Staff told us they worked closely with health partners to ensure positive outcomes for people, for example, through safe discharges from mental health hospitals.

## Arrangements to support effective partnership working

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When the local authority worked in partnerships with other agencies, there were clear arrangements for governance, accountability, monitoring, quality assurance and information sharing. Roles and responsibilities were clear. The One Halton Partnership had workstreams in place to agree strategic plans around specific identified priorities and senior responsible officers in place for these. Leaders told us there were close relationships between the local authority and partners which enabled information to be shared, and plans made appropriately around this.

The local authority used opportunities to pool budgets and jointly fund services with partners to achieve better outcomes. For example, pooled budgets had been used to set up Halton Integrated Care and Frailty Service (HICaFS) which was an integrated hospital discharge, reablement, intermediate care, and urgent community response service with a multi-disciplinary staff team working together to improve outcomes for people. There were joint funding arrangements in place to commission the Halton Integrated Community Equipment Service (HICES) through the BCF to enable professionals to access equipment to support people both on hospital discharge and at home.

The local authority was undertaking a pilot in a supported living provision which was funded by Cheshire and Merseyside Integrated Care Board (ICB) to trial blended support with technology being used alongside traditional care to support people to have greater independence and care tailored to their needs. The pilot had not been evaluated at the time of our assessment, but staff told us the early signs were showing positive outcomes for people.

### Impact of partnership working

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People told us the local authority had worked well with partners in a multi-agency way, and this had improved their outcomes. We reviewed people's care plans which evidenced multi-disciplinary partnership working to support people's wellbeing. The local authority monitored and evaluated the impact of its partnership working on the costs of social care and the outcomes for people. This informed ongoing development and continuous improvement. Partners told us they had positive working relationships with the local authority and there was two-way dialogue and appropriate challenge to ensure outcomes for people were being met.

Partners gave an example of where they had given the local authority feedback about a lack of understanding of sensory processing, and the local authority worked with partners to run workshops for families, professionals, and social care staff to increase their understanding of sensory processing. Partners also told us they had spoken with the local authority about people giving feedback about struggling to contact the local authority and not being able to use online services. The local authority had been responsive to this feedback and a Prevention and Wellbeing officer had commenced drop-in sessions at the partner's office to support people to access adult services if they needed this.

## Working with voluntary and charity sector groups

The local authority worked collaboratively with Voluntary, Community and Faith Sector Enterprises (VCFSE) to understand and meet local social care needs. The local authority provided funding and other support opportunities to encourage growth and innovation within VCFSE. The local authority had provided funding to a range of VCFSE to enable them to provide services such as post-hospital discharge support and social support to reduce a person's isolation which were supporting people to remain healthy and independent. A partner told us they had a positive relationship with the Prevention and Wellbeing Service at the local authority and were supporting people who needed some assistance to live independently at home such as social prescribing and benefits advice which reduced people's need for local authority services.

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However, partners told us they were having to reduce or remodel their offers due to reduced funding from the local authority, which was limiting the positive impacts they could provide for people and support them to prevent, reduce or delay their need for adult social care. We heard mixed views from partners on the impact of this, as one partner told us they had redesigned services to be more strengths-based to achieve the same outcomes for people with their reduced funding, and we heard an example of reducing long-term befriending services to focus on short-term interventions such as linking people with community assets. Some partners told us the local authority needed to be more creative in their approach to VCSFE and invest further in VCSFE to enable more people to be supported outside of commissioned adult social care services.

Other partners told us they felt the local authority was proactive in engagement with the voluntary sector and the local authority had a good understanding of the work and contribution from voluntary sector organisations. Staff told us some VCSFE had closed during covid and there were not as many as there used to be, which limited options for people to socialise outside of formal care services, but the community centres were providing good outcomes for people.

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## Theme 3: How Halton Borough Council ensures safety within the system

This theme includes these quality statements:

- Safe pathways, systems and transitions
- Safeguarding

We may not always review all quality statements during every assessment.



# Safe pathways, systems and transitions

Score: 3

3 - Evidence shows a good standard

## What people expect

When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place. I feel safe and am supported to understand and manage any risks.

I feel safe and am supported to understand and manage any risks.

## The local authority commitment

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

## Key findings for this quality statement

### Safety management

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Safety was a priority for everyone. The local authority understood the risks to people across their care journeys; risks were identified and managed proactively; the effectiveness of these processes in keeping people safe was routinely monitored. The views of people who use services, partners and staff were listened to and considered. For example, leaders told us the data around people feeling safe in a care home had dipped and the Safeguarding Adults Board challenged why this was, therefore a task and finish group was set up to identify solutions to ensure people felt safer. We saw documents that evidenced people's care plans identified risks to the person and the wider public and staff had identified measures to manage risk while ensuring a person-centred approach. The local authority used data to have oversight of waiting lists and had adopted a waiting well approach to ensure people were given regular updates and risk re-assessed while they awaited a Care Act assessment.

Policies and processes about safety were aligned with other partners who were involved in people's care journeys. Multi-agency audits were undertaken by the Safeguarding Adults Board to provide assurance that risks to people in their care were identified and themes were addressed as a joint priority. Partners told us key priorities were reviewed regularly at partnership boards and the Health and Wellbeing Board to ensure risks were shared between partners and addressed.

Information sharing protocols supported safe, secure, and timely sharing of personal information in ways that protected people's rights and privacy. Partners told us that local authority staff had access to their computer recording system to ensure they could safely access a person's records to streamline their care without needing information to be shared between systems. Staff told us there was effective sharing of information within the hospital discharge services to ensure they were updated on people's needs. We reviewed documents that demonstrated safe and timely information sharing between services when a person moved into a residential home in another area to ensure a smooth transition.

## Safety during transitions

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Care and support was planned and organised with people, together with partners and communities in ways that improved their safety across their care journeys and ensured continuity in care. This included referrals, admissions, and discharge, and when people were moving between services.

The local authority had a pathway in place to support safe transitions from child to adult services. People approaching the age of 16 who had an Educational Healthcare Plan (EHCP) were referred to the dedicated transitions team who worked with young people from aged 16 to 25 with a named worker approach which meant people kept a consistent worker into adulthood. A person could also be referred to the transitions team at age 14 if it was identified a longer term involvement was required to facilitate a smooth transition to adult services. The transitions team worked with people who had learning disabilities, visual and/or hearing impairments and life limiting physical disabilities to ensure they had a care plan in place before their 18<sup>th</sup> birthday.

We heard mixed feedback about people who did not meet the criteria for the transitions team with people with mental health illnesses transitioning to adult services aged 18 when they were closed to Child and Adolescent Mental Health Services (CAMHS). The local authority's transitions protocol reflected that a young person should be assessed by the mental health team at 16 however we heard this was not happening in practice. Local authority leaders told us their mental health social workers could become involved prior to a person turning 18 and provided the example of people who had been subject to the Mental Health Act. Partners told us there needed to be greater focus on continuity of care for people transitioning to adult services when they were open to mental health services as the focus was on age criteria for services rather than need. Other partners told us families did not know how to access the transitions service when they were not automatically referred, and they did not feel information was readily available outside of the transitions team.

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The local authority had social workers based on hospital sites to ensure safe and timely discharge from hospital. Partners and staff told us local authority staff were integral parts of the discharge process to work collaboratively with the hospital to co-ordinate a person's transition out of hospital. Partners told us this approach was mirrored in mental health acute hospitals where local authority staff were invited to initial multi-disciplinary meetings on a person's admission and contributed to discharge planning from this point. Staff told us they worked flexibly across the hospital sites in Warrington and Whiston to support discharge flow in both areas. Staff gave examples of working jointly with health partners to ensure a person's needs were clear and they had the appropriate support in place on discharge, such as requesting speech and language support to undertake mental capacity assessments.

Where there were identified delays to a person's discharge this was discussed jointly between the health trust and the local authority and partners told us there was joint ownership of any issues impacting on safe discharge. The local authority was working with partners to trial new processes for hospital discharges such as introducing board rounds in one hospital site to ensure services and teams were kept up to date on people's needs. Staff told us there were daily discussions between the hospital and Halton Intermediate Care and Frailty Service (HICaFS) to discuss reablement care as a first option for people to ensure they had the opportunity to regain their optimal independence.

The local authority had recently commenced use of the Trusted Assessor model to support admissions to care home placements. Partners told us this would enable the local authority to follow a best practice model which has been adopted by many local authorities nationally. The trusted assessor reviewed a person's discharge assessment to determine the most appropriate discharge location and then identified care home placements which could meet that person's needs. Staff told us this was in the early stages of implementation, and it was planned to be expanded to home care packages, but it was already providing benefits for people. Staff told us the trusted assessor was able to streamline processes for people by discussing a person's need with care homes and this meant a person, or their family, only had to discuss this with one professional rather than with each care home.

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Specific consideration was given to protecting the safety and well-being of people who were using services which were located away from their local area, and when people move from one local authority area to another. The local authority had an Out of Borough Provider Validation process to quality assure and review services being used which were out of the local authority area. The local authority had reciprocal information sharing agreements in place with neighbouring authorities to ensure any concerns about care in care homes outside the area were shared with the placing authority. Staff told us they would complete annual reviews for people when they were moved to a service out of the local authority area.

## Contingency planning

The local authority had undertaken contingency planning to ensure preparedness for interruptions in the provision of care and support. The local authority knew how it would respond to different scenarios; plans and information sharing arrangements were set up in advance with partner agencies and neighbouring authorities to minimise the risks to people's safety and wellbeing. However, some unpaid carers told us they did not have an emergency plan in place should they be unable to continue in their caring role.

The local authority had clear business continuity plans in place for any disruptions which might impact local authority functioning. We reviewed an example of how this had been implemented with minimal disruption during a power cut at the local authority. The local authority had jointly devised service continuity plans with partners to provide guidance in case of any provider failure and minimise disruptions to a person's care.

Funding decisions or disputes with other agencies did not lead to delays in the provision of care and support. Staff told us they were aware of when a home care provider may close the provision due to a hospital admission and described good links with the provider to ensure a person had support in place when they were discharged from hospital.

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# Safeguarding

Score: 3

3 - Evidence shows a good standard

## What people expect

I feel safe and am supported to understand and manage any risks.

## The local authority commitment

We work with people to understand what being safe means to them and work with our partners to develop the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.

## Key findings for this quality statement

### Safeguarding systems, processes and practices

There were effective systems, processes, practices to make sure people were protected from abuse and neglect. The local authority had clear safeguarding policies in place and undertook regular case audits to ensure processes had been followed. The local authority had an Integrated Safeguarding Unit (IASU) who screened all safeguarding concerns to determine whether they met criteria for a section 42 enquiry. Partners told us they were able to contact the local authority and receive advice and guidance as to whether they should raise any safeguarding concerns.

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Local authority processes stated concerns were to be screened within 24 hours of receipt and an initial risk assessment completed within 48 hours. Data provided by the local authority showed the median waiting time between receiving a concern and screening being completed was 0 days. Following the screening, if a section 42 enquiry was required, this would be completed by an appropriate member of staff from any of the social care teams.

The local authority worked with the Safeguarding Adults Board (SAB) and partners to deliver a co-ordinated approach to safeguarding adults in the area. The SAB did not have an independent chair, however following a North West ADASS Peer Review an independent scrutineer had been appointed which partners told us was helping the Board function better and provided increased internal challenge. Partners told us there was wide representation from different organisations on the board and the board membership had been widened to include more health partners and emergency service safeguarding leads which was leading to greater engagement and discussion. Leaders told us the Independent Scrutineer was due to provide their first report shortly after our assessment however there had already been useful feedback provided and improvements made, for example in using performance dashboards to monitor trends.

There were strong multi-agency safeguarding partnerships, and the roles and responsibilities for identifying and responding to concerns were clear. Information sharing arrangements were in place so that concerns were raised quickly and investigated without delay.

When safeguarding concerns related to people using a care service, the local authority had a pathway in place whereby the care provider would undertake an enquiry into the concern if it did not meet the threshold for a section 42 enquiry. Staff told us where providers led on investigating concerns, the local authority would review these to identify any emerging themes and identify any action which needed to be taken. Themes were also fed back to the Care Home Development group and multi-agency action plans devised if needed.

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Staff involved in safeguarding work were suitably trained and supported to undertake safeguarding duties effectively. National data showed 53.92% of independent or local authority staff had completed safeguarding adults training which was similar to the England average of 48.70% (Adult Social Care Workforce Estimates 2023-2024). Staff told us they felt challenged due to a lack of experienced social workers within the IASU however told us they were a supportive team and worked together to manage risk with support from experienced managers and staff. The local authority undertook regular audits of safeguarding enquiries to ensure consistent practice across staff.

## Responding to local safeguarding risks and issues

There was a clear understanding of the safeguarding risks and issues in the area. The local authority worked with safeguarding partners to reduce risks and to prevent abuse and neglect from occurring. The Safeguarding Adults Board (SAB) had identified their priorities for 2023-24 as quality assurance, co-production, and engagement, and learning and professional development. In their annual report 2023-24 the SAB reported they had undertaken thematic audits of cases under the themes of self-neglect, neglect and acts of omission in a person's home and concerns triaged by the Emergency Duty Team.

The local authority maintained strong links with a secure mental health rehabilitation service within the area and there were weekly meetings which took place between the centre's lead safeguarding practitioner and the local authority's Integrated Adult Safeguarding Unit (IASU) to ensure any themes or concerns were identified and to discuss any new concerns. There was also a wider multi-disciplinary team meeting which took place monthly between IASU, the Safeguarding Lead, advocacy, the Integrated Care Board (ICB) safeguarding lead and a linked officer from Cheshire Police. This enabled any themes or concerns to be discussed with a wider team of professionals.

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Following an audit into a case involving self-neglect, the local authority had implemented a Multi-Agency Risk Assessment and Management policy (MARAM). The MARAM provided a framework for multi-agency working to address risk where an individual was not subject to a section 42 enquiry. Staff told us they felt the MARAM approach had been useful when working with several agencies to ensure risk management was co-ordinated and shared between services and gave us an example of working with a person with significant health needs and working under MARAM were able to co-ordinate responses to ensure a person's needs were met holistically.

Lessons were learned when people had experienced serious abuse or neglect, and action was taken to reduce future risks and drive best practice. The local authority had not been subject to a Safeguarding Adults Review (SAR) in the 2 years prior to our assessment despite several cases having been considered and rejected. To allay concerns about this, the Safeguarding Adult Board had introduced a new process whereby referrals for SARs were considered by a sub-group with sign off from the SAB Chair on their decision and oversight from the Independent Scrutineer. Partners told us the SAR referral criteria had been reviewed as it was not aligned with neighbouring authorities' which could cause uncertainty on when to refer. At the time of our assessment there were 7 cases going through the SAR consideration process, 2 of which were to be progressed to a SAR.

The SAB disseminated learning from SARs which had taken place across the region, arranging lunch and learn sessions for all partner agencies of the board and their staff to attend. Staff told us they had attended recent training sessions on learning from SARs including sessions about domestic violence and alcohol abuse.

## Responding to concerns and undertaking Section 42 enquiries

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There was clarity on what constituted a Section 42 safeguarding concern and when S42 safeguarding enquiries were required, and this was applied consistently. There was a clear rationale and outcome from initial enquiries, including those which did not progress to a Section 42 enquiry. The local authority had detailed guidance in place to support practitioners in determining when a safeguarding concern should be raised and when section 42 enquiries were required. The local authority also had guidance on whether a concern should be a provider-led response or referred for a section 42 enquiry.

The local authority told us between 1<sup>st</sup> March 2024 and 28<sup>th</sup> February 2025 they received 811 safeguarding concerns, all of which were triaged and 311 (41%) progressed to section 42 enquiries. The local authority had seen a reduction in safeguarding referrals received over the last 2 years according to national Safeguarding Adults Collection (SAC) data with 1095 concerns received in 2022-23 and 810 received in 2023-24. Leaders told us they were assured safeguarding concerns were being raised appropriately as data was triangulated with information from partners at the Safeguarding Adults Board (SAB) so they would be able to identify if partners were not raising concerns with the local authority.

There were clear standards and quality assurance arrangements in place for conducting Section 42 enquiries. The local authority reviewed data on safeguarding concerns received each week and monitored outcomes and any emerging themes and trends. Data on provider-led concerns was also reviewed by the IASU and Quality Assurance team to monitor trends in concerns originating from care providers. The quality assurance team were part of the quality subgroup at Halton SAB and discussed any themes with care quality with partners at the board. The local authority had a process for auditing safeguarding case files and in addition, thematic reviews were undertaken by the SAB.

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The local authority had a backlog of Deprivation of Liberty Safeguards (DoLS) applications awaiting allocation to a Best Interest Assessor (BIA). Data provided by the local authority said there were 210 DoLS assessments awaiting completion in February 2025 which was a significant improvement from February 2024 when there were 394 applications outstanding. The local authority told us 118 of the waiting DoLS referrals were from hospital applications. Waiting lists for DoLS, including applications received from hospital settings, were prioritised within the local authority against the ADASS prioritisation tool and reviewed by a qualified BIA to ensure immediate risks were identified and addressed. The local authority was working with the North West ADASS DoLS group to discuss ways to streamline the process and reduce waiting lists.

We heard mixed feedback about whether relevant agencies were informed of the outcomes of safeguarding enquiries when it was necessary to the ongoing safety of the person concerned. Most partners told us they were informed of safeguarding enquiry progress and outcomes however, some told us they did not receive feedback and felt they had to chase the local authority to learn of outcomes.

## Making safeguarding personal

Safeguarding enquiries were carried out sensitively and without delay, keeping the wishes and best interests of the person concerned at the centre. Data provided by the local authority told us all safeguarding enquiries were triaged within 24 hours of receipt and initial conversations with the person commenced at this point.

Staff told us there had been inconsistencies in how people's wishes were recorded in safeguarding enquiries particularly the voices of seldom heard groups, and there had been training completed with all staff to ensure consistency in their approach. Local authority processes highlighted the importance of consulting with the person and recording their wishes. Staff told us they kept the person at the centre of all safeguarding enquiries, ensuring their views were at the forefront including where a person would need additional support such as translators to make their views known.

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People could participate in the safeguarding process as much as they wanted to, and people could access support from an advocate if they wished to do so. People were supported to understand their rights, including their human rights, rights under the Mental Capacity Act 2005 and their rights under the Equality Act 2010 and they were supported to make choices which balanced risks with positive choice and control in their lives. Partners told us staff had good links with advocacy services and knew when to refer a person for advocacy support. National data from the Safeguarding Adults Collection told us 81.48% people who lacked capacity were supported by an advocate, friend or family which was similar to the England average (83.38%).

Safeguarding plans and actions to reduce future risks for individual people were in place and they are acted on. The local authority provided data which told us in quarter 2 of 2024-25 97% of people whose section 42 enquiry was concluded had their desired outcomes met or partially met. They told us this was an improvement from Quarter 1 2024-25 where 90% of people had their desired outcomes met or partially met.

