



**AGENDA PAPERS FOR
HEALTH SCRUTINY COMMITTEE MEETING**

Date: Tuesday, 12 February 2013

Time: 6.30 pm

Place: Room 7 and 8 - Quay West, Trafford Wharf Road, Trafford Park, M17 1HH

A G E N D A	PART I	Pages
1.	ATTENDANCES	
	To note attendances, including Officers, and any apologies for absence.	
2.	DECLARATIONS OF INTEREST	
	Members to give notice of any interest and the nature of that interest relating to any item on the agenda in accordance with the adopted Code of Conduct.	
3.	MINUTES	1 - 6
	To receive and, if so determined, to agree as a correct record the minutes of the meeting held on 9 January 2013.	
4.	UPDATE ON THE SHADOW HEALTH AND WELLBEING BOARD	
	To receive an update on the operation Shadow Health and Wellbeing Board prior to its establishment as a decision making body in April 2013. TO FOLLOW	
5.	RESOLUTION FROM THE JOINT HEALTH SCRUTINY COMMITTEE	7 - 8
	To receive, for the Committee's information, the resolution made by the Joint Health Scrutiny Committee to NHS Greater Manchester on 14 January 2013.	
6.	NHS HEALTH CHECK SUPPORT PROGRAMME	9 - 12
	To receive, for the Committee's consideration, information relating to the NHSs' Health Check Support Programme	

7. EXECUTIVE RESPONSE TO BUDGET SCRUTINY 2013-14 13 - 24

To receive, for the Committee's information, the Executive response to budget scrutiny 2013-14.

8. RESPONSE TO THE HEALTH SCRUTINY COMMITTEE'S LETTER: AGEING WELL REVIEW

To receive, for the Committee's consideration, the response to the letter dispatched shortly after Health Scrutiny Committee on 17 October 2012 in respect of the recommendations arising from the Ageing Well review. TO FOLLOW

9. TOPIC GROUP UPDATE

To receive an update from the Topic Group Chairmen on the progress made by Topic Group C and D.

10. URGENT BUSINESS (IF ANY)

Any other item or items (not likely to disclose "exempt information") which, by reason of special circumstances (to be specified), the Chairman of the meeting is of the opinion should be considered at this meeting as a matter of urgency.

11. EXCLUSION RESOLUTION (REMAINING ITEMS)

Motion (Which may be amended as Members think fit):

That the public be excluded from this meeting during consideration of the remaining items on the agenda, because of the likelihood of disclosure of "exempt information" which falls within one or more descriptive category or categories of the Local Government Act 1972, Schedule 12A, as amended by The Local Government (Access to Information) (Variation) Order 2006, and specified on the agenda item or report relating to each such item respectively.

THERESA GRANT

Chief Executive

Membership of the Committee

Councillors J. Lloyd (Chairman), J. Lamb (Vice-Chairman), S. Taylor, J. Brophy, Mrs. A. Bruer-Morris, D. Butt, Mrs. V. Ward, K. Procter, J. Holden, J. Harding, Mrs. J. Wilkinson and B. Shaw (ex-Officio)

Further Information

For help, advice and information about this meeting please contact:

Helen Mitchell, Democratic Services Officer,
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Health Scrutiny Committee - Tuesday, 12 February 2013

This agenda was issued on **Thursday, 31 January 2013** by the Legal and Democratic Services Section, Trafford Council, Quay West, Trafford Wharf Road, Trafford Park, Manchester, M17 1HH.

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HEALTH SCRUTINY COMMITTEE

9 JANUARY 2013

PRESENT

Councillor J. Lloyd (in the Chair).

Councillors J. Brophy, Mrs. A. Bruer-Morris, D. Butt, J. Harding, J. Holden, J. Lamb (Vice-Chairman), K. Procter, S. Taylor, Mrs. V. Ward and Mrs. J. Wilkinson

In attendance

Deborah Brownlee	Corporate Director Children and Young People's Services
Peter Forrester	Democratic Services Manager
Helen Mitchell	Democratic Services Officer

Also in attendance

Dr. George Kissen	NHS Trafford
Jessica Williams	NHS Greater Manchester

19. MINUTES

RESOLVED: That subject to an amendment to minute number 14, indicating that the Committee were to receive information relating to the costs of the New Health Deal for Trafford consultation, the minutes of the meeting held on 17 October 2012 be agreed as a correct record.

20. DECLARATIONS OF INTEREST

The following declarations of Personal Interests were reported to the meeting:

Councillor Lloyd, in relation to the Stroke Association;
Councillor Brophy, in relation to her employment within the NHS;
Councillor Taylor, in relation to her employment within the NHS;
Councillor Mrs. Bruer – Morris, in relation to her employment within the NHS.

RESOLVED: That the Declarations of Interest made to the meeting be noted.

21. URGENT BUSINESS (IF ANY)

There was no Urgent Business brought to the Chairman's attention.

22. NEW HEALTH DEAL FOR TRAFFORD - POST CONSULTATION

The Committee welcomed representatives from NHS Greater Manchester to the meeting. They were in attendance to update the Committee with the outcome of the consultation in respect of the New Health Deal for Trafford and the recommendations of the Strategic Programme Board (SPB) from its meeting on the 19th December 2012 on the next steps.

The Assistant Director – Service Transformation for NHS Greater Manchester stated that the SPB had considered the consultation responses and had made

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9 January 2013

recommendations for the proposals to proceed. However, they had identified a number of issues that needed to be met ahead of implementation. The SPB had agreed that the four tests for service reconfiguration had been met and had noted that agreement for the proposed changes had been secured from a wide range of commissioners, providers and organisations. The SPB also set out their response to the comments of the Joint Health Scrutiny Committee and the Trafford and Manchester Health Scrutiny Committees.

The Chairman also made reference to an open letter covering a number of themes which had been submitted by the Save Trafford General campaign group to the Committee in advance of the meeting. The Committee's Chairman thanked the Campaign Group for bringing these issues to the meeting but highlighted that part of the letter referred to a number of issues which were beyond the Committee's remit and therefore, they would be unable to investigate at the present time.

The Chairman stated that the purpose of the meeting was to prepare a response that would be fed into the Joint Health Scrutiny Committee meeting on the 14th January 2013. These would be considered by a meeting of the SPB on the 15th January and they would submit recommendations to the Board of NHS Manchester at its meeting on the 24th January.

The Committee asked a number of questions of NHS representatives at the meeting. In addressing the issues of governance, the Assistant Director – Service Transformation advised the Committee that the five voting Members of the Strategic Programme Board were the Chairmen of the three affected Clinical Commissioning Groups, the Chief Executive of NHS Greater Manchester and the Vice Chairman of NHS Greater Manchester.

Members stated that they were not assured that the deflection of emergency activity from Trafford General Hospital would be achieved without an adverse effect on patients and that the clear interdependencies with Healthier Together meant that the proposals should be considered within the Greater Manchester review of services.

In response to Members' concerns, NHS representatives stated that robust tests would be in place to ensure that progressing to model 3 would not affect patient outcomes and that only a very small number of patients would be deflected from Trafford General Hospital to other acute centres.

In response to the issue of Healthier Together, they stated that a prompt decision on the New Health Deal proposals was needed to ameliorate the financial and clinical issues at Trafford General Hospital. They said that it was not possible to wait until the formal consultation stage of Healthier Together to incorporate all the proposals contained within the New Health Deal because of this. Furthermore, it was highlighted that no other part of Greater Manchester has three teaching hospitals within close proximity and that the proposals present a sustainable future for health services in the Borough.

Further questions were asked of NHS representatives in respect of the speed in which the vision of Integrated Care could be implemented, how competition and the choice agenda could impact upon the viability of the Centre of Excellence for

elective orthopaedic services and how issues of transport for both Trafford and Manchester residents could be addressed.

In response to these questions, NHS representatives highlighted that work on the issue of Integrated Care was being progressed. The Committee were advised that patients would be able to elect to receive treatment at a number of other centres across Greater Manchester but higher risk patients would be required to receive treatment from Manchester Royal Infirmary. It was however stated that the commissioners expect that 5,000 patients will elect to use the Centre which would establish a sustainable source of income for the Trust. With regard to transport, a bureau would be established to enable patients to book transport to the hospital and that funding of £10,000 would be allocated to support this.

Members were very concerned at the amount of choice which patients would have in relation to elective orthopaedic work. They were specifically concerned about the likely effect that this may have on patients choosing to have their surgery at other sites which would lead to a reduction in the numbers attending Trafford General Hospital and ultimately a loss of income. Furthermore, Members were alarmed at the apparent lack of investment in a transport bureau to facilitate patients to access the Hospital.