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## Theme 4: Leadership

This theme includes these quality statements:

- Governance, management and sustainability
- Learning, improvement and innovation

We may not always review all quality statements during every assessment.

# Governance, management and sustainability

## Score: 2

2 - Evidence shows some shortfalls

### The local authority commitment

We have clear responsibilities, roles, systems of accountability and good governance to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

### Key findings for this quality statement

#### Governance, accountability and risk management

There were clear and effective governance, management, and accountability arrangements at all levels within the local authority; these provided visibility and assurance on delivery of Care Act duties.

Approximately 2 years ago, the local authority had separated the previously joint adult social care and children's departments into separate directorates. Leaders told us this provided greater visibility, leadership capacity and accountability for adult services as the DASS reported directly to the Chief Executive rather than being accountable to the Director of Children's Services as per the previous structure. They were also a full member of the corporate leadership team.

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There was accountability within the local authority for quality and sustainability and risks to delivery of Care Act duties. Partners told us there was regular oversight and quality assurance meetings held jointly with the local authority to share concerns and make decisions collaboratively. The projected increase in population of those aged 65+ was being discussed at a strategic level with partners and leaders were clear on the critical need to continue the work to prevent, reduce and delay care needs to manage future demands on services. The local authority had completed financial modelling to project the impact of their future population needs.

There was a stable adult social care leadership team with clear roles, responsibilities, and accountabilities. The statutory role of Director of Adult Social Services (DASS) was held by the Executive Director for Adult Services, a post which they had held for several years. The leadership team had extensive service within the local authority, and this enabled them to have strong relationships with staff and partners. Partners told us they knew who to contact in the local authority management team. Staff told us leaders were approachable and supportive.

Council members had oversight of data relating to local authority functions and had regular meetings with the Director of Adult Social Services (DASS) to discuss any concerns they had. They also received papers and information from senior management team meetings to review and to inform the scrutiny function.

The local authority used audits to monitor implementation of policy and the impact this was having on practice. Where any performance issues were identified, there were workplans devised to address these which were overseen by the senior management team. We reviewed workplans which evidenced achievable goals and progress being monitored regularly. The local authority acted upon the outcomes of case audits and staff told us about the Multi-Agency Risk Assessment and Management process which had been implemented following learning from a safeguarding case audit.

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There were clear risk management and escalation arrangements. These included escalation internally and externally as required. There was awareness between senior leaders and partners of risks facing adult social care now and in the future. The local authority had a service level risk register which had identified risks and measures to manage these with escalation processes in place. The local authority demonstrated that they acted where risks were identified such as when they had identified an issue with waiting lists for Occupational Therapy and as part of their improvement plan had appointed a Principal Occupational Therapist to ensure best practice and risk management

There was a Transformation Programme in place, designed corporately, with elements covering adult social care and a specific adult social care delivery plan. We heard mixed feedback from leaders as to whether the plan was achievable within the planned timescales. The council's sustainability depended on changes being made within identified timescales, but leaders told us the transformation required further strategizing and engagement with people to ensure its impact was controlled and providing positive outcomes for people.

Senior leaders understood the local authority needed to change its operating model to ensure its sustainability with growing demand for adult social care, however we heard differing views from leaders on how this should be achieved. There was not a clear structure and process in place to implement the large-scale changes which were needed at pace to drive a sustainable, prevention, and strengths-based service and extend this beyond the current Transformation Programme.

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There was consistent feedback from leaders who recognised while the current model was not thought to be sustainable, there needed to be system-wide change, co-produced with people, to deliver effective transformation and provide a greater focus on prevention and independence. Some positive changes had been made such as the introduction of the Prevention and Wellbeing Service (PWS), which were making an identifiable difference to promoting a strengths-based, community focus for residents. However, the transformation plan was, in its current format, focussed on working with people with a learning disability with limited wider learning or improvement and staff told us they were not aware of any wider changes as a result of the transformation work.

The local authority's political and executive leaders were well informed about the potential risks facing adult social care. There was a scrutiny process in place with elected members through the Health Policy and Performance Board (PPB). Leaders told us there had been additional oversight put into place over and above the scheme of delegation due to the financial pressures of the local authority and they felt this was a positive step to give greater review of decisions. However, leaders and partners told us the Health PPB agenda covered both health and adult social care which they felt did not enable sufficient time for adequate scrutiny and challenge, and they would prefer a separate adult social care meeting.

### Strategic planning

The local authority used information about risks, performance, inequalities, and outcomes to inform its adult social strategy and plans. The local authority used data to inform its strategic change and development. The local authority had identified an increase in overdue annual reviews for people and had implemented a reviewing team to ensure people had a review of their care. The local authority was monitoring the data relating to this and had noted improvements in numbers of outstanding annual reviews and the team remained in place to continue their targeted work.

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The local authority had monthly multi-agency meetings which included partners and advocacy to discuss shared data and used this to identify emerging trends and how resources should be allocated to address these. Partners told us they had shared data, and this led discussions about joint priorities. Key Performance Indicators were fed back to the Chief Executive to ensure business plans could be updated to address any changes needed to the service. Staff told us an example of how data demonstrated additional resource was required to support unpaid carers and following this, additional carers assessors were resourced and implemented.

The local authority had a Workforce Development Plan to address any impact of staffing on their duties. Leaders told us there was a strong 'grow your own' culture, which meant staff were supported to achieve qualifications and progress their careers within the local authority. Staff told us how they shared knowledge and experience through informal ways such as team meetings and practice sessions and that this was beneficial and strengthened relationships across teams.

## Information security

The local authority had arrangements in place to maintain the security, availability, integrity and confidentiality of data, records and data management systems. Staff had access to secure email systems to support safe sharing of information with partners and there was an information governance team who oversaw the security and management of information. Where staff had access to multiple information systems, such as the emergency duty team who covered across two local authorities, staff told us of appropriate information security measures which were in place to protect people's data.

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# Learning, improvement and innovation

## Score: 3

3 - Evidence shows a good standard

### The local authority commitment

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.

### Key findings for this quality statement

#### Continuous learning, improvement and professional development

There was an inclusive and positive culture of continuous learning and improvement. Local authority staff had ongoing access to learning and support so that Care Act duties were delivered safely and effectively. Staff were supported and encouraged to carry out training relevant to their roles to support practice. Staff told us about Social Work Matters events which were held every three months to share best practice, knowledge, updates on services available, and any relevant information. One staff member told us they had presented a case at the event to share their experience working with someone who did not speak English as a first language and how they used a translator and provided all documentation in the person's preferred language.

There was support for continuous professional development. Staff were supported to progress in their career. There were members of staff who had completed their Apprenticeship, Assessed and Supported Year in Employment (ASYE), and had been supported to progress to more senior roles.

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There were some examples of co-production such as people who use services supporting with Interviews and reviewing policies and procedures. People told us they felt listened to and respected by the local authority; however, they told us change never really happened and improvements needed to be made to fully embed co-production as it was mostly used to consult with people rather than co-producing strategy. People who used services told us about their work interviewing people and their carers to gain feedback about supported living, one person told us they were completing a training course to be able to support the delivery of Oliver McGowan training, some people were also involved in making a video for The Social Care Institute for Excellence (SCIE) talking about their lives and the projects they had been involved in. Leaders identified there were opportunities to improve co-production further and ensure it was a part of routine service design.

The transformation programme was created as part of the Council's 3-year Reimagine Halton programme which began in April 2023, focusing on services for Adults with a Learning Disability, in particular Supported Living Services, Day Service Provision, Residential and Nursing Care Provision, Specialist Services and Respite Care Services. The focus of this work was to ensure a continued emphasis on meeting people's needs using a strengths and asset-based approach, whilst also reducing costs and delivering value for money. Staff told us the transformation programme had some good ideas, but they had yet to see any changes in practice.

The local authority commissioned the Institute of Public Care at Oxford Brooks University to carry out academic research, working in co-production with people who have a learning disability to gain their views and insight on what is needed in Halton. This work was still ongoing at the time of our assessment. Feedback from people regarding this work was positive.

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The One Halton Carers Strategy 2024-2027 and delivery plan were co-produced with unpaid carers across Halton, the local authority told us they arranged a carers forum to gain insight into what it was like to be a carer. Feedback we received from unpaid carers regarding co-production was mixed with some unpaid carers not being aware of any co-production projects. Unpaid carers told us they were unsure whether their input would make any real changes.

The local authority gave examples of how they used evidence-based practice and shared learning to improve their services. An example of this was through their corporate Equality, Diversity and Inclusion (EDI) network in which adult social care were heavily involved. The local authority told us how they sought guidance from neighbouring local authorities to see what worked well and what should be improved when considering EDI. This helped the local authority identify areas they wanted to focus on when improving EDI for their staff and the people of Halton.

Leaders had taken part in a reverse mentoring scheme within the local authority in which leaders were mentored by staff who were neurodivergent to raise awareness on what it is like to work and live for those people. Leaders told us how they planned to use this learning to raise awareness to staff within the local authority which in turn would impact on their skills and knowledge in the community. The local authority was sharing their learning from the implementation of reverse mentoring with other local authorities within the region.

## Learning from feedback

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The local authority learned from people's feedback about their experiences of care and support, and feedback from staff and partners. This informed strategy, improvement activity and decision making at all levels. For example, the Halton Strategy for Adults with a Learning Disability was co-produced to identify 5 changes to help unlock an equal life for people with a learning disability. Additionally, there had been some recent research carried out by the University of Chester which studied the experiences of people using care and support services. The findings from this research supported improvements in relation to the home care offer. The new home care offer was not rolled out at the time of our assessment but was due to be rolled out soon to improve choice for people wanting to commission their home care through the local authority.

Leaders identified feedback from people who use services could be improved and they were looking at ways to improve the uptake of people's feedback via surveys etc to better gain the views of people using services and their unpaid carers. The local authority had undertaken consultation with people who use services to obtain feedback on their experiences.

The local authority used learning from complaints to improve practice. The Local Government Social Care Ombudsman (LGSCO) review report 2023-2024 stated they had received 5 complaints in respect to adult social care in Halton, of which, none of these were upheld. The Adult Social Care Annual Report 2023-2024 stated Halton had received 45 complaints, this was an increase on the previous year in which the local authority received 29 complaints. Leaders had oversight of compliments and complaints, and appropriate action was taken in a timely manner.

There were processes to ensure that learning happened when things went wrong, and from examples of good practice. Leaders encouraged reflection and collective problem-solving. Staff could speak with their team, their manager, and leaders openly and honestly and gained advice and support both formally in supervision and informally.



# **Adult Social Care Care Quality Commission (CQC) Assessment Improvement Plan August 2025**

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
1.1	<p>Aim for people to only have to tell their story once</p> <ul style="list-style-type: none"> <li>Overall ambition is to have a named work approach to reduce the need for people to tell their story more than once.</li> </ul>	HoS – Care Management & PSW	Review – January 2026	<p>Use of the team transfer process outlined in the Social Care Practice guidance to support approach.</p> <p>Work being progressed in Complex Care Widnes team in respect to Supported Living settings – named workers will be identified. This to be replicated across Complex Care Runcorn Team.</p> <p>Approach with care homes to be explored with Quality Assurance Team.</p> <p>Ongoing work in respect to recruitment and retention of staff.</p>	Quarterly update to SMT
1.2	<p>Re-assessment or review – Reduction in waits</p> <ul style="list-style-type: none"> <li>Continue with the work already in place and being progressed which is addressing waiting lists/times, including the project regarding the use of AI which will support the reduction in waiting times in respect to re-assessment and reviews, but also initial assessments.</li> </ul>	HoS – Care Management & PSW	March 2026	<p>Care Reviews – Baseline position @ 28.2.25 :-</p> <ul style="list-style-type: none"> <li>As at 28.2.25, there were 2,075 people in receipt of a long-term service. Of those individuals, during the last 12 months, 1,793 reviews had been completed and there were 282 reviews outstanding.</li> </ul> <p>Target as at end March 2026 = <b>TBC</b></p> <p>NB. Need to ensure to take into account any reviews which have been identified as being needed within a 6 month period.</p>	Quarterly performance updates to SMT

				<p>Regular Performance meetings with Care Management need to be re-established.</p> <p>Progress in respect to AI developments are being shared and discussed at the Care Management Principal/Practice Manager meeting w/c 18.8.25 - Salesforce CRM and AI will be used in conjunction to support Adult and Children's Social Care workers in undertaking client reviews and assessments. Interviews with clients (subject to consent) will be recorded and automatically summarized, transcribed and inputted into the client's Eclipse case record (subject to the professional oversight of the social worker). The goal is to significantly reduce the SWs administration overhead, thereby improving productivity and allowing the SW more time to deploy their professional expertise.</p>	
1.3	<p>OT Assessments - Reduction in waits (<i>Link with 2.3</i>)</p> <ul style="list-style-type: none"> <li>Continue with the work already in place and being progressed which is addressing waiting lists/times, including the project regarding the use of AI which will support the reduction in waiting times in respect to re-assessment and reviews, but also initial assessments.</li> </ul>	Principal Occupational Therapist	March 2026	<p>OT Assessments – Baseline position @ 28.2.25 :-</p> <ul style="list-style-type: none"> <li>As at 28.2.25, there were 122 people waiting for an OT assessment.</li> </ul> <p>Target as at end March 2026 = <b>TBC</b></p> <p>Regular Performance meetings with Care Management need to be re-established.</p>	Quarterly performance updates to SMT



				<p>Progress in respect to AI developments are being shared and discussed at the Care Management Principal/Practice Manager meeting w/c 18.8.25 - Salesforce CRM and AI will be used in conjunction to support Adult and Children's Social Care workers in undertaking client reviews and assessments. Interviews with clients (subject to consent) will be recorded and automatically summarized, transcribed and inputted into the client's Eclipse case record (subject to the professional oversight of the social worker). The goal is to significantly reduce the SWs administration overhead, thereby improving productivity and allowing the SW more time to deploy their professional expertise.</p>	
1.4	Carers Assessments – Contingency Plans ( <i>Link with 6.3</i> )	HoS – Care Management & PSW	March 2026	<p>Contingency Plans – Baseline position @ 28.2.25 :-</p> <ul style="list-style-type: none"> <li>As at 28.2.25, zero.</li> </ul> <p>Process now in place for completing contingency plans and is being implemented.</p> <p>Target as at end March 2026 = 25% of contingency plans to have been completed.</p>	Quarterly performance updates to SMT
1.5	<p>Carers Assessments – Waits on phone</p> <ul style="list-style-type: none"> <li>Continue with the work already in place and being progressed</li> </ul>	HoS – Care Management & PSW	Review - March 2026	The Contact Centre has an Adult Social Care line, which is a priority line and between January and	Quarterly performance updates to SMT, to include update from

	which is addressing waiting lists/times in respect to Carers Assessments.		<p>December 2024, the average wait time was 12 mins and 22 seconds. In addition, we have direct email addresses for the Prevention &amp; Wellbeing Service and Occupational Therapy which are monitored throughout the day as part of duty. We direct partners to these emails addresses as much as possible e.g. they can email the inbox directly, if they need a call back, rather than going via the contact centre. These email addresses are also given to people open to a worker for easier contact.</p> <p>It is anticipated that work on the Customer Care Journey project will improve wait times. In the process of automating a number of high volume low skill services such as missed bins, tip permits, fly tipping, pest control etc which will free up advisors to deal with the social care calls in a more timely manner. Are also introducing a Customer portal so customers can access services 24/7 and will be working over the next year to move more services to this portal.</p> <p>As part of Website Improvements (<a href="#">Link to 2.4</a>), need to focus on content of ASC pages to ensure all information is on there and up to date. This will support the customer portal work.</p>	Contact Centre on average wait times in respect to the ASC phone line.
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				<p>Carer Assessments – Baseline position @ 28.2.25</p> <ul style="list-style-type: none"> <li>Waiting List Size = <b>6</b> waiting for an assessment to be allocated to a worker.</li> </ul> <p>Target as at end March 2026 = <b>TBC</b></p>	
1.6	<p>Financial Assessments – Reduction in waits</p> <ul style="list-style-type: none"> <li>Continue with the work already in place and being progressed which is addressing waiting lists/times</li> </ul>	Income, Assessment & Income Recovery Manager	March 2026	<p>New process now in place; since the CQC Assessment, the I&amp;A Team has continued to refine the referral and financial assessment processes to improve processing times.</p> <p>A standardised financial assessment referral form has been implemented within Eclipse for social work teams to use when identifying clients who require a financial assessment. This applies to clients with an existing service package as well as those considering a package of care.</p> <p>Stringent new procedural targets have been introduced for each stage of the financial assessment process, starting from the point a referral is received. For example initial contact to client by phone to arrange a telephone assessment appointment should be made within 2 working days of receipt of the financial assessment referral. Where targets are not met, reasons are documented to help identify areas for future improvement.</p>	<p>Quarterly performance updates to SMT – Performance updates will be based on the new procedural targets for the Service</p>

Financial Assessments - Baseline position @ 28.2.25:-

- Waiting List Size = **55** waiting for a financial assessment to be fully completed.
- Median waiting time (*from the commencement of service to financial assessment being completed for new cases*) - Over 12-month period 1.3.24 – 28.2.25.
  - Combined Median = **30 days**
  - Domiciliary Median = **15 days**
  - Residential Median = **28 days**
- Maximum waiting time (*from the commencement of service to financial assessment being completed for new cases*) - Over 12-month period 1.3.24 – 28.2.25
  - Domiciliary Maximum = **298 days**
  - Residential Maximum = **305 days**

Target as at end March 2026 - The service has put into place a KPI to monitor the percentage of new assessments that are completed within 30 days. The aim is to complete 75% of all new

				assessments within 30 days by the end of the year. (Q1/25: 74.25% were completed within 30 days) NB. The information requested by CQC as part of the Assessment process is not kept as standard by the service and has had to be produced manually, however from April 2026, the service should be in a position to generate this data in the required format.	
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## Quality Statement 2: Supporting People to Lead Healthier Lives (Score 3)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
2.1	Promoting preventative, strengths-based culture in Halton	Director of Adult Social Services	Review – March 2026	Strengths Based practice is now embedded and as part of our operational processes we routinely monitor this via case file audits, supervision, team meetings etc. We have developed a 'Train the Trainer' model for staff and people with lived experience to provide on-going training to new staff and refresher training for existing staff. We continue to engage across the Cheshire & Merseyside region Training Partnership, Research in Practice and Skills for Care to access strengths-based practice training opportunities, which are	Updates to SMT, when appropriate.