Members further questioned NHS representatives in respect of the detail around Integrated Care, the health issues specific to Partington and Carrington and the efforts made by the commissioners in relation to patient engagement and the establishment of a Community Geriatrician.

In responding, NHS representatives noted that the commissioners were not consulting on Integrated Care as it was already in operation and support for the proposals and Integrated Care broadly has been secured by the Local Medical Committee. It was noted that the issues in Partington and Carrington formed the basis of a very recent meeting between the Clinical Director – Service Transformation and local GP's. In relation to patient engagement, NHS representatives acknowledged that they had hoped for more responses to the consultation but had received independent assurance that the responses formed a statistically significant return and that efforts had been made to engage the community in its widest sense. Finally, Members were informed that the geriatrician post would need to be in place before the changes from model 2 to model 3 were implemented and that the NHS were currently engaged in drafting a set of criteria to suggest the safe implementation to the nurse-led minor injuries unit.

In concluding their discussions, the Committee requested assurances that no further sites of accident and emergency provision were set to close in Greater Manchester and the need for information to be provided to the Committee and the public in a transparent fashion. The Assistant Director –Transformation advised the Committee that there were no plans to close accident and emergency sites across Greater Manchester and acknowledged the Committee's request in respect of openness in communication.

Members welcomed the suggestion that a presentation be delivered to Members on Integrated Care within a local context.

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Following the withdrawal of NHS representatives, Members deliberated the issues raised and considered a draft response which was tabled at the meeting and was subsequently amended to fully reflect the discussion which had taken place. At this stage, Members agreed to a delegated arrangement in which to finalise the submission to the Joint Health Scrutiny Committee to consider at its meeting on 14th January 2013.

RESOLVED –

- (1) That the reports be noted;
- (2) That the Committee receive a presentation on Integrated Care at the earliest opportunity;
- (3) That a delegated arrangement between the Chairman and Vice Chairman and the Democratic Services Manager be agreed in which to finalise the submission to the Joint Health Scrutiny Committee.

23. HEALTH OVERVIEW AND SCRUTINY PROTOCOLS

The Committee received a refreshed Health Scrutiny Protocol for their consideration and agreement. The changes to the Overview and Scrutiny function in May 2012 had it provided an opportune time to refresh the protocols and the approach to substantial variations.

The issue of Members requesting information from health bodies was discussed and the Committee were advised that it was important that the Chairman and Vice Chairman possess an overview of the health scrutiny work programme and ensure that requests for information are reasonable.

Members were advised that as the Protocols represented a change to the Council's Constitution, they would be submitted to the Executive and Standards Committee prior to their eventual agreement at Council. Given the number of opportunities for Members to submit further comments prior to their agreement, it was requested that any further comments be provided to the Democratic Services Officer as soon as practicable.

RESOLVED –

- (1) That the Health Scrutiny Protocol be recommended to Council for approval;
- (2) That any comments on the content of the Protocol be forwarded to the Democratic Services Officer as soon as practicable.

24. BUDGET SCRUTINY REPORT

The Committee received for their information, the report arising from Budget Scrutiny which had received prior agreement in the form of a delegated arrangement between the Chairmen and Vice Chairmen of the Scrutiny and Health Committees. The report documented the findings and recommendations of the budget scrutiny exercise which took place during November 2012.

RESOLVED – That the report be noted.

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The meeting commenced at 6.30 pm and finished at 9.30 pm

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TRAFFORD COUNCIL

Report to: Health Scrutiny Committee
Date: 12 February 2013
Report for: Noting
Report author: Helen Mitchell, Democratic Services Officer

RESOLUTION OF THE JOINT HEALTH SCRUTINY COMMITTEE

As the Committee are aware, Trafford and Manchester Councils established a Joint Health Scrutiny Committee earlier this year in order to receive, and be consulted upon, the New Health Deal for Trafford.

Following the meeting held on 14 January 2013, the Joint Committee

RESOLVED:-

“The committee agrees that in the event that NHS Greater Manchester, following the recommendations from the Trafford Strategic Programme Board, rejects the Committee’s concerns, and proceeds with the proposals decided at the Programme Board’s meeting of 19 December 2012, to authorise its Chair and Vice Chair to refer to the proposals to the Secretary of State as a substantial variation which is not in the interests of the health service and patients of the Borough of Trafford and the City of Manchester”.

Recommendation:

1. That the Health Scrutiny Committee note the resolution of the Joint Health Scrutiny Committee.

Background Papers

None

Contact Officer

Helen Mitchell – 0161 912 1229

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NHS Health Check support programme

Dear Colleague,

As you know, responsibility for commissioning the risk assessment element of the NHS Health Check transfers to local authorities in April 2013 as part of their wider responsibilities for public health. Directors of public health are currently managing arrangements for the successful transfer of NHS Health Check contracts. It is proposed that the NHS Health Check will be a mandatory public health service which local authorities will be required to commission.

The Department of Health (DH), NHS Diabetes and Kidney Care (which supports implementation of the NHS Health Check) and the Local Government Association (LGA) have agreed that there needs to be a programme of information and support to local authorities in taking up this new responsibility. This letter provides a brief overview of what is involved in commissioning and delivering the NHS Health Check. It also sets out the actions we are proposing to undertake jointly through the support programme, and invites your views on these proposals. In addition to our proposed support set out in this letter, Public Health England, which will take on responsibility for supporting delivery of the NHS Health Check from April this year, is undertaking an assessment of the support required in future. The details of this assessment will be made available once complete.

Overview of NHS Health Check

The NHS Health Check identifies people who are at risk of developing the preventable illnesses of heart disease, stroke, diabetes or kidney disease, and helps them to avoid or delay these conditions. This is a national scheme in which everyone between the ages of 40 and 74 who has not been diagnosed with any of these conditions will be invited for an NHS Health Check once every five years. The risk assessment element takes about thirty minutes and involves questions regarding family health history, and checks, such as weight, blood pressure and cholesterol. The results are discussed with the individual, and personalised advice is given on how to lower their risk through developing a healthy lifestyle. Some people may need further tests and some will be started on medication such as statins.

Currently the majority of NHS Health Checks are provided through GP practices, but local authorities will be free to commission the risk assessment element from other providers. Following an NHS Health Check people may need access to medical treatment, and/or to lifestyle support. It therefore requires a partnership between local authorities, clinical commissioning groups and other local stakeholders to ensure that a systematic, integrated approach is in place.

The NHS Health Check brings significant benefits to individuals, with the potential to prevent up to 1,800 strokes and 9,700 cases of diabetes each year. It also results in savings; it is estimated that savings to the NHS budget nationally could be around £57 million over four years, rising to £176 million over a fifteen-year period. The level of savings to adult social care and to the national economy through reduced illness, sickness absence and benefit payments will be the subject of

future financial modelling.

Programme of information and support

The NHS Health Check support programme, run by NHS Diabetes and Kidney Care, has operated since April 2009. Its resources are now being updated to reflect the transfer to local authorities and prior to the transfer of the support role to PHE. Some of the measures proposed are outlined below:

- NHS Health Check has a [dedicated website](#) which was designed mainly for public health practitioners responsible for local commissioning. We are developing the website further so that it has information relevant to local authorities and interested stakeholders.
- Local ownership of the NHS Health Check is vital. The website already has a map of performance which shows health check offers made and taken up in PCT areas, and this is being amended to reflect local authority boundaries so that local authorities can identify and benchmark performance.
- The website includes some excellent examples of how the NHS and local authorities are already working together on NHS Health Checks and we intend to build upon and continue to share these.
- We intend to run a series of events across the country so that councillors and other local authority representatives can learn more about the NHS Health Check programme.
- We are developing a resource for health overview and scrutiny committees with the Centre for Public Scrutiny (CfPS).

We also hope to set up a reference group of local authority councillors and officers to advise on developments. If you are interested in being involved in a reference group, which would involve only a small time commitment, please contact the LGA by emailing Liam.Paul@local.gov.uk.

A briefing pack with more detailed information about the NHS Health Check will be circulated to local authorities and health and wellbeing boards later this month. The DH is also revising the NHS Health Check programme guidance to ensure this takes account of the new arrangements for public health and other changes. This will include setting out issues to do with the branding of the programme and any recommendations about the future use of the term 'NHS Health Check', which has been useful in helping identify it as a service free to the general public and distinguishable from health checks offered by companies for a fee.

Local authorities and health and wellbeing boards that have not already done so are encouraged to familiarise themselves with how the NHS Health Check programme is being transferred in their areas.

If you would like more information about the NHS Health Check programme or wish to make contact with the team, please visit our website www.healthcheck.nhs.uk.