				<p>cascaded through the teams via learning sets.</p> <p>This is also demonstrated from a strategic perspective in Halton's Health &amp; Wellbeing Strategy, our Adult Social Care Commissioning and Prevention strategies.</p> <p>A new commissioning strategy/plan is due for completion by end of March 2026, whilst the Prevention strategy runs until March 2027.</p>	
2.2	<p>Carers - Access to preventative services</p> <ul style="list-style-type: none"> <li>Range and access to preventative services to be reviewed and monitored as part of the implementation of the Carers Strategy via the Carers Strategy Group</li> </ul>	Director – Commissioning & Prevention	Review – March 2027	<p>One Halton Carers Strategy 2024-2027 in place.</p> <p>Continuing and improving access to preventative services forms part of the implementation of the Strategy's Delivery Plan. The Carers Strategy Group to capture ongoing actions against delivery plan to support reporting through to SMT.</p> <p>A range of activities are undertaken to support carers, for example:-</p> <ul style="list-style-type: none"> <li>Carers Centre receive and distribute Carers Break Funding on behalf of the Council.</li> <li>A number of small local community &amp; voluntary organisations receive grant funding to facilitate activity to support carers.</li> </ul>	Carers Strategy Group to provide quarterly updates to SMT

				<ul style="list-style-type: none"> <li>• One off carer's breaks funding via a Direct Payment.</li> <li>• Home-Based Respite Care Service, which allows carers to have time away from their caring role, whilst maintaining a safe and consistent level of support to the person being cared for.</li> <li>• Accelerated Reform Funding received by Halton was passported over to Halton Carers Centre to develop a series of projects/interventions to explore ways to better support unpaid carers.</li> <li>• Halton Borough Council's Prevention and Wellbeing Service hold fortnightly drop-in sessions at the Halton Carers Centre, Runcorn on a Tuesday from 10am to 2pm.</li> </ul>	
2.3	<p>OT Assessments - Reduction in waits (<i>Link with 1.3</i>)</p> <ul style="list-style-type: none"> <li>• Continue with the work already in place and being progressed which is addressing waiting lists/times, including the project regarding the use of AI which will support the reduction in waiting times in respect to re-assessment and reviews, but also initial assessments.</li> </ul>	Principal Occupational Therapist	March 2026	<p>OT Assessments – Baseline position @ 28.2.25 :-</p> <ul style="list-style-type: none"> <li>• As at 28.2.25, there were 122 people waiting for an OT assessment.</li> </ul> <p>Target as at end March 2026 = <b>TBC</b></p> <p>Regular Performance meetings with Care Management need to be re-established.</p>	Quarterly performance updates to SMT

				Progress in respect to AI developments are being shared and discussed at the Care Management Principal/Practice Manager meeting w/c 18.8.25.	
2.4	Website Improvements	Director – Commissioning & Provision	Review – March 2026	<p>Customer Care journey project being taken forward. To support work, need to review ASC pages to ensure that all necessary information is contained on there and that it is up to date.</p> <p>Initial work to commence at the next Care Management Principal Managers meeting on 16<sup>th</sup> September.</p> <p>Discussion to be held at the next ASC Improvement Group 17.9.25 with Corporate colleagues regarding developments, requirements, etc.</p>	Quarterly updates to SMT
2.5	<p>Direct Payments - Local Authority rates &amp; Top Ups (<a href="#">Link to 4.2</a>)</p> <ul style="list-style-type: none"> <li>Review of the Direct Payments policy in respect to Top Ups will be required to ensure that the information contained reflects the position.</li> </ul>	HoS – Care Management & PSW	September 2025	Review of the Direct Payments Policy and ASC Charging Policy to take place to ensure that it is clear in the policies as to how Top Ups are dealt with. Policy Team to support with the review.	Updated policies to be presented to SMT, when ready

### Quality Statement 3: Equity in Experience and Outcomes (Score 3)



No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
3.1	Increase staff participation on staff network groups <ul style="list-style-type: none"> <li>As part of implementation of the SCWRES, undertake promotional activity to increase participation in the staff network groups.</li> </ul>	Director – Care Management, Safeguarding & Quality	September 2025	Promotional activity being undertaken via the ASC EDI Group with the aim to increase participation from an ASC perspective into the Council's staff network groups, with work being fed into the overarching Corporate EDI group.	ASC EDI Group to update SMT with progress

#### Quality Statement 4: Care Provision, Integration and Continuity (Score 2)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for completion/ key dates	Progress	Monitoring Arrangements
4.1	Limited Choice of Home Care providers	Director – Commissioning & Provision	Complete	New multi-provider framework is now in place (operational since 28.4.25) and there are now 4 main contracted home care providers, with a further 8 providers on a framework.	Monitoring will take place as part of normal contracting arrangements.
4.2	Direct Payments - Local Authority rates & Top Ups ( <a href="#">Link to 2.4</a> ) <ul style="list-style-type: none"> <li>Review of the Direct Payments policy in respect to Top Ups will be required to ensure that the information contained reflects the position.</li> </ul>	HoS – Care Management & PSW	September 2025	Review of the Direct Payments Policy and ASC Charging Policy to take place to ensure that it is clear in the policies as to how Top Ups are dealt with. Policy Team to support with the review.	Updated policies to be presented to SMT, when ready

4.3	Specialist Care – Out of Borough <ul style="list-style-type: none"> <li>Establish Enhanced Dementia Working Group</li> </ul>	Director of Adult Social Services	Review - September 2025	Enhanced Dementia Working Group now established. Work being progressed by HoS – ILS & Mental Health.  Proposal for development of an enhanced dementia model has been drafted and is due to be considered by SMT and the Enhanced Dementia Working Group at it's next meeting planned for September 2025.	Update to SMT
4.4	Capacity within home care and care homes – Limited planning <ul style="list-style-type: none"> <li>Planning has taken place as evidenced in the MTFS, however further planning will take place as part of updating the Market Position Statement (MPS).</li> </ul>	Director – Commissioning & Provision	March 2026	Work to commence on the new MPS in Q3/Q4 2025/26.	MPS to be presented to SMT, when ready
4.5	Investment in VSCFE ( <i>Link to 5.1</i> ) Work creatively with the sector. Reduction in funding <ul style="list-style-type: none"> <li>Ongoing opportunities to be explored to work with the VSCFE sector with regards to future opportunities and service redesign</li> </ul>	Director – Commissioning & Provision	Review – March 2026	In 2024/25 11 voluntary and community sector organisations had contracting arrangements directly in place with Adult Social Care, in addition to another 6 local small community & voluntary organisations who received grant funding to facilitate activity to support carers.	Update to SMT
4.6	Carers – Access to breaks/respite (planned & unplanned): Pre-Bookable	HoS – Care Management & PSW	October 2025	We have in place the Bredon short stay residential respite service (LD specific), along with the Home-Based Respite Care Service, which is pre-bookable.	Update to SMT

				<p>We also provide respite for people with physical disabilities and mental health needs.</p> <p>In 2024/25, 4,345 hours were delivered via the Home-Based Respite Care Service, which allows carers to have time away from their caring role, whilst maintaining a safe and consistent level of support to the person being cared for.</p> <p>Respite Policy in place. Short Term Task &amp; Finish Group to be established to review the practical issues associated with implementation of the policy in order to support access to respite.</p>	
4.7	QA Process for In-house care homes separate to QA Process for external care homes	HoS – ILS & Mental Health	Complete	QA Process for internal and external care homes, now fall under the QA Team	N/A
4.8	<p>Work with care providers – cost of care being transparent &amp; fair</p> <ul style="list-style-type: none"> <li>• Ongoing process via the annual fee setting process</li> <li>• Ongoing update of the Market Sustainability Plan</li> </ul>	HoS – ILS & Mental Health	Annual Process	HoS – ILS & Mental Health to produce report for Executive Board in October 2025 to seek approval for ongoing consultation arrangements with providers as part of the annual fee setting process. This would support the ability to bring forward the fee setting process, so providers receive confirmation of fees earlier than they have done previously – aim would be to agree fees by February.	Update to SMT

				Market Sustainability Plan to be updated as required in line with national guidance.	
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#### Quality Statement 5: Partnerships and Communities (Score 2)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
5.1	Investment in VSCFE ( <i>Link to 4.5</i> ) – Work creatively with the sector. Reduction in funding <ul style="list-style-type: none"> <li>Ongoing opportunities to be explored to work with the VSCFE sector with regards to future opportunities and service redesign</li> </ul>	Director – Commissioning & Provision	Review – March 2026	In 2024/25 11 voluntary and community sector organisations had contracting arrangements directly in place with Adult Social Care, in addition to another 6 local small community & voluntary organisations who received grant funding to facilitate activity to support carers.	Update to SMT

#### Quality Statement 6: Safe Pathways, Systems and Transitions (Score 3)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
6.1	Transitioning to adult service when individuals open to mental health services – Criteria <ul style="list-style-type: none"> <li>Review and update policy</li> </ul>	HoS – Care Management & PSW	September 2025	Principal Manager, Complex Care Widnes/Transition Team leading review work with support from the Policy Team.  Work being undertaken with partners that is feeding into policy review.	Revised Policy to be presented to SMT when ready

6.2	Transition Service – Promotion of Service	HoS – Care Management & PSW	November 2025	<p>Although information is available via the Local Offer, the Transition information needs to be promoted as part of ASC web pages and will need to link with the website development (<i>Link to 2.4</i>).</p> <p>As part of the review and update of the Transition policy (<i>Link to 6.1</i>), associated promotional activity will take place across ASC and the community.</p>	Update to SMT
6.3	<p>Carers Assessments – Contingency Plans (<i>Link to 1.4</i>)</p> <ul style="list-style-type: none"> <li>Process now in place for completing contingency plans</li> </ul>	HoS – Care Management & PSW	March 2026	<p>Contingency Plans – Baseline position @ 28.2.25 :-</p> <ul style="list-style-type: none"> <li>As at 28.2.25, zero.</li> </ul> <p>Process now in place for completing contingency plans and is being implemented.</p> <p>Target as at end March 2026 = 25% of contingency plans to have been completed.</p>	Quarterly performance updates to SMT

#### Quality Statement 7: Safeguarding (Score 3)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
7.1	DoLS – Backlog of applications	HoS – ILS & Mental Health	March 2026	DoLS – Baseline position @ 28.2.25:-	Quarterly performance updates to SMT

	<ul style="list-style-type: none"> <li>Continue with the work already in place and being progressed which is addressing waiting lists/times</li> </ul>			<ul style="list-style-type: none"> <li>Between 1st March 2024 and 28th February 2025, 917 people were referred for a DoLS assessment.               <ul style="list-style-type: none"> <li>As at 28.2.25:-</li> <li>707 DoLS assessments have been completed.</li> <li>210 DoLS assessments waiting to be completed:-                   <ul style="list-style-type: none"> <li>92 awaiting completion for people in Care Homes; and</li> <li>118 are from hospital applications which are unlikely to be completed as they are generally discharged from hospital.</li> </ul> </li> </ul> </li> </ul> <p>Target as at end March 2026 = Waiting List: 150 DoLS assessments waiting to be completed.</p> <p>Work taking place with the acute trusts in respect to hospital applications.</p>	
7.2	Safeguarding Enquiries – Outcome notification	HoS – ILS & Mental Health	Complete	Review taken place around feedback loop as part of processes and S.42	N/A

	<ul style="list-style-type: none"> <li>Process to be reviewed to ensure that agencies are informed of outcomes of safeguarding enquiries.</li> </ul>			<p>form has been updated to ensure feedback is given.</p> <p>As part of normal management audit processes, regular checks are undertaken to ensure this process is followed.</p>	
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#### Quality Statement 8: Governance, Management & Sustainability (Score 2)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
8.1	<p>Transformation Programme</p> <ul style="list-style-type: none"> <li>Strategy and engagement needed to ensure impact controlled and outcomes positive</li> </ul>	Chief Executive	October 2025	Corporate review of Transformation programme is taking place, which will include the ASC transformation programme.	Updates to the Transformation Programme Board

8.2	Scrutiny Function – Not sufficient focus on ASC	Chair – Health and Social Care Policy & Performance Board	Council wide review - <b>TBC</b>	<p>Agenda planning meetings are held with the Chair and Vice Chair in advance of agreeing the agenda for each of the Board meetings. These meetings are used to identify the priority items, both from a health and adult social care perspective, to go forward to the Board meetings for scrutiny.</p> <p>The Board receives an Information Briefing Bulletin in advance of each of the Board meetings. The Information Briefing is a way of helping to manage the size of the agendas of the Board meetings better and contains topics which would just be presented to the Board for information. This allows the focus of the meetings to be on those areas which require specific discussion, scrutiny and challenge.</p> <p>During 2024/25, the Board meetings over that period demonstrated a focus on Adult Social Care. 50% of the Policy Issues received by the Board during this period had a focus on Adult Social Care.</p> <p>In addition to the formal board meetings, each year the Board choose one scrutiny work topic, the outcome of which goes forward to Executive Board. This allows for a more in depth approach to scrutiny to be taken to a health or adult social care area where required.</p>	<p>PPB Annual report reviewed by Scrutiny Co-ordinators meeting</p> <p>Council wide review – update reports to Management Team</p>
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			<p>In February 2025, work was undertaken to review the roles of the PPB in light of the new Corporate Plan and as such, it was recommended that the titles of the PPBs change to better reflect the work of the Boards. This included Health PPB. It was recommended that the title change to Health &amp; Social Care. It was recognised that incorporating the words Social Care better reflects the scope of this Board's work. These changes were approved by Executive Board on 17th April as part of the annual review of the Council's Constitution and went to full Council on 16th May for agreement.</p> <p>The Council has recognised that the approach to Scrutiny needs to be evolved to meet the prevailing environment. The Corporate Policy function are picking up a project. Commencing in September 2025, working with the LGA and the Centre for Governance &amp; Scrutiny to baseline current activity and bring forward a Council-wide review.</p>	
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Work

## Quality Statement 9: Learning, Improvement and Innovation (Score 3)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
8.1	Co-production: Fully embed in service design and strategy development <ul style="list-style-type: none"> <li>Establish Co-production steering group</li> </ul>	HoS – Commissioning	Review – March 2026	Advisory Group established and first meeting took place on 23.7.25.  Work programme for the group to be developed.	Quarterly update reports to SMT
8.2	Improve uptake of people's feedback via surveys etc <ul style="list-style-type: none"> <li>Encourage use of the Communications &amp; Engagement framework and associated operational process to promote activities and encourage people to participate in things like focus groups, provide comments on draft service development, policy or strategy work, gain feedback, questionnaires/surveys etc.</li> <li>Collate and report on information gathered through engagement activities so that SMT may retain oversight of emerging trends and themes as part of our continuous improvement approach.</li> </ul>	HoS – Commissioning	Review – March 2026	Work has been carried out to operationalise the Framework to support staff with promoting communication or engagement activity etc. Report went to SMT in April 2025 outlining the activity that had taken place during Quarter 4 2024/25, as a result of the Framework.	Quarterly update reports to SMT

**REPORT TO:** Executive Board

**DATE:** 11<sup>th</sup> September 2025

**REPORTING OFFICER:** Executive Director Environment and Regeneration

**PORTFOLIO:** Community Safety

**SUBJECT:** Domestic Abuse Accommodation

**WARD(S)** Borough wide

## **1.0 PURPOSE OF THE REPORT**

- 1.1** Request for Waiver of Standing Orders:  
A request for a waiver in compliance with Procurement Standing Order 1.14.4 iv of part 3.1 and 3.2 of Procurement Standing Orders is sought to allow the continuation of a contract with SHAP (St Helens Accommodation Project) to deliver on behalf of the Council, the Domestic Abuse Supported Accommodation Service, for a period of one year from 11<sup>th</sup> January 2026 to 10<sup>th</sup> January 2027.

## **2.0 RECOMMENDATION: That**

- 1) The contents of this report are noted; and**
- 2) The Board approves the contract with SHAP that expires on 10<sup>th</sup> January 2026 to be extended for twelve months without going through the procurement process, in pursuance of Procurement Standing Order 1.14.4 (non-emergency procedures – exceeding a value threshold of £100,000), seeking to waive part 3.1 and 3.2 of Procurement Standing Orders.**

## **3.0 SUPPORTING INFORMATION**

- 3.1** The Domestic Abuse Act 2021 places a statutory duty on tier one local authorities relating to the provision of support to victims of domestic abuse and their children residing within refuges and other safe accommodation hence, Halton has a duty to provide accommodation for victims and their families fleeing violence. This may be for both local residents as well as victims from outside the borough where fleeing from the location of perpetrators is appropriate.
- 3.2** Halton currently has a refuge contractual arrangement with SHAP who were commissioned in 2023 to deliver Halton Domestic Abuse Refuge accommodation at the current refuge building in Widnes; the

building is owned by Riverside. Services are provided to victims of domestic abuse aged 18 and over, and also supports 16/17 year-olds who are referred into the service through MARAC (multi-agency risk assessment conference). Following the remodelling of the refuge in 2014 into self-contained units, the service also supports male victims fleeing or at risk of domestic abuse.

3.3 The existing contract ends on 10<sup>th</sup> January 2026. The request for authorisation of a waiver rather than implementing a tender process is due to the following:

- The current service is well known and performing well and meeting all required expectations. In the current situation it would be difficult for a new provider to become established as it a specialist provision.
- This contract delivers on a statutory duty to provide refuge accommodation so there can be no gap in service provision.

3.4 The value of a contract extension for one year from 11<sup>th</sup> January 2026 to 10<sup>th</sup> January 2027 is £200,769 and will be met from existing service budget.

3.5 There is a wider programme of work around accommodation which will be progressed within the timescale of the waiver.

#### **4.0 POLICY IMPLICATIONS**

4.1 The method of procurement complies with both the Procurement Act 2023 and the Council's Procurement Standing Orders.

4.2 The Domestic Abuse Act 2021 places a statutory duty on tier one local authorities relating to the provision of support to victims of domestic abuse and their children residing within refuges and other safe accommodation hence, Halton has a duty to provide accommodation for victims and their families fleeing violence. This may be for both local residents as well as victims from outside the borough where fleeing from the location of perpetrators is appropriate.

#### **5.0 FINANCIAL IMPLICATIONS**

5.1 The value of the contract extension for one year to 10<sup>th</sup> January 2027 is £200,769 and is within Halton's budget.

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

##### **6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence**

To remove barriers in accessing crisis accommodation by working across partnership to address the wider determinants of health.

**6.2 Building a Strong, Sustainable Local Economy**

Domestic abuse affects 1 in 3 women and 1 in 5 men. With UK employment rate hovering at around 75%, that means that as many as 1.5 million employees will have experienced domestic abuse within the past 12 months. This is estimated to cost the UK economy close to £2bn annually, with output lost due to reduced productivity; unplanned time off; lost wages; sick pay. The accommodation offer along with the support provided will ease pressure for victims at a time of crisis and support them to maintain or return to employment.

**6.3 Supporting Children, Young People and Families**

The accommodation offer supports families and children at a distressing time in their lives often through traumatic experience. The service provides accommodation and support whilst linking to the wider service offer to empower victims and children in re-establishing their lives in a safe, supportive environment.