Yours sincerely,

Nicola Strother Smith

Nicola Strother Smith
National Director NHS Diabetes and Kidney Care



Councillor David Rogers
Chair Community Wellbeing Board, LGA

Contact us

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ACTIONS ARISING FROM OVERVIEW AND SCRUTINY REPORTS

Date: 6 February 2013

Committee: Scrutiny Committee/Health Scrutiny Committee



Report Title: Budget Scrutiny 2013/14

Lead Overview and Scrutiny Member: Cllrs Brian Shaw and Judith Lloyd

Executive Member Responsible: All

Ref	Recommendation	Agreed (Y/N)	Planned Action in Response to Recommendations	Timescale for Completion	Responsible Executive Member
1	That the Executive provide Scrutiny Committee with details of any long-term monitoring and evaluation work undertaken in respect of significant budget changes and policy choices in relation to services for children and young people.	Y	<p>CYPS routinely monitors service developments and policy choices through its performance management framework which includes the quarterly reporting to Council Executive of progress against the Annual Delivery Plan.</p> <p>In addition it is proposed to provide an update directly to Scrutiny Committee on a 6 monthly basis covering outcomes for children and young people in Trafford in the context of health, social care, and education. This will allow scrutiny to develop an informed view of the impact any budget changes and policy choices are having on the lives of Trafford children and young people.</p>	Ongoing	<p>Cllr Blackburn Cllr Cornes</p>

2	That the Executive closely monitor the impact and effectiveness of the proposed increase in the use of volunteers to deliver services such as those in Children's Centres and Youth Services.	Y	<p>Using volunteers has proved successful in both Hale (27) and Old Trafford (12) libraries. There has been no impact on service delivery as sufficient staff have been retained to support volunteers and deliver other Council services. Should the budget proposals be approved this approach will be extended to all libraries over the next 2 years</p> <p>A strategic approach to volunteering in CYPS is a key objective within the Directorate Improvement Plan and monitored on quarterly basis. The main areas of activity relate to Children's Centres and Youth Services and an update will be provided to Scrutiny Committee on a 6 monthly basis as referenced above.</p>	Complete and ongoing	<p>Cllr Williams</p> <p>Cllr Blackburn</p>
3	That the financial effect of the proposed transition to a more outreach-based approach be rigorously monitored, given its potential to bring to light previously unforeseen need.		CYPS is in the process of implementing its Early Intervention Strategy with outreach based approaches as a key aspect of that strategy. We will regularly monitor service demand, and the impact that has on capacity and budget planning, through our existing finance and performance management regime.	Ongoing	Cllr Blackburn

4	That the Executive provide the merger action plan, and whatever details of proposed structures are currently available for the merged CYPS and CWB Directorates, for consideration by the Scrutiny Committee.		<p>The high level project plan and proposed management structure are embedded below. A link to the detailed project plan is available from Deborah Brownlee on request.</p>   <p>New management structure.ppt Transition Plan.doc</p>	31/3/13	<p>Cllr Blackburn Cllr Cornes Cllr Barclay Cllr Young</p>
5	That, in relation to the proposed re-tendering exercises for services such as Supporting People and Public Health, the Executive provide Scrutiny with assurances that tendering models and contract monitoring are robustly designed to protect quality, standards and volume of services specified, and not specifically (DB 26/11) to reduce tender prices.		<p>The re-tender of services will meet the commissioning and procurement requirements which reflect both quality and general efficiencies. The Council subsequently is assured that services subject to tender request value for money whilst encouraging potential service providers to be creative in the delivery of the service to customers in Trafford. The monitoring applied to services following an award of the contract is robust based on an embedded market management approach.</p>	Complete	<p>Cllr M Young Cllr K Barclay</p>
6	That the Executive provide for Scrutiny further analysis of the proposed savings within Supporting People, Housing Services (Proposal CWB16), and in particular of the acknowledged “significant reduction in service provision”.		<p>A full market review of supporting people services was carried out prior to the proposals being formulated. Providers and other stakeholders were fully involved in the review. The social inclusion housing services element of the review was led by Richard Roe the Council’s Strategic Housing Manager, this ensured that the review focused on how best to maintain and improve essential statutory housing services. The review provided the evidence base from which the savings proposals were developed. The full market</p>	Complete	<p>Cllr M Young</p>

		<p>review is available if further information is required. A comprehensive impact assessment is being prepared and will be completed on the 14th Jan, this will provide further analysis and will identify possible impacts and how these will be mitigated.</p> <p>The detailed proposals are:</p> <p>Short stay supported accommodation We propose that there would be a new single service providing short stay supported accommodation. We would tender for this new service. We could reduce costs by £129,000 from April 2013.</p> <p>Floating support service We propose to review the floating support service funded through Supporting People We could reduce costs by £135,000 from April 2013 and £35,000 from April 2014.</p> <p>Services for victims of domestic violence We propose to re-tender the service. The new service would begin in April 2013. We could reduce costs by £10,000 from April 2013.</p> <p>Sheltered housing We propose to end the Supporting People contribution towards the scheme manager role at sheltered housing from April 2013.</p>		
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We could reduce costs by £338,000 from April 2013.

Community Alarm Service (Category One)

We propose to continue contributing to the community alarm service for Category One and sheltered properties throughout 2013/14. This contribution will end from April 2014. The community alarm service at both sheltered housing and Category One will be integrated into the telecare service. Access to the service would be linked to a needs assessment completed by adult social care, rather than type of accommodation. We could reduce costs by £231,000 from April 2014.

Home improvement brokerage

The pilot home improvement brokerage service comes to an end in March 2013. We propose not to re-tender this service. We could reduce costs by £50,000 from April 2013.

Support for young people

Supporting People funded services for young people will be retendered by Children and Young People's Services within Trafford Council. The service would focus on young people aged 16 to 19 years and those for whom the Council has a statutory responsibilities. We could reduce costs by £128,000 from April 2013.

<p style="text-align: center;">7</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 18</p>	<p>That the Executive give further consideration to the potential impact of proposed savings in Information and Advice Services, particularly in view of the nature of the wider financial climate and envisaged demand increases arising from various aspects of welfare reform proposals.</p>		<p>The Information and Advice Review is based on a partnership approach to the future development of information and advice services in Trafford. This collaborative approach enhances the opportunity to determine how services can be delivered in a more efficient way, whilst at the same time respond to the anticipated demand increases arising from various aspects of the welfare reform proposals in the near future. The partner organisations have responded in an extremely positive way to date and are presenting innovative and creative options for consideration as part of the review process. The review will report in January.</p>	<p style="text-align: center;">February 2013</p>	<p style="text-align: center;">Cllr M Young</p>
<p style="text-align: center;">8</p>	<p>That the Executive assure itself about the deliverability of savings associated with the HR staffing review.</p>	<p style="text-align: center;">Y</p>	<p>The savings are deliverable albeit that they will have an impact on Managers who will have to be equipped to deal effectively with first level disciplinary, sickness, grievance type issues. HR staff will only have the capacity to support serious cases. Training will be restricted to statutory/mandatory and will be delivered primarily from the AGMA hub contract. Workforce development will be prioritised to support the changing shape of the organisation and the pace and level of change required. Opportunities to generate income could be impacted by these further reductions, this needs to be balanced against the benefits of</p>		<p style="text-align: center;">Cllr Williams</p>

			additional income supporting the retention of staff. The impact of changes will be monitored.		
9	That the Executive ensure that it has the capacity to identify and deliver transformational change programmes including ensuring that the benefits associated with cross authority working are realised.		The final proposed structure for the Transformation Team presents a reduction of 10 FTE (including 2 vacancies). However, the LTA project will conclude in the Spring of 2013, releasing 4 FTE to undertake alternative transformation project activity. In addition, the programme of activity for the Transformation Team will continue to be approved/monitored by the Transformation Board and prioritised to ensure the resources in the team are utilised to the best effect to achieve the change and benefits realisation needed. To support this, director level representatives from each directorate will be guiding the review & development of the Transformation Programme for 2013/14 to ensure the team is deployed most effectively, in consideration of their support requirements and priorities.	The new structure will be in effect from 1/4/13	Cllr Williams
10	That whatever the response to the consultation on the future of library provision, the Executive undertake to maximise, wherever possible, availability of IT access in libraries for the Borough's residents.	Y	Providing public access to the internet through the Peoples Network is a statutory requirement and we provide 30 minutes free access per day in all libraries. This is supported by Age UK providing formal training in some libraries and staff supporting residents who want to use the internet or access Council services on-line. Library staff are currently helping residents without internet access to apply for the energy switching scheme.	Complete and ongoing	Cllr Williams