**6.4 Tackling Inequality and Helping Those Who Are Most In Need**

Part of the service offer includes raising awareness, understanding domestic abuse, and tackling it in all its forms. Taking positive action to protect victims and children from further harm and providing access to supportive measures to reduce the number of domestic incidents, reducing the risk of further abuse.

**6.5 Working Towards a Greener Future**

None to report.

**6.6 Valuing and Appreciating Halton and Our Community**

This area of work supports people at a time when they are most in need. It is not only a statutory duty, but there is also recognition the support provided will impact on the trajectory of victims and children in having fulfilling life experiences.

**7.0 RISK ANALYSIS**

7.1 The current contract for these services will end on 10<sup>th</sup> January 2026; should the above not be agreed, the services will cease delivery of the provision and there will be a detrimental effect on victims that require emergency accommodation when fleeing domestic abuse.

7.2 If contracts for Domestic Abuse Accommodation are not in place, this may lead to the Council being unable to fulfil its statutory duty.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 The current proposal would not impact upon any equality and diversity issues as all relevant protected characteristics would be

unaffected by the proposal.

**9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 None to report.

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

‘None under the meaning of the Act.’

**REPORT TO:** Executive Board

**DATE:** 11 September 2025

**REPORTING OFFICER:** Executive Director Environment and Regeneration

**PORTFOLIO:** Employment Learning, Skills and Community

**SUBJECT:** DCBL Stadium - New PAVA system and Structural Steel Maintenance Works and Pitch Replacement

**WARD(S)** Central & West Bank

## **1.0 PURPOSE OF THE REPORT**

- 1.1 The purpose of the report is to seek Member approval to proceed with necessary works to the Public Address Voice Alarm (PAVA) System, the Structural Steelwork Repairs and replacement Pitch at the DBCL Stadium as identified in the report.

## **2.0 RECOMMENDATION: That**

- 1) **The capital works identified in the report in sections 3.3 to 3.6 be approved;**
- 2) **Consideration be given to the options outlined in paragraph 5.4 below regarding how the annual capital financing costs might be funded;**
- 3) **Council be asked to add these works to the capital programme based upon the totals outlined in paragraph 5.1 below, subject to further work to establish detailed costs and whether to proceed with option A or option B;**
- 4) **Approval of the detailed costs and the option to be undertaken, be delegated to the Executive Director Environment and Regeneration, in consultation with the Portfolio Holder for Employment Learning, Skills and Community.**

## **3.0 SUPPORTING INFORMATION**

- 3.1 The Public Address Voice Alarm (PAVA) system at the stadium is in poor condition, it does not now meet current regulations and is not functioning correctly, thus is not fit for purpose. We have investigated the possibility of repairing the existing system, but it is evident that this is not feasible as such replacement is the only viable option.

- 3.2 The introduction of the Terrorism (Protection of Premises) Act 2025, also known as the 'Protect Duty' aims to improve public safety by ensuring certain public venues and events implement measures to protect against terrorism. The replacement of the PAVA system at the stadium will help ensure that we meet the requirement of the act.
- 3.3 We have recently been through a procurement process in respect of the PAVA system to obtain competitive prices for the necessary work. The lowest tender return amounted to circa £850k inclusive of a contingency and fees.
- 3.4 The above figure accounts for works to all four stands, we could proceed on a phased basis however initially undertaking work to the South, West and North stands, with a view to completing the East Stand at a later date. The reduced cost for this amounts to circa £725k inclusive of a contingency and fees.
- 3.5 Problems with corrosion to the exposed structural steelwork at the Stadium was first identified in the Stadium's general safety certificate report dated October 2017. Since then, works to the worst areas of corrosion, the barriers, has been completed, but the latest safety report is now recommending that we progress with the dealing with the corrosion elsewhere to the steelwork.
- 3.6 We have not gone through a procurement process as yet in respect of the structural steelwork repairs/redecoration works, we have however obtained estimated costs for the work. The estimated cost for the repair/redecoration works amounts to circa £725k inclusive of fees to all four stands. We could proceed on a phased basis however commencing with works to the South, West and North stands only, the budget estimate for this amounts to circa £600k inclusive of fees. We will clearly need to go through a procurement process in respect of the above to obtain competitive quotes prior to proceeding.
- 3.7 A recent assessment conducted by specialist consultants, SportsLab, has confirmed that the stadium's artificial playing surface is exhibiting measurable signs of performance decline. These findings are consistent with the pitch's age and intensity of use. While current test results remain within the minimum acceptable thresholds, they are trending toward sub-optimal levels.
- 3.8 The report recommends that planning for full resurfacing should now commence. Prior to any capital investment, a more detailed investigation is advised to assess the integrity of the base layer and the effectiveness of the drainage system. This will be critical to ensuring long-term compliance with performance standards and to inform the scope of any future works.



- 3.9 In the short term, remedial works are being scheduled to address immediate concerns. These include an infill top-up and potential surface reconditioning, with an estimated cost of £10,000. Without this intervention, further deterioration could result in the pitch falling below compliance standards.
- 3.10 To support long-term planning, quotations will be obtained for a full pitch replacement. The estimated cost for a new artificial surface, including the installation of a new shock pad, is approximately £600,000.
- 3.11 Additionally, the stadium will seek quotations for alternative surface options, including hybrid and natural grass systems. Depending on the specification, these options could cost up to £1.2 million.
- 3.12 An artificial pitch would enable continued community access, supporting grassroots sports, school programmes, and local club activities. It would also provide consistent and reliable training facilities for stadium tenants, regardless of weather conditions or surface wear. The artificial surface is durable and generally more cost-effective to maintain over time. However, it would significantly limit the stadium's ability to host showcase events sanctioned by the RFL, RFU, and FA, as these governing bodies typically require natural or hybrid surfaces for elite-level fixtures. This limitation could impact the stadium's profile and revenue potential from high-profile matches.
- 3.13 In contrast, a grass or hybrid pitch would meet the standards required to bid for and host premier showcase events from the RFL, RFU, and FA. This would elevate the stadium's reputation and open up opportunities for show case events. The natural playing surface aligns with professional sport expectations and enhances the venue's appeal for top-tier competitions. However, the installation and ongoing maintenance of a grass or hybrid pitch would be significantly more expensive. It would also prevent community usage and restrict tenant access, particularly for training, in order to preserve pitch quality and avoid overuse.

#### **4.0 POLICY IMPLICATIONS**

- 4.1 There are no policy implications for the above work. The procurement process will comply fully with the Council's procurement policy and standing orders.

## 5.0 FINANCIAL IMPLICATIONS

- 5.1 The estimated capital costs to carry out the works are as indicated below. This would require Council to approve an amendment to the capital programme to include these cost estimates.

Works	All stands and Grass / Hybrid	South, West and North Stands only and Artificial
	<i>Option A</i>	<i>Option B</i>
PAVA system	£850,000	£725,000
Steelwork Repairs	£725,000	£600,000
Pitch Replacement	£1,200,000	£600,000
Total	£2,775,000	£1,925,000

- 5.2 Based upon the capital expenditure estimates above, the annual cost of financing this expenditure would be approximately £0.235m for Option B and £0.373 for Option A.
- 5.3 There is no budget provision currently available to meet this annual revenue cost, therefore, it would need to be included as growth within the 2026/27 revenue budget. Given that the Council's revenue budget gap is currently being funded by borrowing under the Exceptional Financial Support arrangement, the above growth would increase the budget gap and therefore the amount of EFS borrowing required and associated cost.
- 5.4 Alternative options for funding/reducing the annual capital financing costs would include;
- obtaining a capital contribution from the stadium's tenants
  - significantly increasing the stadium tenant's annual rent
  - seeking external grant funding towards elements of the works
  - utilising the Council's building maintenance budget to fund the capital financing costs, thereby reducing the budget available in future years for maintenance of the remainder of the Council's property portfolio
  - deleting/reducing other schemes currently included within the Council's capital programme

## 6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

- 6.1 **Improving Health, Promoting Wellbeing and Supporting Greater Independence**  
**Pitch Replacement:** Supports physical activity and community sports, promoting health and independence.
- 6.2 **Building a Strong, Sustainable Local Economy**  
**Investment in Infrastructure:** Capital improvements stimulate local economic activity through procurement and employment.  
**Pitch Options:** A hybrid or natural pitch could attract elite events,

boosting tourism and local business.

**Artificial Pitch:** Enables consistent community use, supporting grassroots sports and local clubs.

### 6.3 **Supporting Children, Young People and Families**

**Artificial Pitch Benefits:** Facilitates school programmes, youth clubs, and family-friendly activities.

**Safe Stadium Environment:** Encourages family attendance and participation in events.

### 6.4 **Tackling Inequality and Helping Those Who Are Most In Need**

**Community Access to Facilities:** Artificial pitch supports inclusive access for all groups, including those with fewer resources.

**Safety Improvements:** Ensures equitable protection for all visitors, regardless of background.

### 6.5 **Working Towards a Greener Future**

None identified.

### 6.6 **Valuing and Appreciating Halton and Our Community**

**Investment in a Key Community Asset:** Demonstrates commitment to maintaining and enhancing a valued public venue.

**Support for Local Events and Identity:** Improvements position the stadium as a hub for community pride and engagement.

## 7.0 **Risk Analysis**

7.1 Failure to upgrade the PAVA system will leave the Stadium in a vulnerable position as currently the system does not meet current regulations so this may impact on our ability to hold events at the Stadium in the future. It will also impact on ensuring that the building meets the requirements of the Terrorism (Protection of Premises) Act 2025.

7.2 Failure to undertake the remedial/redecoration works to the exposed structural steelwork will result in the further deterioration of the protective coating to the steelwork, which will ultimately lead to there being a health & safety risk which will negatively impact on the stadium.

## 8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 None to report

## 9.0 **CLIMATE CHANGE IMPLICATIONS**

9.1 None to report.

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

**10.1** None under the meaning of the Act.

<b>REPORT TO:</b>	Executive Board
<b>DATE:</b>	11 <sup>th</sup> September 2025
<b>REPORTING OFFICER:</b>	Executive Director Environment and Regeneration
<b>PORTFOLIO:</b>	Environment and Urban Renewal
<b>SUBJECT:</b>	Review of the Merseyside and Halton Joint Waste Local Plan
<b>WARD(S)</b>	Borough wide

## **1.0 PURPOSE OF THE REPORT**

- 1.1 The Merseyside and Halton Joint Waste Local Plan provides the framework for waste related planning. This report is a review of the policies within the Joint Waste Local Plan and establishes whether they are still fit for purpose.

## **2.0 RECOMMENDATION: That the Board approves the Liverpool City Region Combined Authority Waste Local Plan.**

## **3.0 SUPPORTING INFORMATION**

- 3.1 The Local Plan for Halton currently comprises the adopted Delivery and Allocations Local Plan (2022) and the Joint Waste Plan (2013). The Merseyside and Halton Joint Waste Local Plan (JWLP) was adopted in July 2013 and since then has provided the local planning policy framework informing the determination of waste planning applications in the administrative areas covered by Halton Council, Knowsley Council, Liverpool City Council, Sefton Council, St. Helens Council and Wirral Council (the Plan Area).
- 3.2 The Review of the Merseyside and Halton JWLP June 2025 is an update to the JWLP adopted in 2013. The Waste Local Plan is supported by a Waste Needs Assessment (WNA), which was first published in 2011 and has been reviewed alongside the JWLP. This is to provide an up-to-date picture of the amount of waste produced and handled within the plan area as well as, future arisings and management needs.
- 3.3 This 2025 JWLP document reviews the original policies in the 2013 version to understand whether they are still fit for purpose and in line with Local and National Policy. The report concluded that the majority of the policies in the plan still remain fit for purpose. The report also found that over the last 10 years, 75 waste planning

applications have been determined, with 95% being approved. The 16 policies in the JWLP were used a total of 366 times when determining these applications.

- 3.4 The Council has been liaising with the partner authorities across the Liverpool City Region on the review of this document, but the review has been completed by officers of the Merseyside Environmental Advisory Service (MEAS).

#### **4.0 POLICY IMPLICATIONS**

- 4.1 The National Planning Policy Framework (NPPF) does not address waste planning specifically; waste planning policies are laid out in the National Planning Policy for Waste (NPPW). The NPPW is to be read alongside the NPPF, the National Waste Management Plan for England 2021 and the National Policy Statements (NPS) for wastewater and hazardous waste.
- 4.2 The NPPF has been updated several times since the 2013 JWLP plan was adopted, however there have been few changes relating specifically to waste planning.
- 4.3 New housing figures for the Liverpool City Region will affect the amount of waste generated in the future. For now, the JWLP provides sufficient capacity and the policy framework to address immediate needs but impacts of new housing numbers will need to be addressed in the next full review.

#### **5.0 FINANCIAL IMPLICATIONS**

- 5.1 The review of the JWLP incurs no direct financial costs to the Council.

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

##### **6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence**

Poor waste management can lead to health problems. The JWLP ensures that waste is managed, exposure to pollutants is limited and the quality of the environment is improved. This should all help improve health and wellbeing in the borough.

##### **6.2 Building a Strong, Sustainable Local Economy**

The JWLP promotion of clean, well-managed physical environments attracts investment, while helping to keep the workforce healthy. The JWLP also enables the development of new waste infrastructure, such as Energy from Waste Plants which creates job opportunities.

##### **6.3 Supporting Children, Young People and Families**

JWLPs help reduce litter and pollution in public areas, which are often used by children and young people. Also, encouraging sustainable ways of waste disposal helps reduce the impact of climate change. Promoting sustainability will benefit future generations.

#### **6.4 Tackling Inequality and Helping Those Who Are Most In Need**

Poor management of waste disproportionately affects low-income and deprived communities. JWLPs aim to reduce pollution and waste which also effects the most vulnerable.

#### **6.5 Working Towards a Greener Future**

JWLPs aim to improve waste management, reduce emissions, and promote sustainability. All of these practices will help combat climate change and work towards the Councils green targets.

#### **6.6 Valuing and Appreciating Halton and Our Community**

The JWLP helps protect vulnerable groups and helps people adapt to the impacts of climate change. It helps improve the general air quality within the region, which reduces health risks in the community.

### **7.0 Risk Analysis**

7.1 The original JWLP was adopted in 2013. Since then, there has been multiple updates to National Policy. If the JWLP does not align with national legislation, the council may be vulnerable to legal challenges and struggle to defend planning decisions. Having an up-to-date JWLP means the council can be confident when making decisions on waste related issues.

7.2 The risk of not having an up-to-date JWLP needs to be fully understood. Without a current JWLP, the Council has no certainty over where poor waste infrastructure schemes will be permitted; appeals against refusal of planning permission are more likely to be upheld in the developer's favour with the possibility of costs awarded against the Council. An up-to-date JWLP is needed to retain local control over decision making.

### **8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 There are no direct equality or diversity issues raised in this report.

### **9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 The JWLP provides an opportunity to shape and manage waste development and its impact on the Climate by encouraging the use of more sustainable and innovative technologies. This will help reduce the Council's carbon footprint and achieve net zero by 2040.

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

Document	Place of Inspection	Contact Officer
National Planning Policy Framework (NPPF 2025)	Municipal Building, Widnes	Rebecca Taylor
National Planning Policy for Waste (NPPW)	Municipal Building, Widnes	Rebecca Taylor
National Waste Management Plan for England 2021	Municipal Building, Widnes	Rebecca Taylor
National Policy Statements (NPS) for wastewater and hazardous waste	Municipal Building, Widnes	Rebecca Taylor
Halton Delivery and Allocations Local Plan (DALP 2022)	Municipal Building, Widnes	Rebecca Taylor





# **Review of the Merseyside and Halton Joint Waste Local Plan**

## **Summary of Evidence and Conclusions**

### **June 2025**



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## 1. Introduction

- 1.1. The Merseyside and Halton Joint Waste Local Plan (JWLP) was adopted in July 2013 and since then has provided the local planning policy framework informing the determination of waste planning applications in the administrative areas covered by Halton Council, Knowsley Council, Liverpool City Council, Sefton Council, St. Helens Council and Wirral Council (the Plan Area). Over the last 10 years, 75 waste planning applications have been determined, with 95% being approved. The 16 policies in the JWLP were used a total of 366 times when determining these applications.
- 1.2 There is a statutory requirement for local planning authorities to review their local plan policies at least every 5 years from the date of their adoption. This requirement is set out in Regulation 10A of The Town and Country Planning (Local Planning) (England) Regulations 2012 (as amended)<sup>2</sup>. Paragraph 33 of the National Planning Policy Framework (NPPF) indicates that policies “*should be reviewed to assess whether they need updating at least once every five years, and should then be updated as necessary.*”
- 1.3 Due to resource constraints, the JWLP, has passed the 5 year review stage, as such, it is now vital that the JWLP is reviewed to assess if the vision and objectives of the Plan are on track to be achieved and whether the Plan’s policies are proving to be effective and remain fit for purpose.
- 1.4 The review has been completed by officers of Merseyside Environmental Advisory Service who provide specialist waste planning advice to the constituent councils and were involved in developing the JWLP. The work has been overseen by the WLP Review Group comprising planning officers from each of the councils, with regular reports to the Liverpool City Region Chief Planning Officers Group.
- 1.5 The review is set out in a series of topic papers have been prepared which provide the evidence informing the conclusions of the review. These are as follows:
  - Topic Paper 1: Review of Policies and Annual Monitoring Report (AMR) data;
  - Topic Paper 2: Review of consistency with National Policy and Climate Emergency;
  - Topic Paper 3: Spatial Strategy & Sites Review;
  - Topic Paper 4: Duty to Cooperate Engagement;
  - Topic Paper 5: Waste Needs Assessment
- 1.6 This report summarises the findings from the topic papers and draws this evidence together to provide conclusions on the review process.

## 2. Paper 1: Review of Policies and AMR Data

2.1 Policy Review has been informed by the AMR data over the Plan Period, along with the other papers summarised below. The results of the policy review are shown in the table below. The policies all remain consistent with NPPW.