11	That the Executive ensure that impact of the savings associated with the dissolution of the Mersey Valley Partnership are fully identified and review whether the proposals are manageable given the time constraints.		<p>The Mersey Valley Partnership funding does not pay for any maintenance provided by Manchester City Council.</p> <p>The maintenance of the Mersey Valley is based on historical knowledge and is of a reactive nature. A small team of Trafford Council employees carry this work whilst monitoring the space.</p> <p>We will continue to work cohesively with all stakeholders to maintain the spirit of collaboration. There are a number of proposals being currently considered to manage the space in the future. These will be shared with Members when they are finalised.</p>	Ongoing	Cllr Mitchell/ Cllr Coupe
12	That the Executive should ensure that its approach to the collection of food waste and the level of savings expected from the change in approach to its collection is realistic and achievable.		<p>The approach to food waste collections was detailed in the Executive report dated 26th November and the supplemental report of the same date. It is based on the following collection pattern:</p> <ul style="list-style-type: none"> • Green Bin – the green bin for food and garden waste is currently collected every fortnight and this will change to a weekly collection. • Grey Bin – the grey bin for general refuse is currently collected every week and this will change to a fortnightly collection. • All properties will be provided with 	Completed	Cllr Mitchell

			<p>a 7 litre kitchen caddy and a roll of compostable liners to assist residents in recycling their food waste.</p> <p>While the above collection service will be available to all properties, there are a number of bespoke arrangements for particular property types and household circumstance.</p> <ul style="list-style-type: none"> • Terraced properties – if they are unsuitable for a green bin e.g. due to space limitations, will be provided with a 23 litre outdoor caddy in place of a green bin. • Apartments/Flats - Communal green bins will be provided to all apartment/flat complexes prior to the commencement of the weekly food waste collection service. • Large Families - Families with five or more permanent residents in the property will be entitled to a larger 240L grey bin. • Residents with medical conditions - Residents who have medical conditions causing them to generate waste which cannot be recycled will be entitled to a larger 240L grey bin. <p>The financial savings have been established</p>		
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		<p>based on experience from Stockport Council of operating the same frequency of food/garden and non-recyclable waste collections as are being outlined in this proposal. The Greater Manchester Waste Disposal Authority has estimated that 50% of the typical grey bin in Trafford is organic (food/garden) waste. The Council currently collects approximately 38,000 tonnes of waste in the grey bin and from this proposal it is estimated that the tonnage will reduce by 9700 tonnes. These tonnage figures, along with tonnage data for the existing waste collection service have been sent to the Waste Disposal Authority and the difference between the 'as is' service and the proposal for weekly food/garden and fortnightly non-recyclable waste is the basis for the savings proposal of over £1 million per annum put forward.</p>		
13	<p>That the Executive provide further details on the impact of the new initiative in respect of parks maintenance, in particular, whether differential standards would apply to different parks, or within different areas of parks.</p>	<p>The current proposed changes within the Groundforce Structure are focused on improving productivity by 15% and better deployment of our workforce and resources.</p> <p>It is being proposed that the Groundforce workforce is reduced by 10 posts. As Ground force covers both parks and street cleaning officers are confident that this proposal can be mitigated by more efficient delivery.</p> <p>This will deliver improved cost effective outcomes that will enable us to meet on our</p>	Ongoing	Cllr Mitchell

			<p>savings target whilst ensuring that our current standards are maintained in within our Green spaces in the 2013/2014 programme.</p> <p>A small number of parks are maintained to Green flag standard.</p> <p>Our initiative does not seek to reduce standards that our customers experience though there will be some operational changes to ensure cost effective and coherent delivery.</p>		
<p>Page 23</p> <p>14</p>	<p>That Executive provide assurance that the streetscene in Trafford Park will be maintained to ensure that it remains an attractive area to all businesses in the area. They should also ensure that their approach to ensuring this should involve the use of all available methods including, where possible planning and enforcement functions.</p>		<p>We will continue to maintain the Street scene within Trafford Park to the agreed standards that we currently operate to.</p> <p>Following the recent transfer of the enforcement function to ETO, Groundforce and other functions within the business are working more closely to establish synergies that will lead to more cost effective outcomes.</p> <p>This approach will enable the reduction of fly tipping and other anti-social activities across the borough.</p>	<p>Ongoing</p>	<p>Cllr Mitchell</p>

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