Policy	Review Summary	Conclusion
WM0 Presumption in Favour of Sustainable Development	This policy remains consistent with NPPF.	The policy remains fit for purpose for the remainder of the plan period.
WM1 Guide to Site Prioritisation	The policy has been applied throughout the plan period. It remains an important policy for screening all waste planning applications for new facilities.	The policy remains fit for purpose for the remainder of the plan period.
WM2 Sub Regional Site Allocations	No applications have come forward on these allocations but the policy is used as part of the implementation for policy WM1. Some of the allocations are no longer available, but sufficient sites remain available.	The policy remains fit for purpose for the remainder of the plan period.
WM3 Allocations for District-level Site	A couple of applications have come forward on these site allocations to date. The policy is used for implementation of policy WM1. Some of the allocations are no longer available, but sufficient sites remain available.	The policy remains fit for purpose for the remainder of the plan period.
WM4 Allocations for Inert Landfill	Both allocations for inert landfill are now operational and have sufficient capacity available beyond the Plan Period	The policy remains fit for purpose for the remainder of the plan period.
WM5 Areas of Search for Additional Small-scale Waste Management Operations and Re-processing Facilities	It has been an important policy for assessing applications for new waste management facilities. The areas of search are sufficiently large and spaced out to provide enough future waste sites for the duration of plan period, should they be needed.	The policy remains fit for purpose for the remainder of the plan period.
WM6 Additional HWRC Requirements	This policy was specifically written to manage the requirements of MRWA for Liverpool at the time of preparing the WLP. Likely to be needed as new legislative requirements rolled out for the whole LCR.	This policy remains fit for purpose for the remainder of the plan period, but will need to reviewed to widen search area in the future.
WM7 Protecting Existing Waste Management Capacity for Built Facilities and Landfill	Used both to prevent loss of existing waste infrastructure and to enable enhancements to existing infrastructure. It's been a well-used policy and likely to be going forward.	This policy remains fit for purpose for the remainder of the plan period.
WM8 Waste Prevention and Resource Management	Has not met target in terms of delivery but is an important tool in terms of moving waste	This policy remains fit for purpose for the

	up the hierarchy and raising awareness in the wider construction sector.	remainder of the plan period.
WM9 Sustainable Waste Management Design and Layout for New Development	Application of this policy shared across MEAS and all the districts, so difficult to monitor effectiveness. However, likely to become more important with new legislative changes.	This policy remains fit for purpose for the remainder of the plan period.
WM10 High Quality Design and Operation of Waste Management Facilities	Whilst the policy is not necessarily working as originally envisaged, it is still resulting in some sustainable design and environmental improvement at new waste management facilities.	This policy remains fit for purpose for the remainder of the plan period.
WM11 Sustainable Waste Transport	Application of the policy largely falls to district Highways teams. Minimal success in promoting use of alternative modes of transport but has led to other considerations. Going forward, consideration would be given to as to whether this policy is needed or whether reliance on national and local plan policy is sufficient.	This policy remains fit for purpose for the remainder of the plan period.
WM12 Criteria for Waste Management Development	This is a critical policy for assessing waste planning applications to ensure all the correct, relevant information is submitted. It has been applied to all waste planning applications.	This policy remains fit for purpose for the remainder of the plan period.
WM13 Planning Applications for New Waste Management Facilities on Unallocated Sites	The policy is important in ensuring consistency and equity of applications on unallocated sites with the objectives and allocated site criteria of the WLP.	The policy remains fit for purpose for the remainder of the plan period.
WM14 Energy from Waste	Since adoption of the WLP, the energy from waste market has become more saturated and nationally there is enough energy from waste capacity. With incoming legislative changes, policy WM14 will remain important in ensuring that any future EfW capacity specifically serves a local need for the duration of the plan period.	This policy remains fit for purpose for the remainder of the plan period.
WM15 Landfill on Unallocated Sites	No applications for unallocated landfill have come forward. Landfill sites are now considered to be nationally significant infrastructure and therefore retention of the policy is needed.	This policy remains fit for purpose for the remainder of the plan period.
WM16 Restoration and Aftercare of Landfill Facilities.	The policy has only been applied once during the plan period, the policy remains relevant should any future applications come forward, or applications relating to improvements to existing closed landfill's restoration works.	This policy remains fit for purpose for the remainder of the plan period.

- 2.2 Overall, it is considered that all the policies remain fit for purpose consistent with national planning policy and provide an appropriate framework for the determination of waste planning applications across the LCR.

### **Monitoring Indicators**

- 2.3 Analysis of the AMR data for the monitoring indicators has shown mixed results, some of the targets have been met and others have not been achieved, although have been useful in showing a direction of travel. This has been partly because elements of a policy have been difficult to implement, or that few allocated sites have come forward. Full details on the review of the monitoring indicators are shown in Table 2 of Paper 1 Review of Policies and AMR Data.
- 2.4 On reflection, at the time of preparing the WLP, there were few suitable sites available, some of those allocated had extant permissions for waste use at the time, but these have subsequently not been implemented. Furthermore, these sites are not always in the right ownership or location for the waste uses that come forward. However, the policies have been used successfully to achieve the necessary additional waste capacity and Areas of Search in particular, have been helpful in achieving this.
- 2.5 For the monitoring indicators relating to carbon reduction and impacts of waste management on carbon emissions, this data has not been available at a fine enough detail to demonstrate impact. However, in the future this data is likely to be more readily available as more information on carbon reduction is being measured to help meet climate emergency targets across the LCR.
- 2.6 Understanding the successes and/or failures of the monitoring indicators will be useful in preparing the next iteration of the WLP, both in terms of allocations, areas of search and future monitoring indicators.

### **Sustainability Appraisal Indicators**

- 2.7 The SA indicators were created to ensure that WLP delivered across the three strands of sustainability – economic, social and environmental. There are 30 SA indicators. The monitoring results are mixed. Nine of the SA indicators overlap with the monitoring indicators and are reported above.
- 2.8 Half of the SA indicators have been straightforward to measure either spatially or through the waste planning application process and have generally shown that the policies have been successful in ensuring sites are coming forward in the right locations without impacting key assets or communities, such as Green Belt or heritage.

- 2.9 For two of the indicators, (SA3 Number of pollution incidents and SA12 Emissions from landfill sites) there has been no data available beyond 2016/17 reporting period, so these have been difficult to report. However, this should not significantly impact the effectiveness of the WLP.
- 2.10 Data sources for four of the indicators (SA20 to SA23) has changed during the course of the plan period to date, so although results are reported for these indicators the results will not be entirely consistent. However, these all relate to Local Authority Collected Waste and regular liaison with Merseyside Recycling and Waste Authority is undertaken. Therefore, a good understanding of the data is possible despite the change in datasets.
- 2.11 For future iterations of the WLP, consideration would be given to the availability of data when determining what indicators would be most useful to monitor the plan.

### **3. Paper 2: Review of National Policy and Climate Emergency**

- 3.1 Ensuring the plan is compliant with both Local and National Waste and Climate policy is essential for any plan review, but in particular for JWLP due to its age. The NPPF has been updated several times since the plan was adopted, however there have been few changes relating specifically to waste planning. However, new housing figures for the Liverpool City Region will affect the amount of waste generated in the future. For now, the WLP provides sufficient capacity and the policy framework to address immediate needs but impacts of new housing numbers will need to be addressed in the next full review.
- 3.2 Climate emergencies have also since been declared across all the Local Authorities since adoption. Climate Action Plans for each of the authorities have been reviewed to ensure the WLP is able to contribute positively to delivering these plans locally and ensure its compliance with National and Local Policies. By moving waste up the waste hierarchy, the WLP is positively contributing to climate action plans. The Liverpool City Region's Net Zero Waste Strategy has just received approval and this will aim to reduce the carbon impact of waste further. The full implications of this will be taken into account at the next full review of the WLP, but for now the current WLP is playing its part.
- 3.3 Changes to national policies generally include the themes of net zero, a circular economy and moving waste up the waste hierarchy with the introduction of schemes such as Extended Producer Responsibility, Simpler Recycling and mandatory food waste collections. The plan is compliant with the latest government legislation, policies, and guidance. However, acknowledging that a

future review of the WLP is needed to fully address the most recent changes to the NPPF.

#### **4. Paper 3: Spatial Strategy and Sites Review**

- 4.1 This part of the review focused on the Vision, Strategic Objectives, Spatial Strategy and allocated sites. Consideration was given to the where waste planning applications had come forward and whether this was consistent with the allocated sites and spatial strategy, and therefore, whether the spatial strategy remains fit for purpose.
- 4.2 Analysis indicates that whilst a significant percentage of new waste infrastructure and capacity has come forward in one district, this has partly been a consequence of increased capacity at a few large facilities. New facilities and capacity have come forward in all districts across the 10 years to date, and although most new facilities have come forward on unallocated sites they have fallen within Areas of Search. The distribution is generally consistent with the spatial strategy. Much of the new capacity has come forward because of enhanced operations and/or capacity at existing facilities.
- 4.3 Taking account of the above, it is considered that overall the spatial strategy remains fit for purpose and does not need to be reviewed at this stage.
- 4.4 Generally, it is considered that the Vision and Strategic Objectives have been met, however, some of objectives have been more successful than others. Some objectives are outside the control of the JWLP and are likely to have been affected by the pandemic, such as overall recycling rates. Others have been hard to measure due to lack of consistent data sets.

#### **5. Paper 4: Duty to Cooperate Engagement**

- 5.1 MEAS has coordinated the review process with the support of officers from each of the constituent authorities. This has included regular reporting to the Liverpool City Region (LCR) Planning Policy Managers (PPMs) Group and Chief Planners Officers Group, with a sub-group of PPMs overseeing the WLP Review process.
- 5.2 Regular liaison meetings have been held with Merseyside Recycling and Waste Authority (MRWA) and the LCR Waste Partnership during the JWLP review process, who are also involved in implementation of the JWLP.
- 5.3 Engagement on the review has also been undertaken with other Waste Planning Authorities in the North West region, along with other relevant



planning authorities where there are significant imports or exports of waste. Regular liaison meetings are also held with North West Waste Network (formerly NW Regional Technical Advisory Body on Waste). No significant issues were raised regarding cross boundary waste movements.

- 5.4 In addition to this, MEAS has responded to a variety of duty to cooperate requests from waste planning authorities around the country in relation to their Plan-making processes.
- 5.5 Duty to Cooperate duties have been fulfilled throughout the Plan Period and during this review process. No issues have been raised that affect the review.

## **6. Paper 5: Waste Needs Assessment**

- 6.1 The Waste Needs Assessment (WNA) brings the Initial WNA up to date to the year 2022, to enable the high-level review of the Waste Local Plan (WLP) to determine whether or not the previous predictions were accurate and on target. Therefore, enabling the review to predict whether or not the WLP is fit for purpose until the end of the plan period.
- 6.2 This had included updating waste arisings and projections. Waste fractions are split into Local Authority Collected Waste, Commercial and Industrial, Construction, Demolition and Excavation, Hazardous and other (Waste Water, Low Level Radioactive Wastes and Agricultural Wastes). It shows that the initial WNA was particularly pessimistic, and arisings have not increased to the levels predicted. Sufficient facilities have come forward to cover both the waste arisings and imports that the plan area is handling until the end of the plan period.
- 6.3 There has also been a huge shift shown within the data, in terms of self-sufficiency in waste. Previously, the area exported large amounts of waste but now imports massively exceed the amount the plan area is exporting. There are discrepancies showing within the data due to the effect of the Covid-19 pandemic lockdowns, and also where data sets have changed.
- 6.4 Multiple methods are used to estimate data where single data sets are not available to give an estimated range, all generally show waste handled within the area to be lower than expected, and with changes due to occur to waste collection and disposal under simpler recycling, recycling figures are likely to improve.

## **7. Conclusions**

- 7.1 Taking account of all the data and information collated in the various review papers referred to above, it is considered that the JWLP remains fit for purpose for the remainder of the Plan Period. The JWLP remains compliant with national policy and is contributing to reducing the impact on climate change and

thereby assisting with delivery of Climate Emergency Action Plans for Liverpool City Region.

- 7.2 The policies continue to be effective for determining waste planning applications. It is acknowledged that most new capacity has come forward on unallocated sites, however, many of the new facilities have been in Areas of Search, and a lot of the new capacity has also resulted from enhancements and extension of existing waste management facilities.
- 7.3 There has been a marked shift during the plan period with respect to net self-sufficiency in waste. At the start of the plan period, the LCR was a net exporter of waste, it is now imports significantly more than it exports and is therefore, net self sufficient.
- 7.4 Duty to Cooperate duties have been fulfilled throughout the Plan Period and during this review process.

**REPORT TO:** Executive Board

**DATE:** 11<sup>th</sup> September 2025

**REPORTING OFFICER:** Executive Director Environment and Regeneration

**PORTFOLIO:** Environment and Urban Renewal

**SUBJECT:** Waste Management Update

**WARD(S)** Borough wide

## **1.0 PURPOSE OF THE REPORT**

- 1.1 To provide Members with an update on a number of matters in relation to the Council's waste management services, including options to help meet legislative requirements, proposed contractual arrangements for the processing of collected recyclable materials, proposed recycling collection methodologies and potential financial implications where known at this stage.

## **2.0 RECOMMENDED: That;**

- 1) Members endorse that the Council provides to the Merseyside Recycling and Waste Authority, an outline commitment for Halton to be included in their procurement of new Waste Management and Recycling Contract arrangements that are to be introduced from 2029.**
- 2) Members approve that, following the introduction of food waste collections in 2026, Halton's collected food waste is managed by the Merseyside Recycling and Waste Authority under the terms of the Waste Management and Recycling Contract.**
- 3) Members approve that the Council collects 'Additional Materials' for recycling as part of household kerbside collections from 2026, at temporary additional cost, until the new Merseyside Recycling the Waste Authority Waste Management and Recycling contract is in place.**
- 4) Members endorse that the Council retains a co-mingled recycling collection system from 2026 onwards (subject to a TEEP Assessment being carried out).**
- 5) Members approve that the Council introduces the additional resources required to deliver a comprehensive, local waste communications and education campaign, and also approves the required expenditure to do so, and;**

- 6) **Delegated authority be given to the Executive Director Environment and Regeneration, in consultation with the Executive Board Member for Environment and Urban Renewal, to take any decisions as may be necessary as part of Halton's inclusion in the Merseyside Recycling and Waste Authorities re-procurement exercise of the Waste Management and Recycling Contract.**

### 3.0 SUPPORTING INFORMATION

- 3.1 The Council currently faces the biggest changes to its waste management services in a generation. The Council has been working in partnership with LCR Waste Authorities at both a strategic and operational level, and good progress has been made in working towards delivering change, but the scale and the pace of change required is unprecedented.
- 3.2 There are a wide range of drivers to change how household waste is collected, including new legislative requirements that will have both cost and service redesign implications for the Council. Working with LCR partner authorities, and through the joint commissioning of reports from specialist consultants, work has been continuing to assess the Council's options and consider the cost/benefits of those options.
- 3.3 'Simpler Recycling' is one of the key legislative instruments to make recycling clearer and more consistent for residents. 'Simpler Recycling' requires the Council to collect a wider range of materials than it currently collects in the blue recycling bin and also the method of collections of the additional materials. There is also a requirement to implement a weekly collection of food waste to every household in the borough by 1<sup>st</sup> April 2026.
- 3.4 A Members' seminar was held on 10<sup>th</sup> April 2025 setting out the Council's legal obligations in respect of waste, work to date and future options.
- 3.5 This report provides details of the requirements and other implications for the Council arising from current Legislation and makes a number of recommended approaches that Members are being asked to consider and endorse to allow further work on the Council's preferred options to be progressed. A further report will be presented to Executive Board in the autumn containing a number of recommendations for consideration and approval to help inform the development of the Council's Waste Strategy, Policies and Service Plans.
- 3.6 Additional Materials  
'Additional Materials' are the range of new items that the Council, and many other local authorities, do not currently collect at kerbside, however, have a statutory responsibility to do so from 1st April 2026. These materials are:
  - Aerosols

- Tetra Paks/cartons
  - Foil
  - Pots, Tubs & Trays (PTTs)
  - Films & Flexibles (from 2027)
- 3.7 The Merseyside Recycling and Waste Authority (MRWA) Materials Recovery Facilities (MRFs), where the collected contents of the Council's blue bins are sent, are not configured to separate and process the additional items that will need to be collected.
- 3.8 The MRFs are operated by Veolia via the current Waste Management and Recycling Contract (WMRC) which runs until 2029. It is expected that new contractual arrangements will be in place from 2029, however, this will be at least 3 years after the legal requirement to collect additional materials in 2026. MRWA have developed options with Veolia to provide this transition, but this will come at an additional cost to the Council due to new manual material separation methods that will need to be introduced.
- 3.9 The introduction of additional materials in co-mingled recycling from April 2026 (highly likely to be the additional materials into existing blue bins in Halton) will generate a significant additional charge forecast to be in the region of £4.5m - £6.1m for three years (2026-2029) for the Liverpool City Region waste partnership; Halton's share of this burden is 8% hence, a minimum cost of £360k, meaning an additional £120k per annum or worst case scenario £488k, £162.2k per annum. Members are advised that there is the potential for some waste disposal cost reduction from increased recycling that may help off-set some of the additional costs incurred in processing the increased range of recyclable materials.
- 3.10 From 2029, the MWRA new contract for waste disposal will be implemented hence, the three year arrangement above is to support the additional requirements in the mid-term whilst the long term approach is developed and financial imperatives understood.
- 3.11 Recycling Collection Methodology  
The Council currently operates a 'co-mingled' collection system; with residents able to place paper, cardboard, glass bottles and jars, plastic bottles and metal cans into one bin.
- 3.12 One of the considerations for the Council is how to collect the additional materials required by legislation (as referred to in para 3.6). The Council has two options:
- Move to dual-stream collections (i.e. a bin for dry mixed recycling and a bin for paper & cardboard) or;
  - Maintain co-mingled collections.
- 3.13 National policy steers towards 'dual stream' collections. Considerations in adopting a 'dual stream' approach include:

- The introduction of an extra wheeled bin for paper & cardboard naturally takes up more of a household's external space and could be challenging for many properties in the borough.
  - The capital expenditure required to meet the costs of introducing a new suite of recycling bins and additional collection vehicles, and;
  - Additional costs associated with introducing new additional operational collection rounds.
- 3.14 Co-mingled collections can continue to be carried out where Councils can evidence, through a written assessment, that a dual-stream approach is not Technically, Economically, Environmentally Practicable (commonly known as a 'TEEP' assessment). There are risks associated with retaining co-mingled collections, however these are considered to be low.
- 3.15 Balancing the risks associated with retaining a co-mingled approach, against considerations for a dual-stream system, the recommended approach is to carry out a legally required 'TEEP' assessment and retain a co-mingled (one recycling bin) collection system from 2026 onwards.
- 3.16 Food Waste  
From April 2026, the Council will be legally required to provide a separate food waste collection service to all households in the borough.
- 3.17 In January 2024, DEFRA allocated capital money to Council's to fund the vehicle and caddy purchasing requirements for food waste collections – Halton's allocation was £1.019m. In order to maximise buying power, the LCR Partners committed co-ordinate best procurement opportunities; orders were recently placed for Halton's vehicles and caddies.
- 3.18 In March 2024, DEFRA also announced that transitional resource grant funding would be provided to support the delivery of weekly food waste collections. Halton's 2024/25 allocation of revenue funding was £237k. DEFRA further added that ongoing resource/revenue costs will be provided to all waste collection authorities from 1<sup>st</sup> April 2026. The allocations to Halton are not known at this stage.
- 3.19 The MRWA are working with Veolia (the WMRC contractor) to ensure that appropriate facilities and offtake arrangements for separately collected food waste are in place by the mandated date. Food waste collected by Halton is not an Exclusive Contract Waste under the terms of the WMRC and is not therefore required to be delivered into a facility operated under this contract. However, food waste may be sent to facilities via arrangements secured by Veolia should Halton Council request.
- 3.20 Following discussion with MRWA, and the having assessed the Council's options, it is recommended that Halton's food waste is managed by

- 3.21 Veolia under the terms of the WMRC and that MRWA be notified accordingly.
- 3.22 Options for the processing of food waste beyond 2029, when the WMRC ends, are currently being considered.
- 3.23 Education and Behaviour Change  
Whatever policies or services the Council puts in place, the Council will only be successful in reducing waste, increasing recycling and reducing costs if it has the co-operation of the residents of Halton.
- 3.24 The introduction of new services will require significant investment and without an effective programme in place to change resident behaviour, there is a strong risk that these services will not be fully utilised and the investment is ultimately wasted. Communications and education with residents will therefore be key to bringing about the required behaviour change.
- 3.25 In order to deliver the comprehensive communications, education and public engagement activity needed to deliver success in meeting our objectives and targets, investment in additional resources will be required and it is proposed that a new team be established to deliver such activity. A communications plan would be developed with the Council's Communications and Marketing team and would draw upon, and be consistent with, key regional and national waste related messages. The new team, and any additional associated resource required to deliver the communications campaign, would be funded from the EPR monies allocated to the Council by DEFRA (as referred to in para 3.37).
- 3.26 Residual Waste Capacity  
Analysis of the composition of waste currently placed into black residual waste bins shows that more than 50% is made up of recyclable materials and food waste. The Council's new services will provide residents with opportunities for increased recycling of their waste and additional bin capacity for the recycling of their food waste.
- 3.27 Over time, and in anticipation of successful public behaviour change and resultant good participation with the Council's food waste and enhanced recycling collection services, the amount of waste placed into the residual waste (black bin) should significantly reduce and therefore, the capacity of residual waste collection provided to householders should be a matter for future consideration in 2026 and will be the subject of a report to Executive Board.
- 3.28 MRWA Re-Procurement of the WMRC  
In March 2007, the Council's Executive Board approved a Contract Procurement Strategy and formal partnership arrangement with the MRWA. This arrangement provided for Halton to be included in two principal waste contracts to be procured by the MRWA. As part of the

arrangement, which secured Halton's inclusion in the MRWA's Contract Procurement Strategy, and in recognition of the work to be carried out by MRWA on behalf of Halton in administering the 2 principal contracts, Halton agreed to make an annual contribution towards the MRWA's annual operating costs. It was agreed that Halton's contribution (Management Fee) would be 8%, which is based upon Halton's waste tonnage as a proportion of the total amount of waste (for Merseyside and Halton) that would be managed by the MRWA. The current annual management fee paid to the MRWA by Halton is circa £200k.

- 3.29 One of the principal contracts referred to above is the Waste Management and Recycling Contract (WMRC). For Halton, the WMRC provides for:
- The operation of Halton's 2 Household Waste Recycling centres
  - The operation of Materials Recovery Facilities
  - The processing of kerbside collected garden waste
- 3.30 The contract also provides for the Management of Waste Transfer Stations.
- 3.31 The WMRC runs until 2029 and, in January 2024, the MRWA commenced a re-procurement exercise to introduce new arrangements to be put in place when the current WMRC ceases. The re-procurement will seek to ensure that the MRWA and its partners have a fit for (future) purpose contract that:
- Contributes towards increased recycling rates.
  - Meets and expands social value.
  - Meets and contributes to lower carbon targets and other environmental considerations.
  - Provides for new facilities that may be required.
  - Establishes a good interface with the resource recovery contract.
  - Meets legislative and regulatory changes for waste and resources.
  - Introduces new services in reuse.
  - Facilitates partnership working to educate the population in recycling, reuse and waste reduction.
- 3.32 Members are advised that one of the primary factors in Halton agreeing to be included in the MRWA contract procurement strategy in 2007, was the economies of scale that Halton could benefit from by being part of a significantly larger scale contract than procuring a Halton specific contract.
- 3.33 The Council is being asked by MRWA to indicate if it wishes for Halton to be included in their re-procurement exercise. Given that the arrangement with MRWA for the operation and administration of the WMRC, and the opportunity to continue to benefit from future economies



of scale, it is recommended that Halton gives, at this stage, an outline commitment for its inclusion in the re-procurement exercise. The re-procurement exercise could also provide opportunities to explore enhancements to the Council's Household Waste Recycling Centres.

- 3.34 Halton's Portfolio Holder and Officers regularly attend meetings and presentations, which include the re-procurement programme, and are therefore fully briefed on all relevant matters. The Portfolio Holder and Officers will have the opportunity to influence any proposed contract specifications to ensure that, in so far as they relate to Halton, they meet the Council's requirements and expectations.
- 3.35 The MRWA's re-procurement of the WMRC requires a decision from LCR authorities on which recycling collection methodology approach they intend to adopt. (see para 3.11)
- 3.36 Members will receive a further report on the re-procurement of the WMRC in May. Ahead of that report, it is recommended that the delegated authority be given to the Executive Director – Environment and Regeneration, in consultation with the Executive Board Member for Environment and Urban Renewal, to make any decisions as may be necessary as part of Halton's inclusion in the MRWA's re-procurement exercise.
- 3.37 Extended Producer Responsibility  
Extended Producer Responsibility (EPR) is a government imposed scheme of levy to the packaging industry to encourage recyclable material use. The lower the recyclable material the higher the levy they will pay. In turn, the levy paid will be redistributed to local authorities to cover net costs of collecting, managing, recycling and disposing of household packaging waste.
- 3.38 The process for receiving EPR payments started in 2024 when DEFRA sent local authority Chief Executives an email that included an assessment notice. Halton's notice was received on 3<sup>rd</sup> December 2024 and detailed an EPR assessment of £3.134 million.
- 3.39 Halton received a further notice in July 2025 that detailed a revised EPR assessment of £3.011m; a reduction of £123k. However, government have committed to fulfilling the original amounts, hence Halton's payment to be received in year is £3.134m.
- 3.40 The government approaches and current arrangements put in place a range of measures to drive improved performance and ensure the efficiency and effectiveness of the services provided. Government has an ambition for local authorities to achieve a 65% recycling rate. Halton's current rate is 39.6% and the national average is 44.4%.
- 3.41 Local authorities whose services are deemed "not effective or efficient" will be issued with an improvement plan and, if improvements are not

implemented, the EPR scheme administrator (PackUK) can withhold up to 20% of the available funds.

**3.42 Emissions Trading Scheme**

In essence, the Emissions Trading Scheme (ETS) is a levy that is linked to energy from waste emissions from the incineration of waste. The scheme is widely embedded across a number of sectors and industries. It is a mechanism for managing the financial cost of reducing carbon emissions between different sectors of the economy which is being extended from January 2028 to include the waste sector.

**3.43** The ETS is a new burden for councils who will face significant additional cost from 2028.

**3.44** If we do nothing, modelled costs show an estimated additional cost to Halton of £1.5m per year. The cost is directly linked to the level of waste sent for incineration hence, the more that can be achieved from enhancing Halton's recycling mechanisms; simpler recycling, household waste centres etc, will result in an increased positive impact and reduced cost burden the Council.

**3.45** Redesigning the Council's waste collection service and resident engagement to achieve behaviour change and increase recycling are imperative to reduce the funding burden from 2028 and best position the Council for EPR payments, as this is linked to positive performance.

**4.0 POLICY IMPLICATIONS**

**4.1** There are no new policy implications arising from this report; however, policy implications will arise from the subject matters contained within this report that will be presented into Members future reports.

**5.0 FINANCIAL IMPLICATIONS**

**5.1** Whilst there are clear future resource and financial implications arising from the Council needing to put in place new collection services and waste treatment/processing arrangements in order to meet its obligations under the Environment Act 2021, the detail of those financial and resource implications are not known at this stage. These will be included in future reports to Members.

**5.2** The financial matters known at this stage are included in the report.

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

**6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence**

Waste has a direct effect on public health; effective and efficient household waste collection mitigates potential health implications related to accumulated waste.

**6.2 Building a Strong, Sustainable Local Economy**

The waste sector and local arrangements to deal with waste provides significant employment opportunities and contributes more than £3.4m to Halton's economy and a further £2.8m to the regional economy annually on waste.

**6.3 Supporting Children, Young People and Families**

The Council's services are universal. There are opportunities through the behaviour change work to engage children and young people to be champions of waste and recycling approaches at home.

**6.4 Tackling Inequality and Helping Those Who Are Most In Need**

The household services are a universal offer however, there are adjustments for those that need additional support such as the assisted collection whereby waste staff will collect and return the bins to properties.

In delivering behaviour change there will be targeted additional efforts were required.

**6.5 Working Towards a Greener Future**

Once introduced, the new services and initiatives referred to in this report will have a positive impact on the Council's actions towards delivering climate change improvements.

**6.6 Valuing and Appreciating Halton and Our Community**

The volume of change and investment to household waste arrangements demonstrates investment to Halton's residents. Most residents and households will be keen to contribute what they can to the environmental agenda and providing appropriate tools and household collections will enable this.

**7.0 RISK ANALYSIS**

7.1 Whilst there are risks associated with the Council failing to meet its statutory waste obligations, there are no specific risks associated with this report.

**8.0 EQUALITY AND DIVERSITY ISSUES**

8.1 None to report.

**9.0 CLIMATE CHANGE IMPLICATIONS**

9.1 Once introduced, the new services and initiatives referred to in this report will have a positive impact on the Council's actions to contribute towards the climate change improvements and will support the Council's response to the climate emergency.

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

<b>Document</b>	<b>Place of Inspection</b>	<b>Contact Officer</b>
Executive Board Report - Waste Management Update - 16 <sup>th</sup> January 2025	Council Website	Jimmy Unsworth

**REPORT TO:** Executive Board

**DATE:** 11<sup>th</sup> September 2025

**REPORTING OFFICER:** Executive Director Environment and Regeneration

**SUBJECT:** Article 4 Direction - Removal of permitted development rights for the change of use from Use Class C3 (dwelling houses) to C4 (HMOs)

**WARD(S)** Parts of Appleton, Central & West Bank, Halebank, Mersey & Weston, Beechwood & Heath, Grange, Bridgewater, Halton Castle, Halton Lea, Norton North and Norton South & Preston Brook

## **1.0 PURPOSE OF THE REPORT**

- 1.1 This report seeks approval from the Executive Board to make an Article 4 Direction to remove the permitted development rights for the change of use from Use Class C3 (dwelling houses) to C4 (HMOs).

## **2.0 RECOMMENDED: That**

- 1) the making of an immediate Article 4 Direction to remove permitted development rights for the change of use from Use Class C3 (dwelling houses) to C4 (HMOs) as set out at Appendix A be approved.**
- 2) The required notifications as set out in the report and the publication of a public notice as shown in Appendix C be authorised.**
- 3) Following notification and consultation, the matter is brought back to the Executive Board to consider any consultation responses and make a decision on whether to confirm the immediate Article 4 Direction.**
- 4) Authority is delegated to the Director of Planning and Transportation and Portfolio Holder for Environment and Urban Renewal, and the Portfolio Holder for Housing and Environmental Sustainability to amend the Houses in Multiple Occupation Supplementary Planning Document, (SPD) to include the making of the article 4 direction.**
- 5) It be noted that this proposal is a Key Decision which has not been included on the Council's Forward Plan and the procedure set down in Rule 16 of the Access to Information Procedure Rules, of the constitution, has been followed.**

### **3.0 SUPPORTING INFORMATION**

#### **3.1 Introduction and Background**

The change of use from a family house (Use Class C3) to a small House of Multiple Occupation (HMO) (Use Class C4) has been permitted development since 2010. This means that an application for planning permission to the Local Planning Authority (“LPA”) is not required since there has been a national grant of planning permission for these types of developments. The effect of this is that the Council, as the Local Planning Authority, has no control on the numbers or locations of these types of HMOs. Larger HMOs, that is those accommodating more than 6 unrelated people, do not benefit from permitted development rights and still require planning permission.

3.2 Local Planning Authorities do, however, have the power, in exceptional circumstances, to withdraw permitted development rights through the making an Article 4 direction. This means that deemed planning permission is not granted automatically and that an application needs to be made to the Council. It does not prohibit development but enables the Council to have some control over the proposed development and to apply its own policies.

3.3 HMOs meet important and specific housing needs within the borough. However, there has been a significant increase in the number of HMOs in recent years and there are high concentrations in certain wards. Clustering of HMOs can impact local character, community cohesion and residential amenity.

3.4 Local Councillors and residents in a number of wards, have expressed their concerns over the clustering of HMOs in their area and the negative impact it is having. In September 2022, the Environment & Urban Renewal Policy and Performance Board (PPB) resolved to form a Working Party of Members to consider policy to address the proliferation and standards in Houses of Multiple Occupation. The working party made a number of recommendations on the information available at the time and the HMO SPD was then approved by Halton’s Executive Board in March 2025. A Supplementary Planning Document (SPD) provides detailed guidance and advice on specific planning policies within a local plan.

3.5 Although the SPD concluded that there was no evidence to introduce an Article 4 direction at that time of writing the SPD, new research provided evidence that there was an increase in HMOs, in the identified areas and concluded that an article 4 for those areas could be justified. Furthermore, the policy within the SPD cannot currently be applied to smaller HMOs. However, since the preparation of the SPD, the Council has been able to obtain additional evidence and data through the Housing Needs Assessment. This document is being used to inform the emerging Housing Strategy. This demonstrates that new trends are starting to emerge and, therefore, highlights the

need for the Council to consider other policy options including the introduction of an Article 4 direction. If Members resolve to approve the Article 4 direction, this policy will apply to all HMOs going forward.

3.6 **Article 4 Directions**

Article 4 of the Town and Country Planning (General Permitted Development) Order 2015 (as amended) allows LPAs to make directions withdrawing permitted development rights where an authority considers it expedient that development should not be carried out unless express planning permission has been obtained for the same.

3.7 Government Guidance contained in the National Planning Policy Framework (NPPF) and the Planning Practice Guidance advises that Article 4 directions should be limited to situations where the direction is necessary to protect local amenity or the wellbeing of the area (Paragraph 54 of the NPPF). They should be applied in a measured and targeted way, based on robust evidence and cover the smallest geographical area possible. The potential harm that the direction is intended to address should be clearly identified and Article 4 directions which apply to large areas (such as those which cover the majority of a local planning authority) need to have a particularly strong justification.

3.8 There are two types of directions under the General Permitted Development Order: non immediate directions and directions with immediate effect.

- Non-immediate directions are those where permitted development rights are withdrawn following a prior notice period which includes a period of consultation.
- Immediate directions are where permitted development rights are withdrawn with immediate effect. These are then confirmed by the Council following consultation, including with the Secretary of State.

3.9 Immediate directions can be brought in when the development to which the direction relates would be prejudicial to the proper planning of the area or constitute a threat to the amenities of their area.

3.10 There is no right to appeal against an Article 4 direction. However, the decision to make one can be subject to judicial review proceedings.

3.11 The Secretary of State also has the power to 'call-in' article 4 directions.

- 3.12 The council could also see the number of lawful develop certificates increase for existing HMOs that are currently operating.

3.13 **Compensation**

In accordance with *Sections 107 and 108 of the Town and Country Planning Act 1990* and *The Town and Country Planning (Compensation) (England) Regulations 2015 (as amended)* property owners may be eligible for **compensation** if they are affected by the introduction of an **immediate** direction, or a **non-immediate** direction where less than 12 months' notice of the withdrawal of the permitted development rights has been given. However, compensation is only payable if an application for planning permission for the type of development formerly permitted by the GDPO 2015 is made within 12 months of the Article 4 direction taking effect.

- 3.14 The claim can include:

- Abortive expenditure, which could include preparatory work such as professional fees, plans, and reports.
- Other loss of damage directly attributable to the withdrawal of the permitted right i.e. the difference in the value of land if the development had been carried out and its value in its current state.
- Reduction in profit in carrying out the smaller development.
- The cost in complying with conditions i.e. bike storage.

3.15 **Proposed Article 4 direction / Evidence – summary of report**

An Article 4 direction is required as it is necessary to protect the local amenity and the wellbeing of the areas identified on the map Furthermore, an immediate Article 4 direction is being proposed because introducing a non-immediate Article 4 direction would lead to delay in the protection of these areas, during which time more small HMOs could be developed. Given that impact of the current number and clustering of HMOs, any further uncontrolled HMOs would be prejudicial to the proper planning of the area and constitute a threat to the amenities of the area as discussed further in the attached evidence basis/ justification document.

- 3.16 The Council have identified areas of clustering within wards in both Widnes and Runcorn. The Council is aware of the importance of HMOs within the dwelling stock. However, there is a concern around the impact of clustering on local character, community cohesion and residential amenity. It is evidenced by the complaints found in the SPD public consultation that HMOs may negatively affect the amenity of the area. Furthermore, clustering of these properties can really start to change the character of the area, as when HMOs are grouped in close proximity the difference in lifestyle between households can lead to a loss of community cohesion and suburban feel.



- 3.17 With planning control, facilitated by an Article 4 direction, development management teams can mediate the issues that may come from HMO applications. Without this control, the Council risks development that would be prejudicial to the proper planning of the area or constitute a threat to residential amenity. This could have adverse effects on the local character and community cohesion. Therefore, it is recommended to introduce an article 4 in the identified areas, to manage the location of future HMOs and prevent clustering of these properties. If the Article 4 was not introduced this would be prejudicial to the proper planning of the area or constitute a threat to the amenities of their area

3.18 **Procedure**

Article 4 directions are made through a two stage process.

Stage 1: The Local Planning Authority (Halton Council) issues the direction. This will be an Executive Board decision. It then serves a notice to all affected areas and notifies the Secretary of State of the direction on the same day notice is given. It then carries out consultation within the affected areas.

- 3.19 Stage 2: The direction is confirmed by Executive Board no later than 6 months after the date on which it comes into force and the Secretary of State is notified. When confirming the direction the council must take into account responses received in the consultation in stage 1 and consider if it is necessary to make changes to the direction. If any material changes are necessary the council must re consult. Schedule 3 of the GPDO 2015 sets out the procedures for publicity and consultation of an Article 4 Direction.

- 3.20 In accordance with those requirements, the following consultation will be undertaken:

- Advertisement in the local press
- Display of Article 4 Direction site notice in the areas within the borough
- Notice published on the Council's website.
- Correspondence to statutory consultees and other bodies

3.21 **Timescales**

An indicative timescale could be as follows:

September - Article 4 Direction is made and secretary of state is notified, the permitted development right in relation in HMO's in the specified are immediately applied.

**September** - Six week consultation runs on Article 4 direction.

**October:** Officers Analyse the responses of the consultation

**February** - Article 4 direction is considered and confirmed (taking into account consultation responses if necessary) and the secretary of state is notified of this.

- 3.22 Please note this timetable could change should material changes be required as a result of the consultation or should a large volume of responses be received to the consultation which require a longer period of time to analyse. The timetable may also be subject to dates of Executive Board.

#### **4.0 POLICY IMPLICATIONS**

- 4.1 The Council does not have a direct HMO Policy within its most recently adopted Local Development Plan, the Delivery and Allocations Local Plan (DALP) 2022. However, Policy RD3 Dwellings, Alterations and Extensions which details the standards expected from dwelling extensions, alterations and residential conversions. Although HMO proposals are small scale, their impact on the local area can be considerable, particularly cumulatively.
- 4.2 The Council does have a HMO supplementary planning document, which will continue to provide guidance on the development of HMOs within the borough. However, as small HMOs are not currently monitored by planning due to being PD, without an Article 4 direction this SPD could not be applied to the smaller HMOs within the borough.

#### **5.0 FINANCIAL IMPLICATIONS**

- 5.1 The recommended immediate Article 4 direction means that the Council may be liable for compensation made under section 108 of the Town and Country Planning Act 1990.

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

##### **6.1 Improving Health, Promoting Wellbeing and Supporting Greater Independence**

This Article 4 direction will ensure all HMOs are subject to Council planning policy, which seeks to protect housing standards and the general health and wellbeing of residents within the Borough.

##### **6.2 Building a Strong, Sustainable Local Economy**

Without an Article 4 direction, unregulated HMO growth can impact the character of local areas, reduce property values and put strain on infrastructure and business.

##### **6.3 Supporting Children, Young People and Families**

Without an Article 4 direction, dwellings for families can be converted into HMOs without an application for planning permission

being made to the Council. HMOs can also place a strain on local services like schools and create waste, noise and parking issues.

An article 4 direction means that the development can be brought into the control of the Council so that the impact of the development on these issues can be considered and addressed by either granting or refusing an application for planning permission in accordance with the Council's development plan and related planning policies.

#### **6.4 Tackling Inequality and Helping Those Who Are Most In Need**

Evidence suggests HMOs are located in areas which experience high levels of deprivation. An Article 4 direction will mean officers can monitor and protect against the poor standards associated with HMOs. This can protect those who are most vulnerable and ensure the issues they face are not aggravated by poor quality housing.

#### **6.5 Working Towards a Greener Future**

Surges in unregulated HMOs can increase the population density, which can increase pressure on the local environment. By controlling the number of HMOs in an area, the council can mediate the impact on waste collection and reduce fly-tipping which will help protect the local ecosystem.

#### **6.6 Valuing and Appreciating Halton and Our Community**

Enacting an Article 4 direction can support community cohesion, as it potentially places a restriction on the number of people who do not view the area as a long-term home. People who stay in HMOs are often quite transient, so it can be more difficult to establish or promote long-term relationships within the community.

### **7.0 Risk Analysis**

7.1 The Council is liable for compensation due to the immediate nature of Article 4. However, a non-immediate (12 month delay) Article 4 direction poses too much risk to the amenity and character of the borough.

7.2 The Article 4 Direction could result in a reduction in the supply of HMOs. However, the impact of an Article 4 direction is that an application to the Council for planning permission would now be required for all small HMOs. It does not mean that such applications would be refused but that they would have to be determined in accordance with the Council's development plan and related planning policies

7.3 The Secretary of State, after being notified of the Article 4 direction, can intervene to reduce the area the Article 4 direction covers or can

stop the Article 4 direction completely. However, the Council believes it has a strong enough justification for its Article 4 direction.

## **8.0 EQUALITY AND DIVERSITY ISSUES**

- 8.1 The Council has included an Equality Impact Assessment alongside this directive.

## **9.0 CLIMATE CHANGE IMPLICATIONS**

- 9.1 As it stands, development that is considered permitted development is not assessed by planning officers through the development management process. This means that small HMOs are not currently assessed against climate related policy in the Delivery and Allocations Local Plan or other supplementary planning documents. Enacting an article 4 would mean officers could monitor climate related standards of HMOs.

## **10.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972**

<b>Document</b>	<b>Place of Inspection</b>	<b>Contact Officer</b>
Town and Country Planning (General Permitted Development) Order 2015 (as amended).	Municipal Building, Widnes	Rebecca Taylor
National Planning Policy Framework (NPPF 2025)	Municipal Building, Widnes	Rebecca Taylor
National Planning Practice Guidance (PPG)	Municipal Building, Widnes	Rebecca Taylor
Halton Delivery and Allocations Local Plan (DALP 2022)	Municipal Building, Widnes	Rebecca Taylor
Waste Local Plan (2013)	Municipal Building, Widnes	Rebecca Taylor
Houses in Multiple Occupation SPD	Municipal Building, Widnes	Rebecca Taylor



## **Article 4 Direction**

Removal of permitted development rights for the change of use from Use Class C3 (dwelling houses) to C4 (HMOs)

Background Document: Context, Proposals and Evidence and Justification

11 September 2025

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## **Part 1: Context**

### **Introduction**

This paper provides the evidence base and policy context for the introduction of an Article 4 Direction within the Borough of Halton, which will remove the permitted development (PD) rights allowing the

conversion of dwelling houses (Use Class C3) into Houses of Multiple Occupations (HMOs) for up to six residents (Use Class C4). The Article 4 direction would be made under the provisions of the Town and Country Planning (General Permitted Development) Order 2015<sup>1</sup> (as amended) and would apply to the defined areas highlighted in Appendix B of this document. Its introduction will enable the council to have greater control in managing conversions of dwellings into HMOs.

### National Policy and Legislative Context

In 2010 the Government introduced *The Town and Country Planning (General Permitted Development) (Amendment) (England) Order 2010*<sup>2</sup> which allowed the conversion of a dwelling house (Use Class C3) into what was then a new use class of C4, which is a small, shared, house or flat which is occupied by three to six unrelated individuals who share basic amenities. This legislation was amended through *The Town and Country Planning (General Permitted Development) (England) Order 2015* and still continues to allow the conversion of dwellings (C3) to small HMOs (C4) in class L of schedule 2.

Proposals for Houses of Multiple occupation for seven or more residents continue to require full planning permission.

Although the Government has granted permitted development rights to convert dwellings (C3) to small HMOs (C4), it is recognised that local circumstances will sometimes require that this permitted development right be restricted. These restrictions can be introduced, on a temporary or permanent basis, through an **Article 4 direction**, which enables the Secretary of State or the local planning authority to withdraw specified permitted development rights across a defined area.

Although Article 4 Directions introduced by local planning authorities do not require approval from the Secretary of State, the Secretary of State for Housing, Communities and Local Government can intervene to stop Article 4 directives taking effect should they deem it appropriate. Both the type of restriction and the extent of the area the restriction is being applied to must be justified. Any decision to introduce an Article 4 direction can still be judicially reviewed.

The National Planning Policy Framework (NPPF) advises that Article 4 directions should be applied in a measured and targeted way, and should be limited to situations where the direction is necessary to protect the local amenity or the wellbeing of the area (Paragraph 54). Article 4 directions must be based on robust evidence and apply to the smallest geographical area possible. Article 4 Directions which apply to large areas (such as those which cover the majority of a local planning authority) need to have a particularly strong justification.

The council has two options of WHEN to enact an article 4 direction:

1. **Immediate** Article 4 directions take effect on the date of the direction.
2. A **non-immediate** article 4 direction would allow for a consultation period. In order to avoid the compensation, a 12 months' notice period is required.

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<sup>1</sup> [The Town and Country Planning \(General Permitted Development\) \(England\) Order 2015](#)

<sup>2</sup> [The Town and Country Planning \(General Permitted Development\) \(Amendment\) \(England\) Order 2010](#)

## Regional Context

Several local planning authorities in the close proximity to Halton have already introduced Article 4 directions which restrict permitted development rights for HMO conversions.

- **Sefton** issued a 'non-immediate' Article 4 direction in September 2017 which covered parts of Bootle, Litherland, Seaforth, Waterloo, and Southport. The Council also implemented an 'immediate' Article 4 Direction in the Aintree area on the 2<sup>nd</sup> July 2025. Policy HC4 of the Sefton Local Plan states that development involving the conversion of buildings to HMOs will be permitted if it does not cause significant harm to the character of the area or the general amenity of occupiers/neighbours.
- **Liverpool** issued an article 4 direction in 2020 that covered the Anfield, Central, Greenbank, Kensington and Fairfield, Picton, Princes Park, Riverside, Tuebrook and Stoneycroft and Wavertree wards. The Liverpool Local Plan, adopted in 2022, included Policy H11 which explained how to protect residential character and amenity and how in designated neighbourhoods where number of HMOs exceed a certain threshold, further planning applications will not be supported.
- **Cheshire West and Chester** have an Article 4 direction for the areas Garden Quarter, Newry Park, and King Street. To support this Cheshire West have adopted a Houses in Multiple Occupation and Student Accommodation SPD, which provides guidance on how the authority will assess and deal with planning applications associated with Houses in Multiple Occupation and Purpose Built Student Accommodation.
- **Blackburn with Darwen** introduced an Article 4 direction in February 2012 which covered a small number of wards. In August 2023, an Article 4 direction covering all urban areas of Blackburn and Darwen (excluding only more rural areas of the borough) was introduced. Policy DM06 in the local plan adopted in January 2024 states any application for a new HMO will be refused.
- **Salford** has an Article 4 direction covering inner areas which came into effect in 2018. From November 2024 a new Article 4 came into effect which covers further areas of the city. The recently adopted Part 1 of Salford's Local Plan includes Policy H10 which limits the granting of permission to HMOs if they will have a negative impact on the residential character of the surrounding neighbourhood.
- **Wigan** Introduced two Article 4 directions in 2020 covering small areas in Leigh and Swinley. They went to cabinet on the 3<sup>rd</sup> July 2025 with an Article 4 direction for the whole borough after the evidence suggested a displacement effect following the direction introduced in 2020. Wigan has an SPD on HMOs which outlines policy on avoiding high concentrations of HMOs in specific areas when deciding whether to grant permission.
- **Knowsley, St Helens, Wirral and Warrington** do not currently have Article 4 directions which restrict conversions from dwellings (C3) to HMOs (C4).

## Local Policy Context

Nowhere within the borough of Halton is currently covered by an Article 4 direction relating to HMOs.

Halton have recently adopted a Houses in Multiple Occupation Supplementary Planning Document (SPD) which will continue to be used to demonstrate the standards expected by the Council for HMOs. This is to ensure the impact on the amenity of occupiers/neighbours is controlled and the residential character of places within the borough is protected.



In September 2022 the Environment & Urban Renewal Policy and Performance Board (PPB) resolved to form a Working Party of Members to consider policy to address the proliferation and standards in Houses of Multiple Occupation. The HMO working party developed an action plan that was endorsed by the Environment and Urban Renewal PPB in February 2023. Most of those actions have subsequently been implemented and include;

- the adoption of HMO Amenity Standards for licensed HMO's
- the production of a HMO Supplementary Planning Document (SPD)

The Halton Corporate Plan, specifically Priority 6 which provides that 'Supporting Halton's residents to live in decent and affordable homes, surrounded by safe and thriving communities', is applicable to the standards of HMOs. It ensures that there is a delivery of suitable homes which meets every resident's needs. This means providing homes for families who may live in a single dwelling, as well as single people who may rely on HMOs.

It is important to note that an Article 4 direction will not stop the conversion of a dwelling into small HMO. It will only mean that such conversions would require an application for planning permission to be made to the Council for determination. As previously mentioned, Halton has recently adopted a Houses in Multiple Occupation SPD, which will continue to provide guidance. The article 4 direction identifies the areas where property owners will not benefit from permitted development rights and will require planning permission for any type of HMO.

### **Wider Licensing Context**

Separate to planning requirements is the system of licensing requirements for HMOs in England. Licensing requirements ensure that HMOs meet safety, amenity and management standards.

A mandatory license is required for HMOs which will be occupied by five or more unrelated people. HMO licenses are issued by the Environmental Health department as part of the councils housing standards function. The council has adopted a HMO licensing requirements and amenity standards documents setting out the standards licensed HMO's are expected to reach. This will be reviewed to provide guidance on the standards applicable to smaller unlicensed HMO's.

## **Part 2: Evidence and Justification**

### **Houses in Multiple Occupation**

Definition of an HMO: A HMO is a property in which three or more unrelated people live and share basic amenities which can include kitchens and bathrooms.

The Number of HMOs in England:

The Office for National Statistics estimate that, on the 2021 census day, out of a total dwelling stock of 26,394,778 that 182,552 dwellings were HMOs.

### **The Number of HMOs in Halton:**

Since 2018, the number of licenced HMOs in Halton have gradually increased, with the number increasing from 32 in 2018 to 129 in 2025. The council is aware of an additional 73 smaller unlicensed HMO's. The total of known HMO's in Halton is 202.

2018	2019	2020	2021	2022	2023	2024	2025

Ne w	Tot al	Ne w	Tot al	Ne w	Tot al	Ne w	Tot al	Ne w	Tot al	Ne w	Tot al	Ne w	Tot al	Ne w	Tot al
8	32	16	48	17	65	44	109	7	116	5	121	0	121	8	129

*Table 1: Licensing Application for HMOs 2018 - 2025*

The data on known HMO's is sufficient to demonstrate a sustained increase in recent years and as can be seen from the data below this increase has been concentrated in certain wards.

### **Character**

In Widnes, the wards Appleton, Central & West Bank have the highest percentage of their dwelling stock acting as HMOs. In Halebank there are early signs of clustering of HMOs. The buildings in Appleton are often Victorian, and suited to families. The density of houses is quite high, given the town centre location, and properties are affordable. In Central & West Bank these houses are terraced and also suited to families. The area has seen a loss of some of these traditional family homes to HMOs and this has started to impact on the general character of these areas. In Halebank the density of housing is again quite high and of a similar age and size to properties in Appleton and Central and West Bank.

These wards have on-street parking, with limited off-street parking. This coupled with high-density neighbourhoods can mean limited parking provision. HMOs with 3-6 unrelated individuals is likely to lead to a higher parking demand compared to the existing use of a single dwelling. Therefore, this can impact on the amenity of the local community and lead to community tension.

In Runcorn, there is a mixture of old and new town properties, built over many years, ranging from the Victorian period through to the 1980s. Once again, these properties are typical family homes, with some being former social housing. In some of the older areas of Runcorn, the same would apply as stated above i.e. parking provision. In the New Towns, parking tends to be outside individual boundaries within shared parking areas.

Again, like terraced areas this parking is limited, meaning HMOs with 3-6 unrelated individuals are likely to lead to a higher parking demand compared to the existing use of a single dwelling. Therefore, this can impact on the amenity of the local community and lead to community tension.

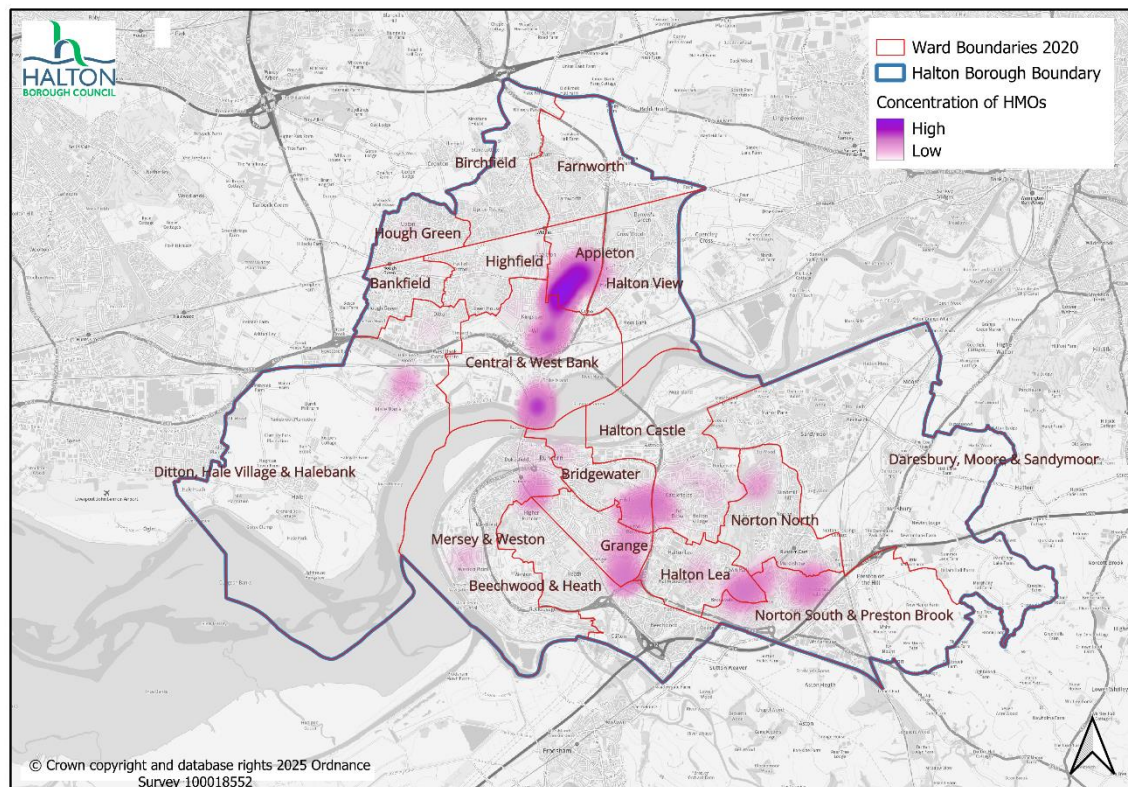
Changes to the character of the area and the cohesion and resilience of the local community. Negative impacts on the amenity of neighbours through the greater intensity of use of HMOs, Pressure on parking provision, Waste storage and litter, Negative impacts on the physical environment and streetscape and the provision of inadequate living accommodation for occupiers.

A large influx of young, single people can have an impact on the family character of an area. HMOs are often occupied by people with contrasting living schedules to traditional families. This can manifest in people with jobs that have irregular working hours and /or younger people who have not settled down with families at this point of their lives. This can lead to comings and goings at extended hours in a way that is not typical in family-orientated, suburban neighbourhoods.

This can cause disturbance and tension amongst the local community. Whilst these characteristics can apply to some residents of family housing, they are far more associated with HMOs (and flat conversions). Clustering of these properties can really start to change the character of the area, as when HMOs are grouped in close proximity the difference in lifestyle between households can lead

to a loss of community cohesion. This can only happen if not planned appropriately, as an article 4 direction would give planners power to intervene if clustering starts to appear.

Figure 1: Heat Map of HMOs in Halton



## Demographics

### Population

The Office for National Statistics estimated Halton to have a population of 129,000 in 2021 (ONS, 2025, [Build a custom area profile - ONS](#))

### Deprivation

Halton Borough is a deprived borough. The Indices of Multiple Deprivation provide statistics on relative deprivation which are reported at a small area level (called Lower Super Output Areas (LSOAs)) across 32,844 areas of England and 317 local authority areas. It uses 7 distinct domains, combined and weighted, which include income, employment, health, education, crime, barriers to housing and services, and the living environment.

The most recent indices of Multiple Deprivation were published in 2019. It shows that 31.6% of Halton's LSOAs were in the most deprived 10% in the country. This was up from 26.6% in 2015 and was the 6<sup>th</sup> highest percentage point increase in the country ([The English Indices of Deprivation 2019](#))

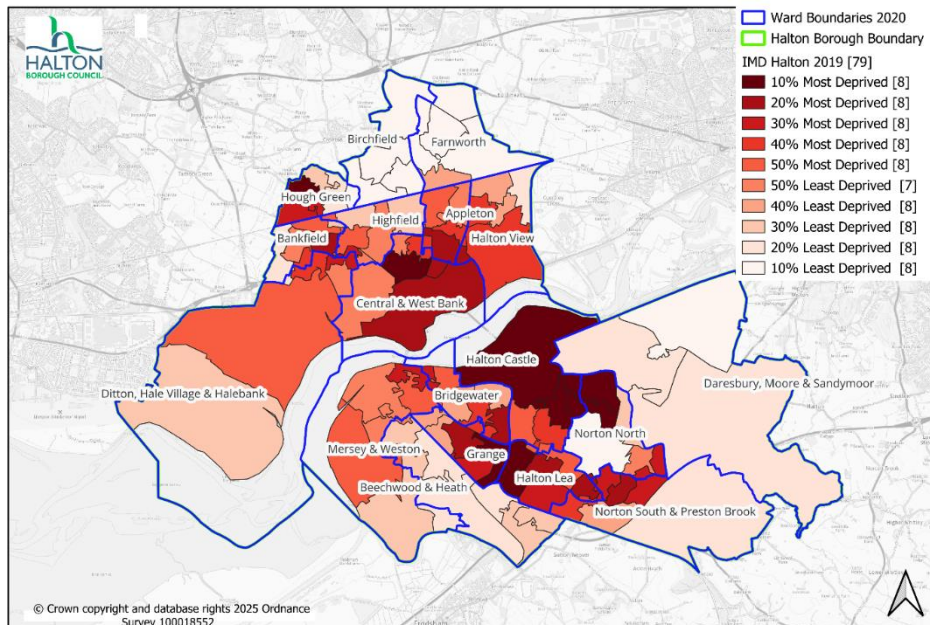
However, the indices are relative, not absolute, as they are ranked in order nationally and so a change in ranking does not necessarily mean a worsening in performance. However the general direction is that Halton became relatively more deprived between 2015 and 2025.

Figure 2 shows a deprivation map of Halton, sourced from the 2019 Indices of Multiple Deprivation (By MHCLG). The borough is split into 79 Lower-layer Super Output Area (LSOA). All



neighbourhoods in England are then ranked according to their level of deprivation relative to that of other areas. The 79 LSOAs have been equally grouped (apart from '50% Least Deprived' due to uneven total no. of LSOAs) into 10 different categories showing the 10% Most Deprived to the 10% least deprived areas. When comparing the deprivation data with the heat map of HMOs within Halton, there is a clear correlation between where HMO properties are located and the areas which are experiencing high levels of deprivation.

*Figure 2: Indices of Multiple Deprivation 2019 Map for Halton*



## Housing

The ONS states that the average house price in Halton was £187,000 in May 2025. This represents a 6.6% increase from May 2024 ([ONS: House prices in Halton](#)). Despite the increase, this figure is low compared to the average English House Price which stood at £306,000.

The average monthly private rent in Halton was £693 in June 2025, which represents an 4.7% increase from June 2024. However, again, in spite of the increase, the average private rent price in Halton remains low when compared to the average private rent price in England of £1,344.

With lower house prices and private rental prices Halton is an attractive prospect for buy to let landlords.

## Amenity/ Crime/ Anti-Social Behaviour HMOs and Crime/ Anti-Social Behaviour

During the public consultation on the HMO SPD, complaints included issues surrounding noise, anti-social behaviour, car parking and waste. This can be found in the Consultation Statement on the Council website<sup>3</sup>. Such complaints demonstrate that some HMOs may negatively affect the amenity of the areas in which they sit. Any further HMOs, or new clusters of HMOs, could cause further harm to the amenity of areas.

## Summary of Evidence

There has been a sustained increase in the numbers of HMOs within the borough from the years 2018 to 2025. Low house prices make Halton an attractive place for the private rented sector to

<sup>3</sup> [Halton Borough Council - Supplementary Planning Documents](#)

invest in properties and convert them into HMOs. The planning department currently does not have control over the impacts of small HMOs that are used by 3-6 unrelated individuals, with negative impacts often stemming from when HMOs are clustered in close proximity with each other. The Council have identified areas of clustering within wards in both Widnes and Runcorn. The Council is aware of the importance of HMOs within the dwelling stock. However, there is a concern around the impact of clustering on local character, community cohesion and residential amenity. It is evidenced by the complaints found in the SPD public consultation that HMOs may negatively affect the amenity of the area. Furthermore, clustering of these properties can really start to change the character of the area, as when HMOs are grouped in close proximity the difference in lifestyle between households can lead to a loss of community cohesion and suburban feel. With planning control, facilitated by an Article 4 direction, development management teams can mediate the issues that may come from HMO applications. Without this control, the Council risks development that would be prejudicial to the proper planning of the area or constitute a threat to residential amenity. This could have adverse effects on the local character and community cohesion. Therefore, it is recommended to introduce an article 4 in the identified areas, to manage the location of future HMOs and prevent clustering of these properties.

### **Part 3: Proposals**

#### **New Article 4 Direction**

**In order to protect amenity and ensure Halton's communities remain sustainable with a mix of dwellings including those for families and single occupiers it is recommended an immediate Article 4 direction, in the areas shown in Appendix B, to remove the permitted development right to convert a dwellinghouse (C3) into a small HMO (C4).**

The Article 4 direction will have the direct impact of making all future HMO proposals subject to planning control. This will allow better regulation and monitoring of HMOs, as conditions can be attached to planning permission. Halton has a supplementary planning document on HMOs and could potentially explore developing a HMO policy in the next Local Plan. However, an Article 4 direction is needed to ensure that all conversions go through the planning process. Without an Article 4 direction the Council would not be able to apply any policy on HMOs to conversions from dwelling houses to small HMOs for up to six people.

It is proposed that the new Article 4 direction will apply only to the areas specified in Appendix B. Evidence from other local authorities suggests that when an Article 4 direction is introduced in a smaller area, that this merely shifts the problem to other areas of a borough. However, the NPPF advises that Article 4 directions should be applied in a measured and targeted way, and should be limited to situations where the direction is necessary to protect the amenity or local wellbeing of the area (Paragraph 54). Article 4 directions which apply to large areas (such as those which cover the majority of a local planning authority) need to have a particularly strong justification. Halton Borough Council has the evidence of clustering of HMOs within certain neighbourhood in the borough. However, we currently do not believe there is the sufficient evidence to suggest a borough-wide implementation of an Article 4. However, if evidence of displacement is brought to the Council's attention after enacting this Article 4, the issue can be revisited.

## **Appendix A - Draft Article 4 Direction**

### **IMMEDIATE ARTICLE 4 DIRECTION Halton Borough Council**

COUNCIL TOWN AND COUNTRY PLANNING (GENERAL DEVELOPMENT PERMITTED DEVELOPMENT) (ENGLAND) ORDER 2015 (AS AMENDED)

WHEREAS Halton Borough Council (the “Council”) being the appropriate local planning authority within the meaning of article 4 and schedule 3 of the Town and Country Planning (General Permitted Development) Order 2015, as amended (the “Order”), are satisfied that it is expedient that development of the description(s) set out in the Schedule below should not be carried out on the land shown edged red on the attached plans (the “Land”), unless planning permission is granted on an application made under Part III of the Town and Country Planning Act 1990 as amended.

NOW THEREFORE the said Council in pursuance of the power conferred on them by article 4(1) of the Order hereby direct that the permission granted by article 3 of the said Order shall not apply to development on the said land of the description(s) set out in the Schedule below.

THIS DIRECTION is made under article 4(1) of the said Order and, in accordance with paragraph 2(6) of Schedule 3, shall remain in force until X February 2026 (being six months from the date of this direction) and shall then expire unless it has been confirmed by the appropriate local planning authority in accordance with paragraphs 1(9) and (10) of Schedule 3 of the Order before the end of the six month period.

#### **SCHEDULE**

Development consisting of a change of use of a building from a use falling within Class C3 (dwellinghouse) of the Schedule to Town and Country Planning (Use Classes) Order 1987 (as amended) to a use falling within Class C4 (Houses in Multiple Occupation) of that Schedule, being development comprised within Class L(b) of Part 3 of Schedule 2 to the Town and Country Planning (General Permitted Development) Order 2015 and not being development comprised within any other Class.

The Article 4 Direction will come into force on the date below.

Made under the common seal of **HALTON BOROUGH COUNCIL**

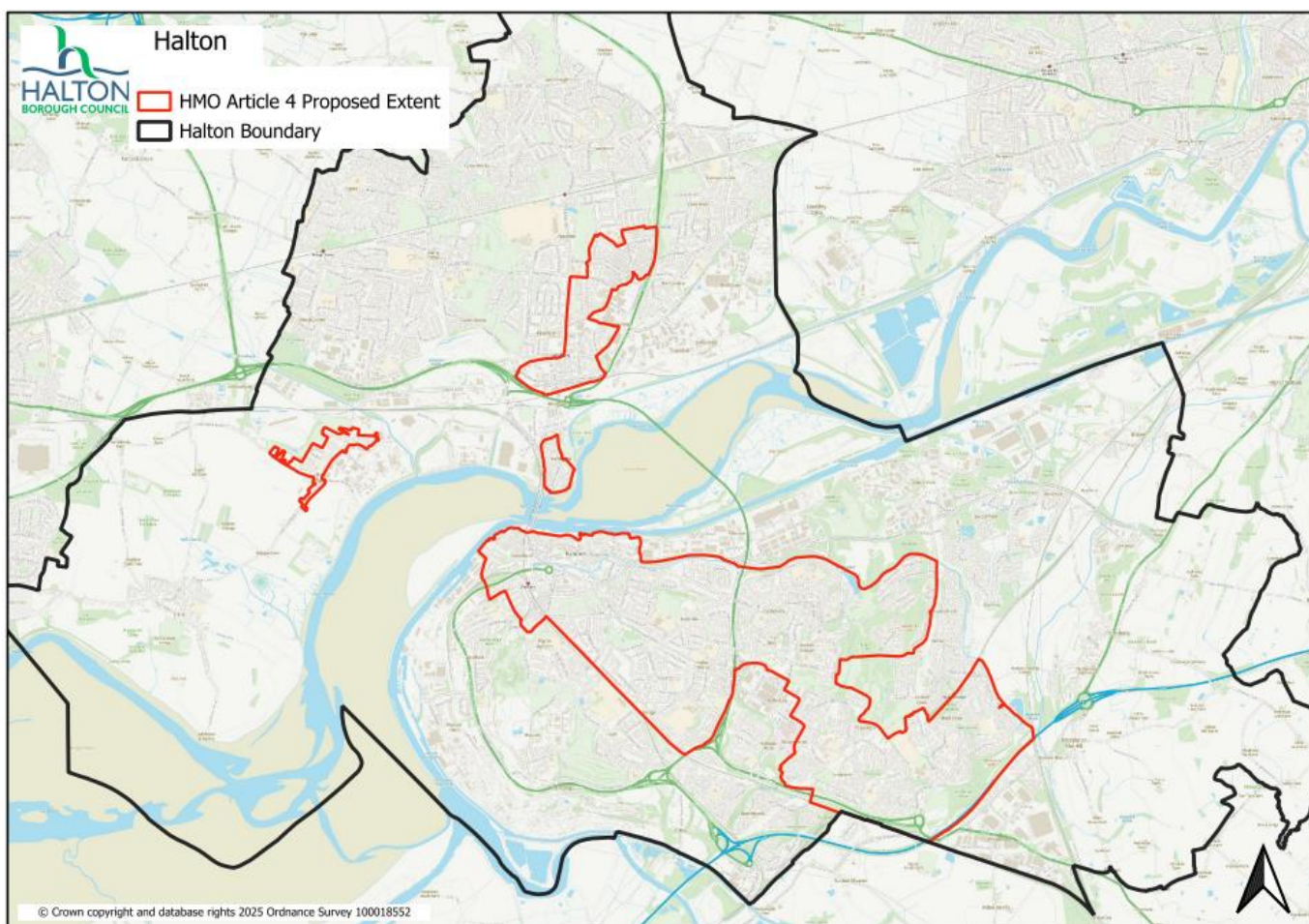
this .....day of September. 2025

The common seal of Halton Borough Council was affixed to this Direction in the presence of:-

..... Authorised Signatory

## **Appendix B – Areas where the Article 4 direction will apply**

### **Halton Borough**

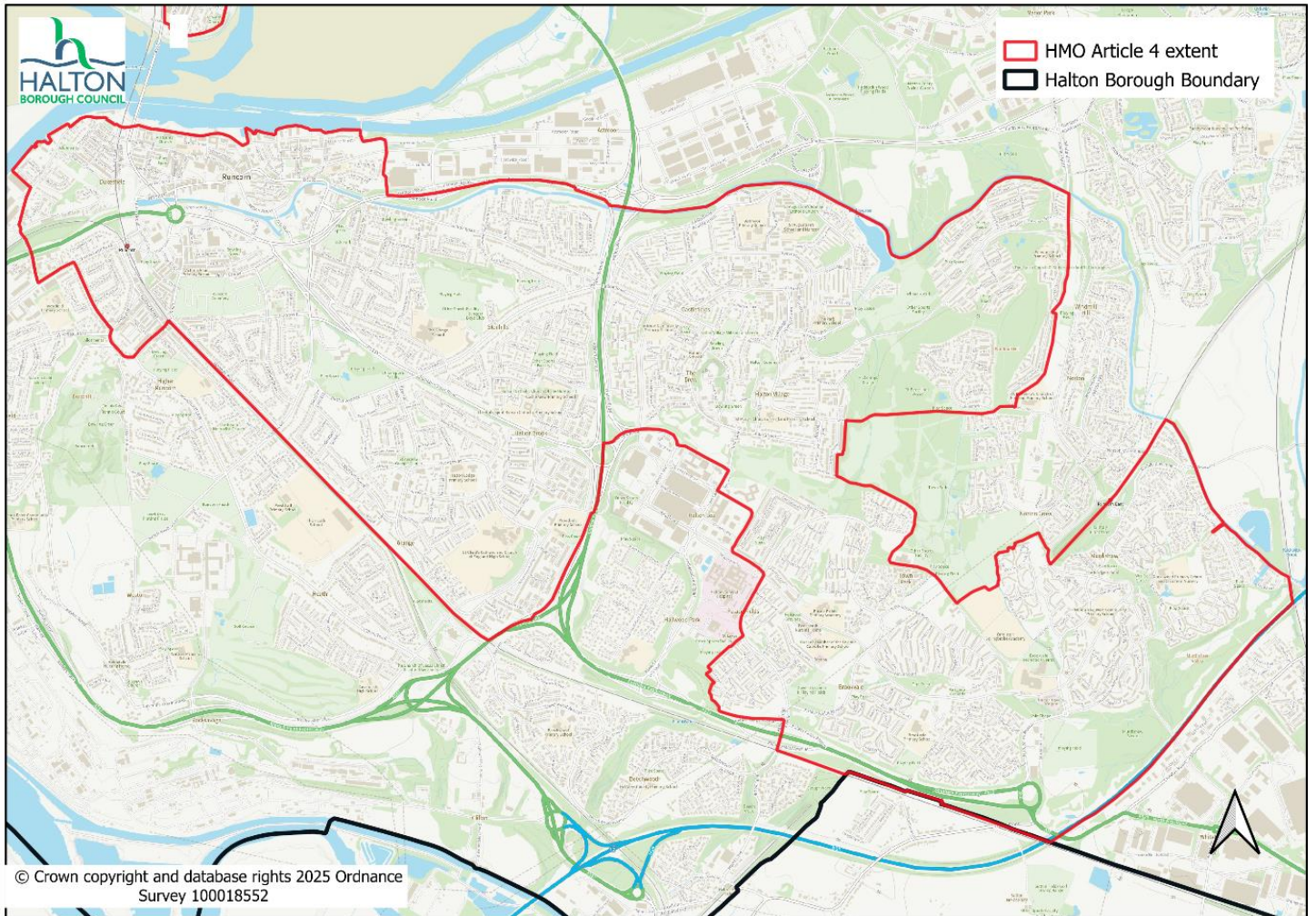




## Widnes



# Runcorn





## **Appendix C - Draft Article 4 Direction Notice**

### **HALTON BOROUGH COUNCIL TOWN AND COUNTRY PLANNING (GENERAL PERMITTED DEVELOPMENT) (ENGLAND) ORDER 2015 (AS AMENDED)**

#### **PUBLIC NOTICE**

**NOTICE OF MAKING AN IMMEDIATE DIRECTION UNDER ARTICLE 4 RELATING TO** *Parts of Appleton, Central & West Bank, Halebank, Mersey & Weston, Beechwood & Heath, Grange, Bridgewater, Halton Castle, Halton Lea, Norton North and Norton South & Preston Brook*

**NOTICE** is hereby given that Halton Borough Council made an immediate Article 4(1) Direction on X September 2025 under Article 4(1) of the Town and Country Planning (General Permitted Development) (England) Order 2015 (as amended).

The Direction removes the permitted development rights for the change of use from a use falling within Class C3 (dwellinghouse) of the Schedule to Town and Country Planning (Use Classes) Order 1987 (as amended) to a use falling within Class C4 (Houses in Multiple Occupation) of the said Order and not being development comprised within any other Class.

The Direction applies to *Parts of Appleton, Central & West Bank, Halebank, Mersey & Weston, Beechwood & Heath, Grange, Bridgewater, Halton Castle, Halton Lea, Norton North and Norton South & Preston Brook*, within the Borough of Halton as shown edged red on the Plan attached to the Direction. A copy of the Direction including the map defining the area can be viewed online: <https://www.halton.gov.uk/>

This Immediate 2025 Article 4 Direction shall come into force immediately on the day it is served (X September 2025), and if subsequently confirmed by the Council shall come into force permanently on X February 2026 (unless a different date is specified by the Secretary of State) subject to the consideration of any representations received during the consultation period.

Representations may be made concerning the Article 4 Direction to the local planning authority from X September 2025 to X February 2026, by emailing, representations can be sent by email to:

forwardplanningt@halton.gov.uk

Date of Notice ..... September 2025

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

Document is Restricted

By virtue of paragraph(s) 4 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

Document is Restricted

By virtue of paragraph(s) 1, 3 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

Document is Restricted